

**EVALUATION OF THE** *Special Call for  
Proposals Research Program*

**MIGRATION AND HEALTH ISSUES IN  
MEXICO AND CALIFORNIA  
2003-2005**



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**Collaborative Grants for Binational Teams of  
University of California and Mexican Researchers**

***Sponsored by:* California-Mexico Health Initiative (CMHI), University of California Institute for Mexico and the United States (UC MEXUS), California Program on Access to Care (CPAC), UC Universitywide AIDS Research Project (UARP), Secretaría de Salud de México (SALUD), El Consejo Nacional de Ciencia y Tecnología (CONACYT), Fundación México-Estados Unidos para la Ciencia (FUMEC), and The California Endowment (TCE)**

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## **Executive Summary**

The Mexican-origin population in the United States is growing at an extraordinary rate through both migration and high U.S. birth rates. In 2004, 10.2 million people living in the U.S. were born in Mexico. Mexicans living in the United States represent 3.7% of the total U.S. population and approximately 29% of the country's immigrant population. From 2000 to 2003, the U.S. Latino population increased by 13%, representing not only the fastest-growing population, but also now the second-largest race or ethnic minority in the United States. This rapid population and migration growth calls for policymakers and federal and state institutions to do more to address the needs and concerns of the Mexican-origin population. Specifically, to better accommodate this expanding population of Mexican migrants, immigrants, and their children, the U.S. health care infrastructure needs radical adjustments.

Evidence suggests that there is a trend of health deterioration as Mexican migrant populations takes residence in and acculturates to the United States. For the Mexican-origin population, limited access to health care is an especially critical issue and contributes to this decline in health capital. In 2000, over one-quarter of adult Mexican immigrants had not seen a doctor in the previous two years; about four times the non-Hispanic white rate. Between 1998 and 2001, two-thirds of Mexican immigrant children did not have health insurance. These figures indicate that preventive health care, access to health services, health education, and culturally competent health providers must be readily available to this population, particularly for the poorest and those who are most underserved.

Likewise in Mexico: migration and its health implications deserve special attention. The migration phenomenon challenges current Mexican health service provision paradigms and the allocation of resources, and ought to spur further research in the limited field of migration and health. Public health care delivery in Mexico also needs to change if there is to be a reversal in the present trend of declining health capital for the Mexican migrant population in the United States.

In 2002, key research and funding institutions recognized that the health of Mexican migrants and immigrants is a bilateral responsibility given that this population makes major contributions to the economic and social development of both the United States and Mexico. These institutions also grasped that in order to best assess and

address the unmet health needs of this population through public policy, more research must be conducted in the under-developed field of health and migration on a binational level. At present, there exist significant amounts of research that focus on either migration or Latino health. However, studies that bring together these two themes and concentrate on their intersections are rare.

Subsequently in 2003, this contingent of sponsoring institutions launched the annual *Special Call for Proposals on Migration and Health Issues in Mexico and California (Call for Proposals)* to provide seed funds for binational research on migration and health, with the ultimate goal of creating a binational network of researchers and institutions that can inform policy decisions on health issues related to migration.

While only the first *Call for Proposals* grant cycle is complete, it has already had an impact on public policy, academia, and community health. Through its working principles and its commissioned projects, the *Call for Proposals* has contributed toward achieving several binational objectives:

- Promoting U.S.-Mexico collaborations.
- Affecting public policy development. Preliminary research results have influenced public policy agendas in the U.S. and Mexico, especially through one-on-one meetings with legislative staff and representatives of federal, state, and international agencies operating in both countries.
- Addressing research gaps in migration and health issue areas.
- Constructing a binational network of researchers and institutions that includes research centers of Mexican states distinguished by high international mobility. This network will ensure that research on migration and health will be sustained and expanded.
- Leveraging additional funding for research from foundations and national research institutions.

Most importantly, the *Call for Proposals* has established that migrant and immigrant health is a responsibility of both the United States and Mexico. Apart from the social and cultural contributions that people of Mexican origin bring, the United States also depends upon the economic contributions of people of Mexican origin. Likewise, due to linkages with their communities of origin in Mexico, Mexico's Secretariat of Health

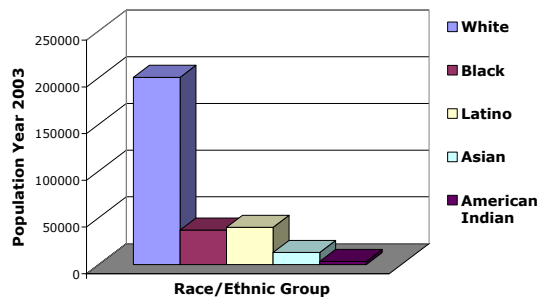
strives to have a healthy Mexican community regardless of where they live. Since public health is a policy concern shared by both countries, it becomes an arena where bilateral agreements are possible

In light of the research and programmatic successes outlined in this report and the major increase of migrants and immigrants of Mexican origin in the U.S. without a corresponding increase in research and resources devoted to health care for them, our main recommendation is that the *Call for Proposals* be extended to researchers nationwide. This will require the involvement of federal agencies, such as the Centers for Disease Control and the National Institutes of Health, and foundations that work nationwide. This expansion will enable researchers from other first-rate institutions, particularly ones located in states with high rates of migration, to pursue studies on migration and health issues.

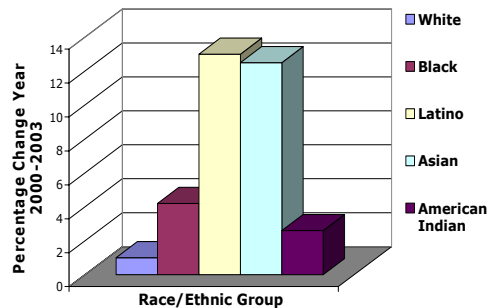
## Section One: Introduction

The Mexican-origin population in the United States is growing at an extraordinary rate through both migration and high birth rates. In 2004, 10.2 million people living in the U.S. were born in Mexico.<sup>1</sup> Mexicans living in the United States represent 3.7% of the total U.S. population and approximately 29% of the country's immigrant population. In California, people of Mexican-origin represent 72% of the Latino population, and 24% of the total state population of 35 million.<sup>2</sup> From 2000 to 2003, the overall Latino population increased approximately by 13%, representing not only the fastest-growing population, but also now the second-largest racial/ethnic minority in the United States (*Graph 1 and Graph 2*).<sup>3</sup> By the year 2050, the U.S. Census Bureau projects that the Latino population will reach 102.6 million, and constitute 24.4% of the U.S. population.<sup>4</sup>

**Graph 1: U.S. Population in Year 2003 by Race and Ethnic Group**



**Graph 2: Growth in U.S. Population, 2000-2003, by Race and Ethnic Group**



Source: U.S. Census Bureau, *Statistical Abstract of the United States: 2004-2005*.

This rapid population and migration growth calls for policymakers and federal and state institutions to do more to address the needs and concerns of the Mexican-origin population. Specifically, in order to provide health care to this expanding population of Mexican migrants, immigrants, and their children (both foreign and U.S.-born), the U.S. health care infrastructure needs radical adjustments. Evidence suggests that there is a trend of health deterioration as Mexican migrant populations

<sup>1</sup> U.S. Census Bureau. *Statistical Abstract of the United States: 2004-2005*.

<sup>2</sup> U.S. Census Bureau. Census 2002, Summary File 1 (SF 1). Retrieved June 2, 2005, from <http://quickfacts.census.gov/qfd/states/060001k.html>

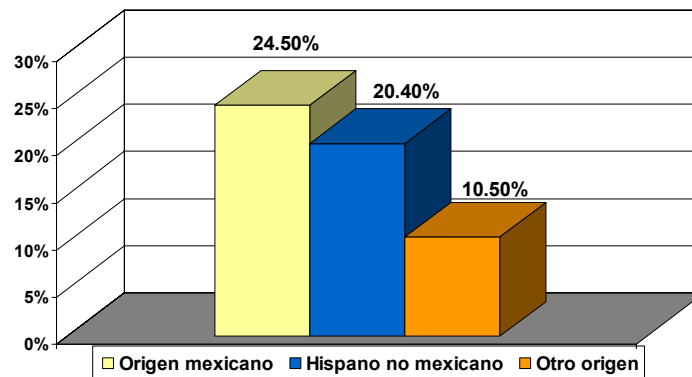
<sup>3</sup> *Ibid.*

<sup>4</sup> U.S. Census Bureau. 2004. "U.S. Interim Projections by Age, Sex, Race, and Hispanic Origin."

takes residence in and acculturates to the United States.<sup>5,6</sup> For the Mexican-origin population, limited access to health care is an especially critical issue and contributes to this decline in health capital. In 2000, over one-quarter of adult Mexican immigrants had not seen a doctor in the previous two years; about four times the non-Hispanic white rate.<sup>7</sup> Between 1998 and 2001, two-thirds of Mexican immigrant children did not have health insurance.<sup>8</sup>

The above figures indicate that preventive health care, access to health services, health education, and culturally competent health providers must be readily available to this population, particularly for the poorest and those who are most underserved. At present, people of Mexican-origin in the United States experience higher poverty rates than other Hispanic groups as a whole (*Graph 3*).

**Graph 3: Percentage of Population Living Below U.S. Federal Poverty Level By Mexican Origin, Hispanic not of Mexican Origin, and All Other Groups**



Source: Santibanez, Jorge. *El Colegio de la Frontera del Norte*, 2003.

Likewise in Mexico, migration and its health implications also deserve special attention. The migration phenomenon challenges current Mexican health service provision paradigms and the allocation of resources, and ought to spur further research in the limited field of migration and health. Public health care delivery in

<sup>5</sup> Cho, Y., W. Frisbie, R. Hummer, and R. Rogers. 2004. Nativity, Duration of Residence, and the Health of Hispanic Adults in the United States. *International Migration Review* 38(1): 184-211.

<sup>6</sup> Jasso, G, Massey, D.S., Rosenzweig, M.R., and J.P. Smith. 2004. "Immigrant Health—Selectivity and Acculturation." RAND. The Institute for Fiscal Studies, WP04/23.

<sup>7</sup> U.S. Dept. of Health and Human Services. 2000. *Healthy People 2010: Understanding and Improving Health*. 2<sup>nd</sup> ed. Washington, DC: U.S. Governmental Printing Office.

<sup>8</sup> Scott, G., and H. Ni. 2004. Access to Health Care Among Hispanic/Latino Children: United States, 1998-2001. *Advance Data from Vital and Health Statistics* No. 344.

Mexico also needs to change if there is to be a reversal in the present trend of declining health capital for the Mexican migrant population in the United States.

Current data on remittances and health expenditures in Mexican and U.S.-based Mexican-origin communities exhibit a clear picture of why this transformation of health care delivery is so critical, and also why a binational approach to the problem is essential. Over one million families are connected across the border by billions of dollars that flow from the North to the South and by the millions of workers who travel from South to North for employment. In 2003, more than four million Mexican-origin workers in the United States sent \$13 billion to their relatives in Mexico, which numbered 5.9 million people.<sup>9</sup> According to Princeton's Mexican Migration Project Survey, the most common use of remittances was for health care expenses.<sup>10</sup> According to an estimate of the National Population Council of Mexico (CONAPO in its Spanish acronym), 80% of households that depend on remittances are uninsured.<sup>11</sup>

In order to best assess and address the unmet health needs of this population through public policy, more research must be conducted in the under-developed field of health and migration on a binational level. The health of Mexican migrants and immigrants is a bilateral responsibility given that this population makes major contributions to the economic and social development of both the United States and Mexico. Currently, very limited research is available on the relationship between migration and health. At present, there exist significant amounts of research that focus on either migration or Latino health. However, studies that bring together these two themes and concentrate on their intersections are rare. To fill this gap, the California-Mexico Health Initiative (CMHI), a program of the California Policy Research Center, together with the University of California Institute for Mexico and the United States (UC MEXUS), the California Program on Access to Care (CPAC), the UC Universitywide AIDS Research Project (UARP), la Secretaría de Salud de Mexico (Salud), el Consejo Nacional de Ciencia y Tecnología (CONACYT), la Fundación México-Estados Unidos para la Ciencia (FUMEC), The California Endowment (TCE), and other key stakeholders have brought together a binational contingent of partners with complementary interests to create the annual *Special Call for Proposals on Migration and Health Issues in Mexico and California (Call for Proposals)* to provide

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<sup>9</sup> Pew Hispanic Center, InterAmerican Development Bank, and Bendixen & Associates. 2003. *Remittance Senders and Receivers: Tracking the Transnational Channels*, Washington, D.C.

<sup>10</sup> Princeton University, Office of Population Research, Mexican Migration Project Survey. Retrieved May 5, 2005, from <http://mmp.opr.princeton.edu/>.

<sup>11</sup> Consejo Nacional de Población. 2003. *Índice de Intensidad Migratoria*, México.



seed funds for binational research on migration and health, with the ultimate goal of creating a binational network of researchers and institutions that can inform policy decisions on health and migration.

## **Section Two: Program Background and Overview**

During the first CMHI-sponsored Binational Public Policy Forum on Migration and Health (October 18-19, 2001) a component of CMHI's annual U.S.-Mexico Binational Health Week, participating researchers proposed the creation of a grants program that would support the study of migration's impact on health, not only for those who migrate but also for their families in Mexico. During this two-day forum held at the University of California, Berkeley, 120 academics, health professionals, and health administrators from both countries exchanged information about the state of research on migrant health. The participants addressed the need to establish binational relationships to work collaboratively on these topics and to fill this research gap.

The following year, lead agencies obtained funding and binational support for this proposed grants program. The *Call for Proposals* was officially launched during the 2002 Policy Forum in Morelia, Michoacán, an event that drew 250 people and whose inaugural ceremony was presided over by Mexico's First Lady, Martha Sahagún de Fox, Mexico's Secretary of Health, Julio Frenk, and the Governor of Michoacán, Lázaro Cárdenas Batel.

The *Call for Proposals* reflects a binational collaborative research agenda, and the grants support short-term policy studies. The *Call for Proposals* provides seed funds for developing projects in different academic disciplines. High priority is given to projects that are interdisciplinary and multi-institutional. The primary objective of the *Call for Proposals* is to enhance the understanding of and knowledge about migration and health-related issues facing Mexican-origin workers and their families in California and Mexico. A second objective is to promote new collaborative research and long-term linkages among the University of California campuses and Mexican research institutions. One avenue for creating these long-term linkages is the development of a binational network of researchers who will continue to work on these topics beyond the *Call for Proposals* funding cycles.

Research areas for consideration include, but are not limited to, mental health, including issues related to domestic violence, alcohol, and substance abuse;

nutrition, including the relationship between diet and diabetes, hypertension, high cholesterol, and obesity; infectious diseases, including HIV/AIDS, tuberculosis, hepatitis, and STDs; occupational health and injury prevention, especially in relation to adolescent farm workers; women's health, including issues related to cervical and breast cancer and reproductive health; oral health; insurance coverage, access to care, and use of services; and policy and program development to improve migrant/immigrant health.

While only the first *Call for Proposals* grant cycle is complete, all current and future research is and will be used to provide health professionals, policymakers, and other stakeholders with the facts they need to influence and make key decisions at the local, state, and federal levels in both countries. Initial research results have been discussed in academic circles and applied in policy settings, and have drawn binational attention from academics and professionals specializing in migrant/immigrant health issues. The lead agencies expect that the research findings will be increasingly integrated into the programmatic and political planning processes in both countries, to address migrant-population health needs.

In addition to researchers' plans to publish their results in top-tier journals, results have been presented in forums and meetings across the United States and Mexico for audiences of other researchers, legislators and other policymakers, health professionals, and key decision-makers. This widespread dissemination of preliminary research findings in both countries has already contributed significantly to bringing health and migration issues to the forefront of the public policy agendas in Mexico and the United States. The *Call for Proposal's* goal of improving the health of this population through research, analysis, and binational collaboration is beginning to crystallize.

While the *Call for Proposals* was initiated in California, various U.S. universities have approached CMHI expressing their interest in being a part of this effort. Their states share California's potential challenges and opportunities regarding the health of Mexican migrants and immigrants. As of the 2004 U.S. Census, thirteen states each are home to over 100,000 Mexican immigrants (*Table 1*).

**Table 1. States with 100,000 or more Mexican Immigrants**

<b>Rank</b>	<b>States</b>	<b>Size</b>
1	California	4,026,219
2	Texas	2,356,703
3	Illinois	665,237
4	Arizona	618,105
5	Colorado	258,482
6	Florida	223,162
7	Nevada	188,250
8	Nueva York	187,797
9	Carolina del Norte	164,121
10	Oregon	160,540
11	Georgia	150,061
12	Washington	148,530
13	New Mexico	117,049

*Source: 2004 US Census, SF-4*

Given that Mexican migrants and immigrants are now located in significant numbers in many states besides California, lead agencies expect that for grant cycles 2006-2010 the *Call for Proposals* pool of participating U.S. universities will expand beyond the University of California system.

## Section Three: Program Design

Prior to issuing the first *Call for Proposal*, UC MEXUS and CMHI designed a structure for all its phases (preparation, submission, review, grant administration, and reporting processes).

### A. Preparation

Written commitments of funds from partner institutions were obtained, followed by the convening of a small working committee composed of key people with decision-making authority from UC MEXUS and CMHI. The working committee established the following parameters for the draft *Call for Proposals*:

- 1) program goals, including specific areas of research, preferred emphases, requirements;
- 2) wording to reflect the goals of the program;
- 3) deadlines for the *Call for Proposals* and research project timelines;
- 4) eligibility requirements;
- 5) funding amounts and allowable budget items;
- 6) submission requirements and procedures;
- 7) review process and criteria;
- 8) administration of awards;
- 9) reporting requirements;
- 10) program contacts for applicants; and
- 11) Plans for printing and dissemination of the *Call for Proposals*.

The working committee also established that fundamental program decisions (e.g., program goals, *Call for Proposals* drafts, and funding decisions) are co-decisions of the working group, while basic administrative questions (e.g., budget approvals, project extensions, transfers of funds) are the responsibility of UC MEXUS as the Office of Record.

UC MEXUS drafted a *Call for Proposals* and circulated it to partner institutions for review, then circulated successive drafts until agreement was reached. The document was then printed and posted on the web pages of the lead institutions.

## **B. Proposal Submission**

Sponsoring institutions sent out over 3,000 hard copies of each *Call for Proposal*, respectively, to their UC and Mexico mailing lists. At least 3,000 copies were also sent electronically.

Complete proposals were submitted directly to UC MEXUS (or to CMHI, which forwarded them to UC MEXUS). After the proposal submission deadline passed, UC MEXUS checked all proposals for basic administrative criteria, including the eligibility of PIs, and the completeness of each proposal packet.

## **C. Review Process**

The proposals were put through a rigorous peer review by a panel of high-level researchers with expertise in the general areas presented by the proposals.

*The procedure was as follows:*

A list of proposals, PIs, institutions, and project titles was presented to the UC MEXUS and CMHI directors. A preliminary breakdown of research expertise needed for the review committees was also provided. Committee members were appointed after close consultation to ensure fair representation across the academic fields found in the pool of proposals and equal numbers of Mexican and U.S. reviewers.

Proposals were sent out to appointed committee members along with instructions for the review process, criteria for evaluation and scoring, and evaluation sheets. Members were asked to assign a preliminary scoring prior to meeting. In addition, two primary reviewers were assigned for each proposal. Primary reviewers were requested to read through their proposals in greater detail, consulting with outside experts if necessary.

The binational committee met for one day at UC MEXUS, where each proposal was discussed individually and the scores of each committee member were recorded and tallied. The committee then provided a list of recommended proposals in order of priority for funding and a cut-off in the ranking between recommended projects and those that were not recommended.

Funding decisions were made based on the review committees' rankings and recommendations, combined with available funding, essentially approving projects as far down the ranked recommended list as funds would allow.

**D. Grant Administration**

UC MEXUS served as the Office of Record for the grants and administered the transfer of funds and terms of agreements for each grant. Following the final funding decisions, a review of the approved projects' budgets was conducted to ensure UC and CONACYT guidelines.

After the budgets were approved, letters of award were prepared in English and Spanish and sent to each sponsoring institution for signature. Upon receipt of the signed letters, UC MEXUS forwarded them to the PIs along with the terms of agreement for each grant. The terms of agreement were essentially a contract for the appropriate administration of funds at the PIs' institutions or UC campus.

Upon receipt of the signed terms of agreement, UC MEXUS initiated funding for that particular project. It is important to note that funds were never sent directly to or processed in the name of the PI. The UC campus/department or Mexican institution, respectively, was responsible, under the terms of agreement, for administration of grant funds during the project period.

**E. Reporting**

At the end of the 18-month project period, PIs were required to provide a narrative report outlining outcomes to UC MEXUS and CMHI. In collaboration with their respective institution, they were also required to submit a final financial report to UC MEXUS on the expenditure of funds. The reports were reviewed by the UC MEXUS Assistant Director, and, when approved, the PIs were notified that the grant is considered closed. UC MEXUS and CMHI recorded the results and placed the grant file in the closed accounts.

The project periods for the 2003-2005 Call for Proposals are:

**2003:** October 1, 2003 to March 31, 2005

**2004:** June 1, 2004 to November 30, 2005

**2005:** June 1, 2005 to November 30, 2006

Grant recipients were required to participate in up to two research forums during the project period. Background or preliminary data and final results were discussed during the annual Binational Public Policy Forum on Migration and Health (October). These forums represent an opportunity for the PIs to jointly present their findings to a binational research audience, discuss their conclusions with other program participants, and receive feedback. PIs were also expected to work with CMHI, the California Program on Access to Care (CPAC), and Mexico's Secretariat of Health (Salud) to provide technical assistance in the formulation of reports and public policy recommendations.

## **Section Four: Program Implementation**

### ***2003 Funding Cycle***

On May 9, 2003, representatives from lead agencies, as well as observers from several sponsoring agencies, met at UC Riverside with the review committee to analyze the 13 proposals submitted by Mexican and UC research teams for the 2003 *Call for Proposals*. The committee was comprised of the following Mexican and UC researchers, selected jointly by the associated institutions:

#### **Review Committee**

##### *Experts*

- *Carole Browner*, Professor, Departments of Psychiatry and Biobehavioral Sciences and Anthropology, UC Los Angeles.
- *Patricia Cravioto*, Research and Evaluation Director, Mexican Secretariat of Health, General Office of Epidemiology.
- *Catalina Denman*, Dean, University of Sonora (El Colegio de Sonora).
- *Barbara Herr-Harhorn*, Associate Director, Institute for Social, Behavioral and Economic Research, UC Santa Barbara.
- *Marc Saadía*, Professor, Pediatric Dentistry Department, Technical University of Mexico (Universidad Tecnológica de México).
- *Miguel Ángel Villasís Kever*, Health Research Coordinator, Mexican Institute of Social Security (Instituto Mexicano del Seguro Social).

##### *Observers*

- Juan Vicente Palerm, UC MEXUS
- Andrea Kaus, UC MEXUS
- Martha Ponce, UC MEXUS
- Xochitl Castañeda, CMHI
- Rosario Alberro, CMHI
- Maria Chacon, CPAC
- Susan Carter, CPAC

#### ***Funded Proposals***

Six proposals were selected for funding. See Appendix A and Appendix B for detailed information of each funded proposals.



1. William Cunningham (Division of General Internal Medicine & Health Services Research, UCLA) and René Leyva Flores (Centro de Investigaciones en Salud Poblacional, Instituto Nacional de Salud Pública). *Adaptation and Testing of the HIV Legal Checkup for Mexican Origin Migrants with HIV/AIDS.*
2. Yvette Flores-Ortiz (Chicana/o Studies, UCD) and Enriqueta Valdez Curiel (Departamento de Medicina, CUSUR-Universidad de Guadalajara). *Intimate Partner Violence and Depression Among Rural Mexican Women.*
3. Margaret Handley (Family and Community Medicine, UCSF) and Sandra G. García (Reproductive Health-Latin America and the Caribbean, Population Council-Mexico). *Understanding Repeat Cesarean Births Among Mexican Migrant Women in California and Mexico: A Binational Approach.*
4. Kurt Organista (School of Social Welfare, UCB) and María Elena Medina-Mora (Investigaciones Epidemiológicas, Instituto Nacional de Psiquiatría). *Mental Health and Migration: A Binational Proposal.*
5. Marc B. Schenker (Epidemiology and Preventive Medicine, UCD) and Fernando Meneses González (Centro de Investigaciones en Salud Poblacional, Instituto Nacional de Salud Pública). *Determinants of Health and Disease Among Mexican Migrants to California.*
6. Steven P. Wallace (Center for Health Policy Research, UCLA) and Elmyra Ybañez-Zepeda (Estudios de Población, El Colegio de la Frontera del Norte). *Trans-Border Relations and Health Care in Tijuana.*

### **2004 Funding Cycle**

On May 9, 2004, representatives from the lead institutions met at UC Riverside with the review committee to analyze the 15 proposals submitted by Mexican and UC research teams for the 2004 *Call for Proposals*. The committee was comprised of the following Mexican and UC researchers, selected jointly by the associated institutions:

## **Review Committee**

### *Experts*

- *Carole Browner*, Professor, Departments of Psychiatry and Biobehavioral Sciences and Anthropology, UC Los Angeles.
- *Bernardo Hernández-Prado*, Director, Department of Nutrition and Chronic Diseases, National Institute of Public Health.
- *Barbara Herr-Harthorn*, Associate Director, Institute for Social, Behavioral and Economic Research, UC Santa Barbara.
- *Rodolfo Martínez-Fernández*, Professor, Department of Medicine, Research and Post-Graduate Division, University of Puebla (Benemérita Universidad Autónoma de Puebla).

### *Observers*

- Roberto Sánchez-Rodríguez, UC MEXUS
- Andrea Kaus, UC MEXUS
- Martha Ponce, UC MEXUS
- Xochitl Castañeda, CMHI
- Rosario Alberro, CMHI

## **Funded Proposals**

Seven proposals were selected for funding. See Appendix A and Appendix B for detailed information of each funded proposals.

1. Yvette Flores-Ortiz (Chicana/o Studies, UCD) and Enriqueta Valdez Curiel (Medicina, Universidad de Guadalajara). *On the Other Side: An Educational Radio Production About Mexican Migrants on Both Sides of the Mexican-American Border.*
2. Melvin B. Heyman (Pediatrics, GI/Nutrition, UCSF) and Arturo Jiménez-Cruz (Facultad de Medicina, Departamento de Nutrición, UABC-Campus Tijuana). *Risk Factors for Pediatric Overweight Including Migration and Acculturation: Two Case Control Studies in the Tijuana and San Francisco Public Schools.*
3. Teresa Juarbe (Family Health Care Nursing, UCSF) and Isabel Hernández Tezoquipa (Salud Comunitaria y Bienestar Social, Instituto Nacional de Salud Pública). *Cross Cultural and Self-Care Issues to Prevent Cardiovascular Disease Risk Factors in Immigrant Mexican Women.*

4. Jessica Kingston (Reproductive Medicine, UCSD) and Daniel Grossman (Regional Office-Latin American and Caribbean, Population Council). *Research on Mexican Women Who Seek Safe Abortion Services in California*.
5. Steven R. López (Psychology, UCLA) and Carmen Lara-Muñoz (Psiquiatría, Benemérita Universidad Autónoma de Puebla). *Schizophrenia in Mexican Communities on Both Sides of the Border*.
6. Blas Pérez Henríquez (Goldman School of Public Policy, UCB) and Juan Pablo Gutiérrez (Centro de Investigación en Sistemas de Salud, Instituto Nacional de Salud Pública). *Patterns of Health Expenditure, Provider Preferences and Insurance Enrollment Among Mexican Families Who Receive Remittances from the United States*.
7. Patricia Zavella (Latin American & Latino Studies, UCSC) and María P. Fortuny Loret (CIESAS-Península). *The Journey: Oxnard, Yucatán/San Francisco, California*.

## **2005 Funding Cycle**

On August 30, 2005, representatives from the lead institutions met at UC Riverside with the review committee to analyze the 16 proposals submitted by Mexican and UC research teams for the 2005 *Call for Proposals*. The committee was comprised of the following Mexican and UC researchers, selected jointly by the associated institutions:

### **Review Committee**

#### *Experts*

- *Carole Browner*, Professor, Departments of Psychiatry and Biobehavioral Sciences and Anthropology, UC Los Angeles.
- *Homero Martínez Salgado*, Researcher, Coordinación de Investigación en Salud, Instituto Mexicano del Seguro Social (Centro Médico Nacional Siglo XXI)
- *Barbara Herr-Harthorn*, Associate Director, Institute for Social, Behavioral and Economic Research, UC Santa Barbara.
- *Rodolfo Martínez-Fernández*, Professor, Department of Medicine, Research and Post-Graduate Division, University of Puebla (Benemérita Universidad Autónoma de Puebla).
- *Dillys Walker*, Researcher, Salud Reproductiva, Instituto Nacional de Salud Pública, CISP-DSR, UCSF.

### *Observers*

- Roberto Sánchez-Rodríguez, UC MEXUS
- Andrea Kaus, UC MEXUS
- Martha Ponce, UC MEXUS
- Mike Shultz, CMHI
- Rosario Alberro, CMHI

### ***Funded Proposals***

Eight proposals were selected for funding. See Appendix A and Appendix B for detailed information of each funded proposals.

1. Brenda Eskenazi (Epidemiology, UC Berkeley) and Lynnette M. Neufeld (Nutrición y Epidemiología, Instituto Nacional de Salud Pública). *Understanding the effects of U.S.-Mexico migration on childhood overweight*
2. Leslie Wilson (Clinical Pharmacy, UC San Francisco) and Janine Ramsey (Centro de Investigaciones sobre Enfermedades Infecciosas, Instituto Nacional de Salud Pública). *Collaboration on identification of risk and cost-effectiveness of Chagas Disease in the Mexican and California blood supply by geographic migration.*
3. Alexandra Minnis (OB, GYN & RS, UC San Francisco) and Sergio Bautista Arredondo (Economía y Políticas de Salud, Instituto Nacional de Salud Pública). *Migration and reproductive health among Mexican youth.*
4. Patricia B. Crawford (Nutritional Sciences and Toxicology, UC Berkeley) and Montserrat Bacardi Gascón (Facultad de Medicina-Nutrición, Universidad Autónoma de Baja California). *Evaluation of the period of adiposity rebound for the prevention of obesity.*
5. Lucia L. Kaiser (Nutrition, UC Davis) and Luz Elvia Vera Becerra (Facultad de Medicina Nutrición, Universidad Autónoma de Guanajuato). *Influence of migration on nutritional practices that promote obesity in young children.*
6. John M. Ringman (Neurology, UC Los Angeles) and Yaneth Rodriguez (Laboratorio de Psicología Experimental, Instituto Nacional de Neurología).

*Neuropsychological changes in persons of Mexican descent at-risk for familial Alzheimer's Disease.*

7. Janet C. King (Nutrition, UC Davis) and Esther Casanueva (Investigaciones en Salud Pública, Instituto Nacional de Perinatología). *Impaired glucose tolerance and diet glycemic load in obese, pregnant women in Mexico City.*
  
8. Edgar W. Butler (Sociology, UC Riverside) and Celia Mancillas Bazán (Psicología, Universidad Iberoamericana). *Interpersonal and mental health in Mexican immigrant couples: a bicultural study.*

### **Number of Projects by Call for Proposal Funding Areas**

<b>FUNDING AREAS</b>	<b>Number of Funded Projects*</b>
Mental Health	5
Nutrition	5
Infectious Diseases	3
Occupational Health and Injury Prevention	0
Women's Health	5
Oral Health	0
Access to Care	2
Policy and Program Development (also includes community capacity building projects)	2

\* Some projects fit in more than one funding area

### **Follow-Up Meeting and Training**

CMHI asked the 2003 awarded investigation teams to participate in a follow-up meeting at the UC Office of the President in Oakland, California, on May 27-28, 2004. In this meeting, PIs from both Mexico and California described the progress of their investigations. One of the main objectives of this meeting was the exchange of ideas between grantees. However, other researchers who were interested in migration and health topics and work in these areas were also invited. A workshop provided technical assistance to the research teams on how to implement their public policy recommendations.

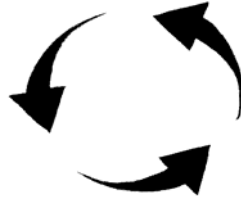
## Section Five: Program Impact and Expected Outcomes

Preliminary findings of the *Call for Proposals* have already had an impact on public policy, on academia, and on community health. Although these areas are distinct, the outcome of activities in one can affect and have implications for the others.

### AREAS OF IMPACT

#### Public Policy

Call for Proposals *research results situate migrant/immigrant health as a binational policy priority at the federal, state, and local levels. The results also have an impact on the health care systems in the U.S. and Mexico and make them more aware and responsive to migrant/immigrant health issues.*



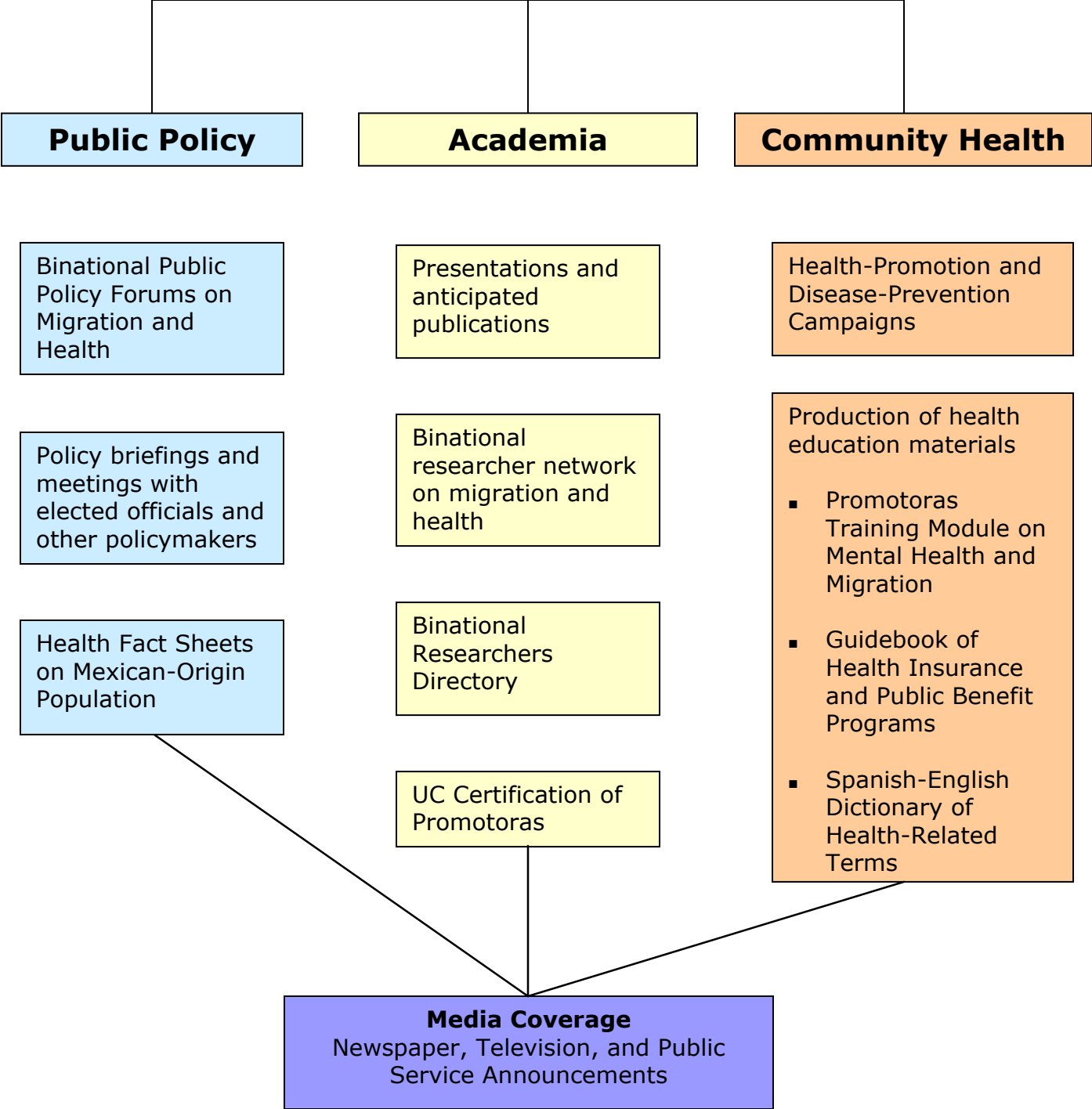
#### Academia

Call for Proposals *results are instrumental to the development of bilateral capacity within research institutions to examine issues related to migration and health. Results also promote the creation of binational researcher networks and enhance capacity building in the health/migration arena.*

#### Community Health

Call for Proposals *research outcomes will provide community advocates with information to better design their programs and enhance capacity at a local level to improve the health and quality of life of migrant/immigrant communities.*

**CALL FOR PROPOSALS**  
**Chart of 2003-2005 Impact & Expected Outcomes**



## ***Public Policy***

### **Binational Public Policy Forums on Migration and Health**

The *Call for Proposals* was respectively initiated and launched at the 2001 and 2002 *Binational Public Policy Forum on Migration and Health* (see *Section Two: Program Background and Overview*). The Policy Forum impact on generating new bilateral working strategies has been exceptional, both in the academic arena and among public policy decision-makers.

During the 2003 Policy Forum at the University of California, Los Angeles on October 16-17, grantees from the first cycle of the *Call for Proposals* presented their project proposals and served as moderators of panels and five workshops (agricultural workers, diabetes, binational research priorities, binational health insurance, and transmittable diseases). Discussions focused on how to use results from the research projects to influence public policy.

Two hundred eighty-five people attended the 2003 Policy Forum, including 70 representatives from Mexico along with many other distinguished guests from both countries. Expert presenters included representatives from the University of California Office of the President, UC Santa Cruz, UCLA, the Universitywide AIDS Research Program, California State University at Fresno, the United States-Mexico Border Health Commission, the Public Policy Institute of California, the California Policy Research Center, the California Department of Health Services, the United States Department of Health and Human Services, the California Department of Managed Care, Stanford Medical School, Texas A & M University, The California Endowment, the California HealthCare Foundation, the United Farmworkers of America, the California Institute for Rural Studies, the California State Legislature, and the California Office of the Governor. From Mexico, there was representation from the Mexican Consulates in California, the Ministry of Health, state secretaries of health from six of the Mexican states with high international migration (Oaxaca, Michoacán, Morelos, Jalisco, Baja California, and Guanajuato), el Consejo Nacional de Población, Congreso Mexicano, Instituto para los Mexicanos en el Exterior, IMSS, Universidad Autónoma de México, Programa de Jornaleros Agrícolas de México, El Colegio de la Frontera Norte, and CENSIDA.



The 2004 Policy Forum in León, Guanajuato, on October 11-12 brought together 250 forum participants, including high-level government officials from Mexico and the U.S., university representatives, foundation directors, legislators, community leaders, and other key stakeholders from both countries. The event was inaugurated by Mexico's President Vicente Fox, Mexico's Secretary of Health Julio Frenk, and the then U.S. Secretary of Health and Human Services, Tommy Thompson. Binational teams of researchers from the 2003 cycle of the *Call for Proposals* presented their preliminary results and led workshops. The Policy Forum also presented researchers with the opportunity to network with other researchers and key public policy decision-makers.

### **Policy Briefings and Meetings**

Preliminary findings from *Call for Proposals* research have been used to inform key decision-makers about health policy issues concerning the Mexican-origin population. These decision-makers/agencies include the Pan American Health Organization (PAHO), the U.S. Department of Health and Human Services, the California Department of Health Services; Senator Diane Feinstein, Senator Barbara Boxer, Congresswoman Hilda Solis, Congresswoman Nancy Pelosi, numerous members of the California State Senate and Assembly, and the U.S.-Mexico Border Health Commission.

CMHI in partnership with The California Endowment has also used preliminary results from *Call for Proposals* research to brief policymakers who drafted the recently introduced McCain-Kennedy *Secure America and Orderly Immigration Act*, legislation that acknowledges the need for co-responsibility in health issues that affect Mexican migrants/immigrants. Directly related to research findings from *Call for Proposals* impacts, the McCain-Kennedy Bill includes recommendations to help Mexico facilitate the return of workers for health care needs and to help Mexico establish a public-private program that would cover health care needs of its citizens working in the United States.

In Mexico, preliminary research findings have been presented in different divisions of the federal Secretariat of Health and Secretariat of Foreign Affairs. Governors and the Secretaries of Health from the following states have been briefed on preliminary results from *Call for Proposals* projects: Zacatecas, Michoacán, Guanajuato, Jalisco, Oaxaca, Puebla, Morelos, and Baja California. Agencies such as the National

Association of State Offices for Migrant Issues (*CONOFAM* in its Spanish acronym) and the Instituto Nacional de Migración of the Secretaría de Gobernación have also attended presentations by researchers in the *Call for Proposals* program. The Health Commissions of the Mexican Senate and Assembly have also incorporated preliminary research results into their work, primarily through the work of Senator Marco Antonio Xicotencatl Reynoso and Senator Genaro Borrego Estrada.

### **Fact Sheets**

Research funded under the *Call for Proposals* has facilitated the creation of CMHI's *Health Fact Sheets on the Mexican-Origin Population* by providing statistical information on demographics, access to health care, infectious diseases, diabetes, occupational health and safety, and information specific to agricultural workers. Grantees have also peer-reviewed new and existing *Fact Sheets*. Distributed at the annual Policy Forum during Binational Health Week, in media kits sent to thousands of press contacts in Mexico and the United States, at policy meetings, and at conference presentations, the *Fact Sheets* have proven to be powerful educational tools.

### **Academia**

#### **Presentations and Anticipated Publications**

Researchers funded under the first two *Call for Proposals* cycles have already given 40 presentations of preliminary results in Mexico, the United States, and Central America. For example, at the 11<sup>th</sup> annual public health forum organized by the Mexican National Institute of Public Health (INSP), held March 10-14, 2005, in Cuernavaca, Mexico, CMHI organized a symposium on Health and Migration in which the *Call for Proposals* grantees presented their preliminary results and public policy recommendations before colleagues and Mexican decision-makers. Their studies were on the determinants of health and disease among Mexican migrants to California and trans-border relations and health care in Tijuana.

Since the first full 18-month research cycle has only recently concluded, there are no publications to date. However, grantees are anticipating publication in a wide variety of major peer-reviewed journals, from the *Journal of Policy Analysis* and the *Journal*

of *Medical Anthropology* to the *Revista Latino Americana de Psiquiatría*. Additionally, through meetings between select *Call for Proposals* grantees and CONAPO executives, a publication project co-sponsored by Mexico's Secretariat of Health and including research findings obtained by CONAPO and researchers working at University of California, Los Angeles and the El Colegio de la Frontera del Norte is under way. The publication is expected to be available by Binational Health Week in October 2005.

In order to sustain and expand their projects, research teams have leveraged additional funding and are proposing projects to other foundations and agencies, including the Ford Foundation, The Packard Foundation, and CONACYT. Two teams have applied for funding from national agencies, including the National Institutes of Health, Centers for Disease Control, the National Institute for Occupational Safety and Health, and the National Center on Minority Health and Health Disparities.

### **Binational Researcher Network on Migration and Health**

CMHI, INSP, Salud, CONACYT and other sponsoring agencies are engaged in creating a binational researcher network on migration and health. The purpose of this network is to help researchers meet to exchange findings and debate critical health issues linked to or exacerbated by migration. The network is expected to provide for regular exchanges among researchers and policymakers, community advocates, and health service providers for the purpose of policy priority setting and formulation. This network will be a venue in which past, present, and future *Call for Proposals* grantees maintain relationships beyond their funding cycles, continue to receive feedback, and sustain advances in this area of research. Because population movement between the United States and Mexico is a permanent phenomenon that will constantly challenge existing health care paradigms in both countries, this network will provide a unique forum for dialogue and debate over how to improve public policy in these vital matters.

Toward this end, the lead agencies have begun to: establish an interim board; develop the strategic plan; establish a temporary secretariat and a preliminary Web site; obtain institutional support from key interested parties; identify funding opportunities and obtain commitments; develop a plan to expand the network; prepare bylaws; obtain seed funding to launch the network; and hold meetings to launch the network, confirm the governing board, and approve the bylaws.

## **Binational Researcher Directory**

CMHI developed the *Binational Directory of Researchers in Migration and Health* to create networks among Mexican institutions, the University of California, and other U.S. researchers interested in migration and health. It was designed to complement the *Call for Proposals* process: The program requires that applicant teams be binational, but finding a binational counterpart proved to be a complicated and lengthy task for some researchers. CMHI contacted researchers interested in the areas most critical for migrant-related health issues and, with their consent, published their contact information. The directory is available online at [www.ucop.edu/cprc/cmhi.html](http://www.ucop.edu/cprc/cmhi.html) and currently lists over 250 Mexican and over 280 U.S. researchers. It is divided into areas of research vital to migrant health and is intended to promote binational collaboration between researchers. This constantly updated document will serve as a valuable instrument for the Binational Researcher Network on Migration and Health.

## **UC Certification of Promotoras**

In collaboration with University of California Extension programs, CMHI is planning to obtain accreditation for a 200-hour curriculum to train *promotoras* (also known as outreach workers, community health workers, health coordinators, and community health advisors). *Promotoras* primarily work with migrants/immigrants who have high health risks and live and/or work in areas that are poorly served by health care systems. The curriculum will be based on training manuals developed with the assistance of the *Call for Proposals* researchers and will cover mental health, occupational health and safety, infectious diseases, nutrition, access to health care, oral health, women's health, and reproductive health. Researchers will also be invited to teach seminars on their respective topics and present their findings that are relevant to the work of *promotoras*.

## ***Community Health***

### **Health-Promotion and Disease-Prevention Campaigns**

Research results obtained under the *Call for Proposals* have been used to produce culturally competent Spanish and English health education materials, which have been distributed as a part of health campaigns in three California counties (Monterey, Tulare, and San Diego) and eight Mexican states (Baja California, Guanajuato, Jalisco, Michoacan, Morelos, Oaxaca, Puebla, and Zacatecas). The research findings have also provided health care personnel with a deeper understanding of the relationship between culture and migration among the mobile population. For example, the mental health campaign conducted in three California counties in May 2005 utilized the *promotoras* training manual on migration and health as a basic training tool. *Call for Proposals* grantees were invited to participate in this campaign, and many were a part of these place-based community events.

### **Production of Health Education Materials**

Preliminary findings resulting from the *Call for Proposals* have contributed substantially to CMHI's health education materials. One example is the *promotoras* manual on mental health and migration, titled *Historias del Ir y Venir: Manual para la Salud Mental*. This manual has been used in many trainings in both the U.S. and Mexico to educate *promotoras* about the mental health problems faced by migrants who travel between the two countries. The manual, which focuses on five stages of migration and what migrants may experience at each stage, was reviewed by *Call for Proposals* grantees.

Feedback from *Call for Proposals* researchers has also helped CMHI and partner institutions improve the popular *Guidebook of Health Insurance and Public Benefit Programs*. This guide, originally created in 2001 in booklet form with 10,000 printed copies, has transformed into an annual supplement of 1.5 million copies in the major U.S.-based Spanish newspaper *La Opinión*. The guide has been distributed in Mexico through Vete Sano and IMSS-Oportunidades.

One monumental challenge for health care providers has been the lack of a quality Spanish-English/English-Spanish dictionary of terms specifically related to health. *Call for Proposals* researchers have been instrumental in the review and revision of

the *Spanish-English Dictionary of Health-Related Terms*. Definitions included in the dictionary are not only direct translations but also include cultural nuances that do not come across in direct translation. Many terms used by the Mexican-origin population, including those who speak an indigenous language, are rooted deeply in their semantic and cultural history. A third edition will be available by August 2005. *Call for Proposals* researchers reviewed, edited, and provided feedback for this dictionary, in particular for the new mental health section in the second edition. *Instituto Nacional de Salud Pública* researchers are responsible for the new bioterrorism section of the third edition.

### **Media Coverage**

Mexican and U.S. media have provided ample coverage of events that were implemented binationally in collaboration with Mexico's Secretariat of Foreign Affairs, Secretariat of Health, and the University of California. For example, Binational Health Week 2004 was covered by over 100 newspaper articles throughout Mexico and the United States — articles that included information prepared by *Call for Proposals* researchers.

CMHI *Fact Sheets*, reviewed by *Call for Proposals* researchers, were distributed to thousands of media contacts, and reporters were referred to *Call for Proposals* researchers for expert interviews. Given that, historically, reporters have not been able to easily access binational data on migration and health, they have expressed great satisfaction with both the materials and the opportunity to interview these experts on various health topics.

Public service announcements, covering topics suggested by *Call for Proposals* researchers, have also aired in Mexico and California during Binational Health Week on numerous radio stations. Reporters from television programs that focus on the Mexican-origin population have interviewed staff members from partner organizations, who discussed *Call for Proposals* research findings during these interviews.

## Section Six: Conclusions and Recommendations

### *Conclusions*

Through its working principles and commissioned projects, the *Call for Proposals* has contributed toward achieving several binational objectives:

- Promoting U.S.-Mexico collaborations.
- Affecting public policy development. Preliminary research results have influenced public policy agendas in the U.S. and Mexico, especially through one-on-one meetings with legislative staff and representatives of federal, state, and international agencies operating in both countries.
- Addressing research gaps in migration and health issue areas.<sup>12</sup>
- Constructing a binational network of researchers and institutions that includes research centers of Mexican states distinguished by high international mobility.<sup>13</sup> This network will ensure that research on migration and health will be sustained and expanded.
- Leveraging additional funding for research from foundations and national research institutions.

Most importantly, the *Call for Proposals* has established that migrant and immigrant health is a responsibility of both the United States and Mexico. Apart from the social and cultural contributions that people of Mexican origin bring, the United States also depends upon the economic contributions of people of Mexican origin. Likewise, due to linkages with their communities of origin in Mexico, Mexico's Secretariat of Health strives to have a healthy Mexican community regardless of where they live. Since public health is a policy concern shared by both countries, it becomes an arena where bilateral agreements are possible

It is in the best interest of both countries to preserve the health capital of Mexican migrants and immigrants; both need start planning seriously to improve disease-prevention services and medical coverage for this population. The health of

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<sup>12</sup> These areas include but are not limited to: mental health; nutrition; infectious diseases; occupational health and injury prevention; women's health; reproductive health; oral health; policy research on insurance coverage, access to care, and service utilization.

<sup>13</sup> Jalisco, Michoacán, Morelos, Baja California, Zacatecas, Oaxaca, Guanajuato, and Puebla.

individuals and the health of both countries as a whole must be preserved and maintained, as a matter of dignity and human rights.

### ***Recommendations***

- In light of the research and programmatic successes outlined in this report and the major increase of migrants and immigrants of Mexican origin in the U.S. without a corresponding increase in research and resources devoted to health care for them, our main recommendation is that the *Call for Proposals* be extended to researchers nationwide. This will require the involvement of federal agencies, such as the Centers for Disease Control and the National Institutes of Health, and foundations that work nationwide. This expansion will enable researchers from other first-rate institutions, particularly ones located in states with high rates of migration, to pursue studies on migration and health issues.
- We call on governors in Mexico and scientific institutions in Mexican states characterized by high international mobility to allocate funding to this research program and to encourage social scientists who are not already involved to participate. Their contribution will be critical if the *Call for Proposals* is to have an effect on local public policies and social welfare programs in both countries.
- We urge legislators in both countries to develop legislation to ensure the continuity of the research program that the *Call for Proposals* makes possible.
- We urge traditional research institutions to develop research capacity on health and migration issues. Migration between the United States and Mexico is a permanent phenomenon, but neither country is prepared for the social-economic implications of this trend. Research generated by programs such as the *Call for Proposals* will inform and guide decision-makers on both sides of the border and lead to the creation of responsible and responsive public policies for the health and well-being of Mexican migrants and immigrants.

The current and forthcoming research funded via the *Call for Proposals* represents the culmination of three years of binational collaboration by researchers, key agencies, and sponsors. Therefore, it is all the more important not to allow changes in national or state administrations jeopardize the momentum of this inter-institutional network. Just as the Mexican-origin population continues to increase in numbers and social-economic contributions in California and the United States, so



too must greater concern and attention be given to their health. That is the premise and the promise of the research this program is funding.

## Appendix A: Summary of Funded Proposals 2003

### ADAPTATION AND TESTING OF THE HIV LEGAL CHECKUP FOR MEXICAN ORIGIN MIGRANTS WITH HIV/AIDS

**William Cunningham**

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& Health Services Research, UCLA*

**René Leyva Flores**

*Centro de Investigaciones en Salud  
Poblacional, Instituto Nacional de  
Salud Pública*

#### **Abstract**

AIDS discrimination causes lost employment, housing, and health insurance, leading to impaired access to health care. Knowledge and access to legal protections for migrants with HIV may reduce fears and experiences of discrimination, thereby reducing barriers to HIV care.

We propose to adapt and test the "HIV Legal Checkup," which aims to reduce AIDS discrimination and is currently included in the Centers for Disease Control and Prevention (CDC) Revised Guidelines for HIV Counseling, Testing, and Referral. The specific aims of this study are: (1) To adapt the HIV Legal Checkup to be culturally and legally appropriate for HIV infected persons migrating between Mexico and California, (2) To test the adapted HIV Legal Checkup for cognitive validity in a population of HIV infected persons living in Mexico and migrating between Mexico and California, and (3) To pilot test the adapted HIV Legal Checkup for feasibility and applicability of the intervention in a population of HIV infected persons living in Mexico and migrating between Mexico and California.

The adapted HIV Legal Checkup will be added to ongoing health and migration projects in Mexico and provide pilot data for a randomized controlled study of the HIV Legal Checkup improving access to health care.

***DETERMINANTS OF HEALTH AND DISEASE AMONG MEXICAN MIGRANTS TO CALIFORNIA***

**Marc B. Schenker**

*Epidemiology and Preventive  
Medicine, UCD*

**Fernando Meneses González**

*Centro de Investigaciones en Salud  
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Salud Pública*

***Abstract***

Worsening of risk behaviors and associated diseases among Mexican immigrants to California is a major health concern. The goal of this proposal is to conduct a pilot study to characterize changes in risk factors and associated disease among Hispanic migrants to California, and to understand the underlying causes for these changes. The focus will be on respiratory, reproductive, nutritional and mental health outcomes. We will identify a sending community in Michoacán and a corresponding receiving community in California. In each community we will conduct a household enumeration and randomly select 100 households from both the sending and receiving communities. An interviewer-administered health survey will be administered to one adult woman aged 16-70 selected at random and living in the identified households. We will compare adverse health risk factors in the two communities, both before and after adjustment for a priori known covariates such as age and marital status. Our primary hypothesis is that risk factors such as cigarette smoking will be greater in the USA than in Mexico, both before and after adjustment for covariates. This study will provide the foundation and instruments for a larger bi-national study to test hypotheses on immigration-related change in health behaviors, and to develop prevention strategies.

**INTIMATE PARTNER VIOLENCE AND DEPRESSION AMONG RURAL MEXICAN  
WOMEN**

**Yvette Flores-Ortiz**

*Chicana/o Studies, UCD*

**Enriqueta Valdez Curiel**

*Departamento de Medicina, CUSUR*

*Universidad de Guadalajara*

***Abstract***

This project aims to explore the relationship between spousal migration, depression and intimate partner violence (IPV) in a sample of 600 Mexican women from rural municipalities in Jalisco, Michoacan and Guanajuato. Specifically, the project will explore the incidence of depression in women whose husbands migrate and in those whose husbands do not. Likewise, we will explore the relationship between spousal migrations, satisfaction with the marital relationship, adherence to traditional values and violent ways of negotiating conflict. Through a combined quantitative and qualitative methodology, we will ascertain the prevalence of depression and IPV in the sample of women. Through in-depth interviews of a sub sample, we will explore the women's understanding of depression and the impact of their spouses' migration on their relationship and overall well-being. Our study will shed light on the relationship between IPV and depression among women in rural México.

## **MENTAL HEALTH AND MIGRATION: A BINATIONAL PROPOSAL**

**Kurt Organista**

*School of Social Welfare, UCB*

**María Elena Medina-Mora**

*Investigaciones Epidemiológicas,*

*Instituto Nacional de Psiquiatría*

### ***Abstract***

An intervention and community education proposal is presented with the aim of increasing access and availability of mental health services to Mexicans in rural communities of Mexico who migrate to California in search of employment. Drs. Maria Elena Medina-Mora, Kurt Organista, and Sergio Aguilar-Gaxiola, who are nationally and internationally renowned researchers on the impact of substance use on mental health, will share the responsibilities of this proposal. The objectives of this intervention include: 1) to increase awareness on prevention and treatment options for mental health problems and increase awareness on where to seek and find mental health services; 2) reinforce protective factors that are present in this community; 3) reduce mental health stigma; and 4) increase access, availability and appropriateness of mental health services. Focus groups will be conducted with participants from rural communities in Michoacan, Mexico along with educational campaigns which will be used as interventions to target depression, “nerves”, anxiety disorders, and problems associated with substance and alcohol use. During the educational campaigns “health promoters,” who will be trained members of the same community, and mental health professionals will distribute and explain fliers to the community. Follow-up and program evaluation strategies are also proposed.

## **TRANS-BORDER RELATIONS AND HEALTH CARE IN TIJUANA**

**Steven P. Wallace**

*Center for Health Policy Research, UCLA*

**Elmyra Ybañez-Zepeda**

*Estudios de Población, El Colegio de la  
Frontera del Norte*

### ***Abstract***

Trans-border relations between México and the United States affect health on both sides of the border in a number of ways. These include risk factors; monitoring and disease prevention; cross-border use of health services; money transfers; and health care within the family unit. To date, our understanding of these phenomena are limited, particularly in terms of relations that affect health. As a first step toward greater understanding we propose to conceptualize, design and carry out a household survey that focuses on trans-border relations and health care in Tijuana. In addition to updating studies conducted prior to the North American Free Trade Agreement and the globalization mood, the survey will be a tool to develop concepts, test variables, and define methods. It will be a baseline for further investigation of trans-border relations to be conducted on both sides of the border by researchers in Mexico and California. Survey results will provide information useful in formulating public policies. The project will involve research partners from academic institutions in Mexico and California. Participating institutions will include the Department of Population Studies at El Colegio de la Frontera Norte, the Department of Health of the States of Baja California and the School of Public Health at UCLA.

**UNDERSTANDING REPEAT CESAREAN BIRTHS AMONG MEXICAN MIGRANT  
WOMEN IN CALIFORNIA AND MEXICO: A BINATIONAL APPROACH**

**Margaret Handley**

*Family and Community Medicine, UCSF*

**Sandra G. García**

*Reproductive Health-Latin America and  
the Caribbean, Population Council  
Mexico*

***Abstract***

Unnecessary cesarean deliveries pose significant health, economic, and psychosocial burdens to women, and deny them the opportunity for a safe, vaginal birth. Mexico women who migrate to the US are at especially high risk of undergoing unnecessary repeat cesarean deliveries because it is extremely difficult for US doctors to obtain women's medical records from Mexico. Without access to Mexican women's medical records, a vaginal birth after cesarean (VBAC) delivery cannot be considered. We propose to develop a strategy to understand repeat cesarean deliveries among immigrant women receiving prenatal care in California who have had a prior cesarean birth in Mexico. We propose to: (1) determine the extent to which medical records of Mexican migrant women who have had a cesarean delivery in Mexico are requested and not received; requested and receive too late for a VBAC, or are not requested at all; (2) estimate the prevalence of different cesarean incision types in community hospitals in Mexico; (3) conduct in-depth interviews with women and providers about attitudes regarding a potential health care for women, or other strategies to improve the availability of information on Mexican women's birth history; and (4) conduct a series of expert meetings to develop a binational strategy to facilitate the acquisition of medical records.

## Appendix B: Summary of Funded Proposals 2004

### **CROSS CULTURAL AND SELF-CARE ISSUES TO PREVENT CARDIOVASCULAR DISEASE RISK FACTORS IN IMMIGRANT MEXICAN WOMEN**

**Teresa Juarbe**

*Family Health Care Nursing, UCSF*

**Isabel Hernández Tezoquipa**

*Salud Comunitaria y Bienestar Social,  
INSP*

#### ***Abstract***

Cardiovascular disease (CVD) is the leading cause of death for Mexican women. In this study we propose to study the influence exerted by the culture of origin and the U.S. culture in women's self-care behaviors, particularly those pertaining to CVD risk factors. Grounded theory qualitative methods and procedures will be used to analyze in-depth interviews with reproductive age, midlife and older women. The methodology will include an exploration of the differences between 120 immigrant women and those with no migratory experience to the U.S. in Morelos and Oaxaca, Mexico. Other instruments and measurements will be used to describe the sociocultural and CVD risks factors characteristics.

The analysis will include open and axial coding, and the development of an analytical matrix. This will serve to identify self-care behaviors related to physical activity and dietary patterns, as well as group differences. The focus of the analysis will be to identify the central category that determines the influence of cross-cultural changes in self-care behaviors related to reducing CVD risk factors. Descriptive statistics will be used to describe the sociocultural and CVD risk factors. The results will further our knowledge to develop gender and culturally relevant interventions for migrant and domestic Mexican women.



**ON THE OTHER SIDE: AN EDUCATIONAL RADIO PRODUCTION ABOUT  
MEXICAN MIGRANTS ON BOTH SIDES OF THE MEXICAN-AMERICAN BORDER**

**Yvette Flores-Ortiz**

*Chicana/o Studies, UCD*

**Enriqueta Valdez Curiel**

*Medicina, Universidad de Guadalajara*

***Abstract***

This educational-entertainment radio program will serve to instruct Mexican nationals who are likely to migrate to the United States on a number of health topics, including: (1) sexual and reproductive health, (2) infectious diseases (including HIV/AIDS, STD's and tuberculosis), (3) mental health (with emphasis on depression), (4) nutrition, (5) domestic violence, (6) alcoholism and drug abuse, (7) work related injuries, (8) medical services, and (9) inoculations.

The topics will be addressed from a bicultural-binational perspective (US-Mexico). The target audience for the program will be Mexicans in Jalisco who are a group likely to migrate to California and communities in California who have a high Mexican immigrant population. Prior to initiating the program surveys and focus groups will be conducted with representatives from both communities to determine baseline levels of knowledge. The educational segments will be developed to reflect the information needs of the audience. The impact and effectiveness of the program will be evaluated through surveys and focus groups of members of the target audience.

**PATTERNS OF HEALTH EXPENDITURE, PROVIDER PREFERENCES AND  
INSURANCE ENROLLMENT AMONG MEXICAN FAMILIES WHO RECEIVE  
REMITTANCES FROM THE UNITED STATES**

**Blas Pérez Henríquez**

*Goldman School of Public Policy, UCB*

**Juan Pablo Gutiérrez**

*CISS, INSP*

***Abstract***

Using information from a survey performed to evaluate the Rural Oportunidades Program for the year 2003 (anti-poverty program run by the Mexican Federal Government), researchers from the National Institute of Public Health of Mexico (INSP) and from the University of California Berkeley (UCB) will analyze the difference that may exist, in terms of health expenditure, between Mexican families that receive cash remittances from the United States and families that do not receive such income. Due to the fact that the Oportunidades Program has a health care component for its beneficiaries, and in order to avoid potential biases in the results, the population whose data will be analyzed will be the one used in the Evaluation Survey as comparison group and whose members are not beneficiaries of the Program. By performing the corresponding analysis, the study aims to identify additionally if there are significant differences with respect to private or public medical service delivery and health insurance enrollment.

**RESEARCH ON MEXICAN WOMEN WHO SEEK SAFE ABORTION SERVICES IN CALIFORNIA**

**Jessica Kingston**

*Reproductive Medicine, UCSD*

**Daniel Grossman**

*Regional Office-Latin American and Caribbean, Population Council*

***Abstract***

Abortion is highly restricted in Mexico, and some women come to the US, legally or illegally, to access safe abortion services. Yet very little is known about these women. We plan to determine how common this phenomenon is, to identify barriers Mexican women overcome to obtain an abortion in San Diego, and to qualitatively describe the experiences of these women. We will collect this information in two stages: first, by anonymous survey in Planned Parenthood and UCSD abortion clinics in San Diego to assess the percentage of abortion clients who are Mexican residents; and second, by in-depth interviews with 25 such women, and with 5 physicians to explore their viewpoints. The interviews with women will cover such topics as prior attempts to obtain the abortion in Mexico, factors that influenced their decision to come to the US, the barriers they faced, and their sources of financial and emotional support. This information will be useful to clinicians in the US who care for such women to identify specific needs, both medical and social, of this population. Furthermore, understanding the complicated process women go through to access safe abortion services will be useful in the debate about liberalizing abortion law in Mexico.

**RISK FACTORS FOR PEDIATRIC OVERWEIGHT INCLUDING MIGRATION AND ACCULTURATION: TWO CASE CONTROL STUDIES IN THE TIJUANA AND SAN FRANCISCO PUBLIC SCHOOLS**

**Melvin B. Heyman**

*Pediatrics, GI/Nutrition, UCSF*

**Arturo Jiménez-Cruz**

*Facultad de Medicina, Departamento de Nutrición, UABC-Campus Tijuana*

***Abstract***

Pediatric overweight is a growing health problem among Mexican-Americans in the United States and also is a health concern in Mexico. Surveys from the United States have found an association between acculturation to American culture and risk for overweight in Mexican-American children. The primary hypothesis of this study is that the process of acculturation associated with increased residence and exposure to both, the United States and the Mexican urban culture will be associated with changes in eating habits and physical activity increasing risk for pediatric obesity. Part A of this hypothesis is that children of Mexican migration in San Francisco, particularly those who return frequently to México are at lower risk for pediatric obesity in addition to malnutrition in comparison with Mexican immigrants who do not return or migrate regularly back to México. Conversely, Part B proposes that the children of migrants who have moved within Mexico, and settled on the border areas of Tijuana are at higher risk for obesity and malnutrition in comparison with those migrants to Tijuana who return to Southern and other areas of México. We request funds for fieldwork and to conduct two case control studies in the public schools of San Francisco and Tijuana.

**SCHIZOPHRENIA IN MEXICAN COMMUNITIES ON BOTH SIDES OF THE  
BORDER**

**Steven R. López**

*Psychology, UCLA*

**Carmen Lara-Muñoz**

*Psiquiatría, Benemérita Universidad*

*Autónoma de Puebla*

***Abstract***

Schizophrenia is a very disabling condition marked by hallucinations, delusions, and social impairment. We know little about the prevalence rate of schizophrenia within Mexican origin communities and their available services. To begin to address the considerable burden of schizophrenia for Mexican origin communities we propose to: (1) document the system of mental health care in a community within Puebla, Mexico and within Los Angeles, California; (b) identify persons with schizophrenia in these communities using multiple case finding methods; (c) evaluate the methods in identifying cases; and (d) collect baseline data regarding family care-giving, use of health care providers, and associated social and cultural processes. Our research team is comprised of a binational, multidisciplinary group of experienced investigators from the fields of anthropology, epidemiology, psychiatry and psychology. The data obtained from this project will serve as pilot data for an investigator initiated research application (R01) to be submitted to the National Institute of Mental Health. The long-term goals of this effort are to document prevalence rates on both sides of the border, to advance our understanding of the social context of this disorder, and to apply that knowledge to develop self-sustaining community based interventions in underserved Mexican-origin communities.

## **THE JOURNEY: OXKUTZCAB, YUCATÁN/SAN FRANCISCO, CALIFORNIA**

**Patricia Zavella**

*Latin American & Latino Studies, UCSC*

**María P. Fortuny Loret**

*CIESAS-Península*

### ***Abstract***

The objective is a binational anthropological research in the Yucatec Maya town of Oxkutzcab, Mexico and in the “Maya Town” in the Mission District of San Francisco, CA. The results will be presented in a one hour ethnographic video along with a written report. The project is directed by Dr. Fortuny, professor and researcher from the Center of Investigations and Superior Studies on Social Anthropology (CIESAS-Península) and Dr. Zavella, professor and researcher from the Latin American & Latino Studies Department of the University of California in Santa Cruz (UCSC). Anthropologist and documentary maker Prof. Bazua will be invited to collaborate with the project. The main objective of the research will be to find out: What are the roles of community ties and the social networks in dealing with the health problems that the migrant population faces by having no access to health care or health insurance?

By reviewing the social, cultural and economic causes that lead the people from Oxkutzcab to go north, the migration experience will be emphasized by the difficulties that being an illegal person implies, specifically by not having access to health care or health insurance. The documentary’s objective is to provide a bilingual tool in both sides of the border to help the California México Health Initiative (CMHI) promote its work and programs.

## Appendix C: Summary of Funded Proposals 2005

### Understanding the Effects of U.S.-Mexico Migration and Childhood Overweight

**Dr. Brenda Eskenazi**

*School of Public Policy, UC Berkeley*

**Dr. Lynnette Maria Neufeld**

*Nutrición y Epidemiología, Instituto  
Nacional de Salud Pública*

#### ***Abstract***

The prevalence of overweight and obesity among children is increasing in both the US and Mexico. Among Mexican-American children in the US, 26% are estimated to be at risk for overweight while 13% are classified as overweight; this is higher than both non-Hispanic White and non-Hispanic Black children of the same age. Children in Mexico have about half the prevalence of overweight as their Mexican-American counterparts. But the frequency is still alarmingly high at 19%. The factors driving the high prevalence of childhood overweight and obesity and those explaining the differences in these two groups remain unknown. This study will investigate how migration affects childhood overweight and obesity. Migration may affect risk factors for childhood overweight and obesity such as diet, physical activity, television viewing, and other environmental factors such as the communities where they live. We will test this hypothesis by comparing 5 year-old children residing in the same communities from where the parents in the California sample immigrated. Identifying how migration may play a role in childhood overweight among Mexican-American and Mexican children is essential for developing successful interventions to combat this epidemic.

**Collaboration on Identification of Risk and Cost-effectiveness of Chagas Disease in the Mexican and California Blood Supply by Geographic Migration**

**Leslie Wilson, Ph.D.**

*Clinical Pharmacy, UCSF*

**Janine Ramsey, Ph.D.**

*Centro de Investigaciones sobre  
Enfermedades Infecciosas, Instituto de  
Salud Pública*

**Abstract**

**Introduction:** Chagas disease is prevalent in Mexican and US blood supplies yet no mandatory screening/testing exists. The risk and cost-effectiveness of Chagas disease testing in the blood supply is unclear.

**Purpose:** We will determine the cost-effectiveness of various approaches to screening/testing for Chagas disease in California and Mexico by geographical migration risk categories within Mexico and to California.

**Methods:** We will survey 1,000 blood donors in each of 18 California blood banks for immigration history, and collect from Mexican National Blood Banks, seropositive rates and regional information for 5 years. We will relate Mexican regional seropositive risk to California donor immigration history to estimate California's seroprevalence risk. A Markov cost-effectiveness model will be developed based on migration risk history and seroprevalence comparing various screening/testing protocol combinations. We will collect risk and cost data from California and Mexican blood banks. Major outcomes will be cost/seropositive donor avoided, costs/incremental Chagas cases avoided, and cost/life year saved.

**Analysis** will include descriptive statistics of seropositive risk by regional immigration history. The cost-effectiveness will include sensitivity analyses.

**Significance:** This study will more accurately determine risk of Chagas based on immigration history and provide a basis for decision making about Chagas blood screening and testing.



## **Migration and Reproductive Health Among Mexican Youth**

**Alexandra Minnis, Ph.D.**

*OB, GYN & RS, UCSF*

**Sergio Bautista Arredondo, MS**

*Economía y Políticas de Salud,  
Instituto de Salud Pública*

### ***Abstract***

This project aims to address urgent issues related to Mexican migration to the U.S. and its implications for reproductive health among youth. The specific aims of this research collaboration between the Mexican National Institute of Public Health (INSP) and the University of California, San Francisco (UCSF), build on research that we are conducting individually among adolescents in Mexico and San Francisco. The research proposed here will provide an opportunity for collaboration in conducting preliminary quantitative and qualitative analysis on migration and reproductive health among Mexican youth. Collaborating investigators at INSP and UCSF propose a three-phased research study involving: secondary analysis of the Mexican Family Life Survey; conducting a series of ethnographic interviews with Mexican youth in several communities with high levels of migration to the U.S.; and comparison of quantitative and qualitative findings. We anticipate that this interdisciplinary collaboration between UCSF and INSP will provide an opportunity to develop strong linkages that will facilitate future research that leads to effective public health intervention, both in Mexico and the US.

## **Evaluation of the Period of Adiposity Rebound for the Prevention of Obesity**

**Dr. Patricia B Crawford**

*Nutritional Sciences and Toxicology,  
UC Berkeley*

**Dra. Montserrat Bacardí Gascón**

*Facultad de Medicina, Universidad  
Autónoma de Baja California*

### ***Abstract***

The prevalence of overweight children in the USA between the ages of 2 to 5 has risen from 10.9% in 1994 to 14.7% in 2003. In absolute terms, the increase has been greater in Hispanic children (3.9%). We found a much higher prevalence of obesity (38%) in our study of indigenous children of primary school age living in Tijuana (Jiménez-Cruz, 2003). In order to combat this problem, strategies need to be developed to prevent childhood obesity, to diagnose critical periods to prevent complications and to reduce the prevalence of obesity in adulthood. In spite of the established relationship between the development of obesity and the age at which adiposity rebound occurs, very little is known about the nature of this association. The present study aspires to evaluate the relationship among maternal feeding practices, dietary intake, physical activity and adiposity in a group of preschoolers before and after the period of adiposity rebound. With this round we will conduct a pilot study to develop and validate the questionnaires, surveys, and other forms of measurement. We will also administer the questionnaires and collect baseline measurements of the population. During the project period we will seek additional resources form other sources of funding.

**Influence of Migration on Nutritional Practices that Promote Obesity in  
Young Children**

**Lucia L. Kaiser, Ph.D., RD**  
*Nutrition, UC Davis*

**Luz Elvia Vera Becerra, LNCA,  
MADE**  
*Nutricion, Universidad de Guanajuato*

***Abstract***

Obesity is a risk factor associated with serious health consequences and is an emerging problem in children and youth, especially those of Mexican descent. The purpose of this research is to compare cultural attitudes and beliefs, child feeding practice, and overweight status of children ages 1-6 years among Mexican immigrant families in California and Mexico. Specifically, we will compare children of Mexican immigrant families living in California with those families living in Mexico with only one immigrant in California (n=300). Data to be collected include measured weight and height of the children, parental use of controlling and indulgent feeding practices, parental perception of child's weight status, and food intake patterns of children. Our research will focus on potentially modifiable factors, important for the design of programs for early prevention of overweight in Mexican children on both sides of the border.

**Impaired Glucose Tolerance and Diet Glycemic Load in Obese, Pregnant  
Women in México**

**Janet C. King**

*Nutrition, UC Davis*

**Esther Casanueva**

*Instituto Nacional de Perinatología*

***Abstract***

Nearly 30% of the pregnant women in Mexico are obese. Obese pregnant women are prone to develop gestational diabetes, metabolic complications, and large infants at risk for subsequent obesity and type 2 diabetes. The incidence of diabetes and metabolic complications has never been studied in *obese* pregnant women in Mexico. The **goals** of this proposal are 1) to evaluate the metabolic complications and pregnancy outcomes in a group of obese pregnant women living in Mexico City, 2) to determine if shifting the dietary carbohydrates from the usual highly refined sugars to lower glycemic whole grains improves their glucose tolerance and pregnancy outcomes, and 3) to compare these results with similar studies of Mexican-American pregnant women in California. Glucose intolerance, other metabolic complications, and neonatal weight and fat will be measured in a cohort of 300 obese women receiving prenatal care at the Institute of Perinatology in Mexico City. The metabolic complications of pregnancy will be studied in another cohort of 60 obese women consuming either a low or moderately-high glycemic load diet. A comparison of the findings with similar studies in California will determine if migration alters the risk for pregnancy complications in obese Mexican women.

**Neuropsychological Changes in Persons of Mexican Descent at-risk for  
Familial Alzheimer's Disease**

**John M. Ringman, M.D.**

*Neurology, UCLA*

**Yaneth Rodríguez, Ph.D.**

*Laboratory of Experimental Psychology*

*Instituto Nacional de Neurologia*

***Abstract***

The aim of this study is to identify Spanish- and English-language neuropsychological instruments useful in detecting the early cognitive changes of Alzheimer's disease (AD) in Mexican-Americans. There are little data on what tests are best for detecting these changes in Mexican-American immigrants with varying degrees of acculturation and varying degrees of proficiency in English and Spanish. In a collaboration between U.S. and Mexican investigators, we have identified 18 families of Mexican descent that have a genetic, or familial form of AD (FAD). We will compare the neuropsychological performance of pre-clinical carriers of mutations causing FAD to that of their non-mutation carrying kin, enabling us to identify the earliest changes of the disease while controlling for socioeconomic status, education, and other environmental factors. We will study items from the Spanish English Neuropsychological Assessment Scale (SENAS) and other measures previously studied in Mexican immigrants. We hypothesize that tests of episodic memory and executive function will differentiate mutation carriers and non-carriers. As there are many similarities between the symptoms of this form of AD and the more common sporadic form, the findings of this study will improve our abilities to reliably identify the early cognitive changes of AD in the wider Mexican-American population.

## **Interpersonal and Mental Health in Mexican Immigrant Couples: A Bicultural Study**

**Edgar W. Butler**

*Sociology, UC Riverside*

**Dra. Celia Mancillas Bazan**

*Psicología, Universidad Iberoamericana*

### ***Abstract***

In the context about interpersonal relationships and families with psico-socio-cultural approach, the purpose of the research is to study the relation of immigrants couples, in three dimensions: the first one is integrated by the gender identity, the second one by the gender roles and the third one by the Interpersonal Reality, which is constituted by the interaction between the intimacy, the communication and coping styles in the couple. This interpersonal reality represents the interplay between individual-society and immigrant-culture. Therefore, the research question is: Which is the "interpersonal reality" that helps mental and interpersonal health for social adaptation and the acculturation process in Mexican immigrant couples at the United States? The sample will be constituted by 400 heterosexual immigrant couples and 400 heterosexual persons with partner living in both countries. The instruments will be used are: Scale of Gender Roles (Polanco, 2004), the Inventory Multidimensional of Intimacy (Osnaya, 2004), Deep-Interview, Scale of Communication Styles (Nina, 1991) and the Multidimensional and Multisituational Scale of Coping (Góngora and Reyes, 1998).

## Appendix D: General Table

### 2003 Selected Projects (6)

UC P.I.	UC Dept., Campus	Mexican P.I.	Mexican Institution	Project Title	Award
<b>William Cunningham</b>  <i>Additional Academic Participants:</i> David Eisenman, Doreen Servati, David Schulman	Division of Gral. Internal Medicine & Health Services Research, UC Los Angeles	<b>René Leyva Flores</b>  <i>Additional Academic Participants:</i> Mirka Negroni Belen, Cesar Infante, Pedro Morales Ache	Centro de Investigaciones en Salud Poblacional, Instituto Nacional de Salud Pública	Adaptation and Testing of the HIV Legal Checkup for Mexican Origin Migrants with HIV/AIDS	<b>\$40,000.00</b>
<b>Yvette Flores-Ortiz</b>	Chicana/o Studies, UC Davis	<b>Enriqueta Valdéz Curiel</b>  <i>Additional Academic Participant:</i> Lorena Garcia	Departamento de Medicina, CUSUR-Universidad de Guadalajara	Intimate Partner Violence and Depression among Rural Mexican Women	<b>\$31,080.00</b>
<b>Margaret Handley</b>  <i>Additional Academic Participants:</i> Enrique Gonzalez-Mendez, Celeste Hall, Tegan Zimmerman	Family and Community Medicine, UC San Francisco	<b>Sandra G. García</b>  <i>Additional Academic Participant:</i> Ana Langer, Lisa Goldman	Reproductive Health-Latin America and the Caribbean, Population Council-Mexico	Understanding Repeat Cesarean Births Among Mexican Migrant Women in California and Mexico: A Binational Approach	<b>\$40,000.00</b>
<b>Kurt Organista</b>  <i>Additional Academic Participant:</i> Sergio Aguilar-Gaxiola	School of Social Welfare, UC Berkeley	<b>Maria Elena Medina-Mora</b>  <i>Additional Academic Participant:</i> Rosa Maria Aguilera Guzman	Investigaciones Epidemiológicas, Instituto Nacional de Psiquiatría	Mental Health and Migration: A Binational Proposal	<b>\$25,000.00</b>

<p><b>Marc B. Schenker</b></p> <p><i>Additional Academic Participants:</i> Julia Walsh, Jacob Wegelin, Brenda Elvine-Kreiss, John Brittnacher, Rick Mines</p>	<p>Epidemiology and Preventive Medicine, UC Davis</p>	<p><b>Fernando Meneses González</b></p> <p><i>Additional Academic Participants:</i> Isabelle Romieu, Nelly Salgado, Fabio Silahua, Airel Guillermina López</p>	<p>Centro de Investigaciones en Salud Poblacional, Instituto Nacional de Salud Pública</p>	<p>Determinants of Health and Disease Among Mexican Migrants to California</p>	<p><b>\$39,979.00</b></p>
<p><b>Steven P. Wallace</b></p>	<p>Center for Health Policy Research, UC Los Angeles</p>	<p><b>Elmyra Ybañez-Zepeda</b></p> <p><i>Additional Academic Participants:</i> Eduardo Gonzalez Fagoaga, Raul Gonzalez-Ramirez</p>	<p>Estudios de Población, El Colegio de la Frontera del Norte</p>	<p>Trans-border Relations and Health Care in Tijuana</p>	<p><b>\$38,664.00</b></p>
<p><b>TOTAL FOR 2003: \$214,723.00</b></p>					



### 2004 Selected Projects (7)

UC P.I.	UC Dept., Campus	Mexican P.I.	Mexican Institution	Project Title	Award
<i>Yvette Flores-Ortiz</i>	Chicana/o Studies, UC Davis	<i>Enriqueta Valdéz Curiel</i>	Universidad de Guadalajara, Medicina	On the other side: an educational radio production about Mexican migrants on both sides of the Mexican-American border	<b>\$32,435.00</b>
<i>Melvin B. Heyman</i> <i>Additional Academic Participant:</i> Janet M. Wojcicki	Pediatrics (GI/Nutrition), UC San Francisco	<i>Arturo Jiménez-Cruz</i> <i>Additional Academic Participant:</i> Montser at Bacari-Gascon	UABC-Universidad Autónoma de Baja California-Campus Tijuana, Facultad de Medicina/ Depto. de Nutrición	Risk factors for pediatric overweight including migration and acculturation: two case control studies in the Tijuana and San Francisco public schools	<b>\$40,000.00</b>
<i>Teresa Juarbe</i> <i>Additional Participants:</i> Kristy Hernandez , Eliseo J. Perez-Stable, Yolanda Gutierrez , Leslie Pruitt	Family Health Care Nursing, UC San Francisco	<i>Isabel Hernández Tezoquipa</i> <i>Additional Academic Participants:</i> Luz A. Monreal, Pastor Bonilla	INSP-Instituto Nacional de Salud Pública, Salud Comunitaria y Bienestar Social	Cross cultural and self-care issues to prevent cardiovascular disease risk factors in immigrant Mexican women	<b>\$36,061.00</b>
<i>Jessica Kingston</i> <i>Additional Participant:</i> Thomas Moran	Reproductive Medicine, UC San Diego	<i>Daniel Grossman</i> <i>Additional Academic Participants:</i> Deborah Lynn Billings, Ana Langer	Population Council, Regional Office-Latin American and Caribbean	Research on Mexican women who seek safe abortion services in California	<b>\$25,000.00</b>

UC P.I.	UC Dept., Campus	Mexican P.I.	Mexican Institution	Project Title	Award
<i>Steven R. López</i>  <i>Additional Academic Participants:</i> Linda Carol Garro, Alex Kopelowicz, Jorge I. Ramirez (from Chicago)	Psychology, UC Los Angeles	<i>Carmen Lara-Muñoz</i>  <i>Additional Academic Participant:</i> Elena Medina-Mora,	Benemérita Universidad Autónoma de Puebla, Psiquiatría	Schizophrenia in Mexican communities on both sides of the border	<b>\$40,000.00</b>
<i>Blas Pérez Henríquez</i>	Goldman School of Public Policy, UC Berkeley	<i>Juan Pablo Gutierrez</i>  <i>Additional Academic Participant:</i> Eduardo Pesqueira Villegas	INSP-Instituto Nacional de Salud Pública, CISS	Patterns of health expenditure, provider preferences and insurance enrollment among Mexican families who receive remittances from the United States	<b>\$37,395.00</b>
<i>Patricia Zavella</i>  <i>Additional researcher :</i> Salvador Contreras	Latin American & Latino Studies, UC Santa Cruz	<i>Maria P. Fortuny Loret</i>  <i>Additional researcher:</i> Carlos M. Bazua Morales	CIESAS-Península, Social Antropology	The Journey: Oxkutzcab, Yucatán/San Francisco, California.	<b>\$40,000.00</b>
<b>TOTAL FOR 2004: \$250,891</b>					

### 2005 Selected Projects (8)

UC PI	Dept., UC Campus	MX PI	MX Dept., Institution	Project Title	Award
Brenda Eskenaz <i>Additional researcher:</i> Patricia Crawford	Epidemiology, <b>UC Berkeley</b>	Lynnette M. Neufeld <i>Additional researcher:</i> <i>Dr. Bernanrdo Hernandez Prado</i>	Nutrición y Epidemiología, <b>Instituto Nacional de Salud Pública</b>	Understanding the effects of U.S.-Mexico migration on childhood overweight	<b>\$39,995.00</b>
Leslie Wilson <i>Additional researcher:</i> Stefano M. Bertozzi	Clinical Pharmacy, <b>UCSF</b>	Janine Ramsey <i>Additional researcher:</i> Rafael Antonio, Marin Y. Lopez, Celso Bianco, Rene Leyva Flores, Arthur Strosberg, Christi Motter	Centro de Investigaciones sobre Enfermedades Infecciosas, <b>Instituto Nacional de Salud Pública</b>	Collaboration on identification of risk and cost-effectiveness of Chagas Disease in the Mexican and California blood supply by geographic migration	<b>\$40,000.00</b>
Alexandra Minnis <i>Additional researcher:</i> Stefano Bertozzi	OB, GYN & RS <b>UCSF</b>	Sergio Bautista Arredondo <i>Additional researcher:</i> Alexandra Minnis	Economía y Políticas de Salud, <b>Instituto Nacional de Salud Pública</b>	Migration and reproductive health among Mexican youth	<b>\$40,000.00</b>
Patricia B. Crawford <i>Additional researcher:</i> Gail Woodward Lopez	Nutritional Sciences and Toxicology, <b>UC Berkeley</b>	Montserrat Bacardi Gascón <i>Additional researcher:</i> Arturo Jimenez-Cruz	Facultad de Medicina, <b>Universidad Autonoma de Baja California</b>	Evaluation of the period of adiposity rebound for the prevention of obesity	<b>\$39,998.00</b>
Lucia L. Kaiser <i>Additional researcher:</i> Martha L. López	Nutrition <b>UC Davis</b>	Luz Elvia Vera Becerra	Facultad de Medicina- Nutrición, <b>Universidad Autonoma de Guanajuato</b>	Influence of migration on nutritional practices that promote obesity in young children	<b>\$38,274.00</b>
John M. Ringman	Neurology <b>UCLA</b>	Yaneth Rodríguez	Laboratorio de Psicología Experimental, <b>Instituto Nacional de Neurologia</b>	Neuropsychological changes in persons of Mexican descent at-risk	<b>\$31,126.00</b>

				for familial Alzheimer's Disease	
Janet C. King	Nutrition <b>UCDavis</b>	Esther Casanueva <i>Additional researcher:</i> Adaberto Parra Salvador Villalpando	Investigaciones en Salud Pública, <b>Instituto Nacional de Perinatología</b>	Impaired glucose tolerance and diet glycemic load in obese, pregnant women in Mexico City	<b>\$39,092.00</b>
Edgar W. Butler	<b>Sociology</b> <b>UCRiverside</b>	Celia Mancillas Bazán Rosalba Bueno <i>Additional researcher:</i> Celia Mancillas Bazán	Psicología, <b>Universidad Iberoamericana</b>	Interpersonal and mental health in Mexican immigrant couples: a bicultural study	<b>\$37,900.00</b>
TOTAL FOR 2005: <b>\$306,385</b>					

## Appendix E: Project Presentations, Expected Future Funding, and Anticipated Publications

### 2003 Funding Cycle

Project Title & Principal Investigators	Report Due	Past and Anticipated Presentations	Expected Future Funding	Anticipated Publications
<p><b><i>Adaptation and Testing of the HIV Legal Checkup for Mexican Origin Migrants with HIV/AIDS</i></b></p> <p>Principal researchers: William Cunningham René Leyva Flores</p> <p>Other participant researchers: David Eisenman, Doreen Servati, David Schulman, Mirka Negroni Belen, Cesar Infante, Pedro Morales Ache</p>	11/2005	<ul style="list-style-type: none"> <li>▪ Jurisdicción Sanitaria VII en Tapachula, Chiapas, 2005</li> <li>▪ IX Congreso Nacional de Salud Pública (INSP), 03/2005</li> <li>▪ Congreso de VIH/SIDA Centro Americano, El Salvador, 2005</li> <li>▪ Secretaría de Gobernación, Instituto Nacional de Migración 06/2005</li> <li>▪ Oficina de Relaciones Internacionales, Salud, 06/2005</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ford Foundation (\$100,000)</li> <li>▪ G8 (\$100,000)</li> <li>▪ CONACYT</li> </ul>	<ul style="list-style-type: none"> <li>▪ Qualitative Health Research</li> <li>▪ Journal of Human Rights</li> </ul>
<p><b><i>Determinants of Health and Disease Among Mexican Migrants to California</i></b></p> <p>Principal researchers: Marc B. Schenker Fernando Meneses González</p> <p>Other participant researchers: Julia Walsh, Jacob Wegelin, Brenda Elvine-Kreiss, John Brittnacher, Rick Mines, Isabelle Romieu, Nelly Salgado, Fabio Silahua, Airel Guillermina López</p>	02/2005	<ul style="list-style-type: none"> <li>▪ Western Regional Agricultural Safety and Health Conference, 09/2004</li> <li>▪ XI Congreso de Investigación en Salud Pública, 03/2005</li> </ul>	<ul style="list-style-type: none"> <li>▪ National Institute for Occupational Safety and Health (\$300,000)</li> <li>▪ The California Endowment (\$552,000)</li> <li>▪ Tobacco-Related Diseases Research Program (\$510,000)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Salud Pública de México</li> </ul>

<p><b><i>Intimate Partner Violence and Depression among Rural Mexican Women</i></b></p> <p>Principal researchers: Yvette Flores-Ortiz Enriqueta Valdéz Curiel</p> <p>Other participant researchers: Lorena García</p>	02/2005	<ul style="list-style-type: none"> <li>▪ Latino Behavioral Health Institute, 09/2003</li> <li>▪ National Association for Chicano Studies, 04/2004</li> <li>▪ International Oral History Association, 06/2004</li> <li>▪ Mujeres Activas en Letras y Cambio Social, 08/2004</li> <li>▪ Conferencia Iberoamericana de Psicología, 07/2004</li> <li>▪ Semana Nacional de Ciencia y Tecnología, 11/2004</li> <li>▪ Foro Binacional Sobre Políticas Públicas y Migración, Guanajuato, 10/2004</li> <li>▪ Congreso Iberoamericano de Psicología Clínica y de la Salud, 12/2004</li> </ul>	<ul style="list-style-type: none"> <li>▪ UC Davis</li> <li>▪ Wellness Foundation</li> <li>▪ Packard Foundation</li> </ul>	<ul style="list-style-type: none"> <li>▪ Journal of Medical Anthropology</li> <li>▪ Hispanic Journal of Behavioral Sciences</li> <li>▪ Family Process Journal</li> </ul>
<p><b><i>Mental Health and Migration: A Binational Proposal</i></b></p> <p>Principal researchers: Kurt Organista Maria Elena Medina-Mora</p> <p>Other participant researchers: Sergio Aguilar-Gaxiola, Rosa Maria Aguilera Guzman</p>	02/2006	<ul style="list-style-type: none"> <li>▪ Foro Binacional Sobre Políticas Públicas y Migración, Guanajuato, 10/2004</li> <li>▪ Comité de Investigación y de Ética, Instituto Nacional de Psiquiatría, 07/2005</li> <li>▪ COLEF, "Alineando esfuerzos hacia una comunidad migrante saludable" 07/2005</li> <li>▪ Servicios de Salud Mental, Michoacán, 2005</li> <li>▪ Servicios de Salud y Apoyo al Migrante, SALUD, 2005</li> <li>▪ Casa COLEF, "Alineando esfuerzos hacia una comunidad migrante saludable" 06/2005</li> </ul>	<ul style="list-style-type: none"> <li>▪ Instituto Nacional de Psiquiatría</li> </ul>	N/A
<p><b><i>Trans-border Relations and Health Care in Tijuana</i></b></p> <p>Principal researchers: Steven P. Wallace Elmyra Ybañez-Zepeda</p> <p>Other participant researchers: Eduardo Gonzalez Fagoaga Raul Gonzalez-Ramirez</p>	09/2005	<ul style="list-style-type: none"> <li>▪ XI Congreso de Investigación en Salud Pública, 03/2005</li> <li>▪ COLEF, 04/2004, 06/2004, 03/2005, 08/2005</li> <li>▪ UCLA, 2004, 2005</li> <li>▪ Foro Binacional Sobre Políticas Públicas y Migración, Guanajuato, 10/2004</li> </ul>	<ul style="list-style-type: none"> <li>▪ NIH-NICHD (\$150,000)</li> <li>▪ Fogarty</li> <li>▪ Ford Foundation</li> </ul>	<ul style="list-style-type: none"> <li>▪ American Journal of Public Health</li> <li>▪ CONAPO</li> <li>▪ Frontera Norte</li> <li>▪ Migraciones Internacionales</li> <li>▪ Papeles de Población</li> </ul>

<p><b><i>Understanding Repeat Cesarean Births Among Mexican Migrant Women in California and Mexico: A Binational Approach</i></b></p> <p>Principal researchers: Margaret Handley Sandra G. García</p> <p>Other participant researchers: Enrique Gonzalez-Mendez, Celeste Hall, Tegan Zimmerman, Ana Langer, Lisa Goldman</p>	08/2005	<ul style="list-style-type: none"> <li>▪ IX Congreso Nacional de Salud Pública (INSP), 03/2005</li> <li>▪ Population Council Latin America Conference, "Migración y Salud: Explorando mecanismos de colaboración Binacional" 06/2005</li> <li>▪ 133<sup>rd</sup> Annual American Public Health Association Meeting, New Orleans, 11/2005</li> </ul>	<ul style="list-style-type: none"> <li>▪ Hewlett Foundation</li> <li>▪ California Health Care Foundation</li> <li>▪ The California Endowment</li> <li>▪ Pacific Rim Foundation</li> </ul>	<ul style="list-style-type: none"> <li>▪ Pan American Journal of Public Health</li> </ul>
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### **2004 Funding Cycle**

<b>Project Title &amp; Principal Investigators</b>	<b>Report Due</b>	<b>Past and Anticipated Presentations</b>	<b>Expected Future Funding</b>	<b>Anticipated Publications</b>
<p><b><i>Cross Cultural and Self-Care Issues to Prevent Cardiovascular Disease Risk Factors in Immigrant Mexican Women</i></b></p> <p>Principal researchers: Teresa Juarbe Isabel Hernández Tezoquipa</p> <p>Other participant researchers: Kristy Hernandez , Eliseo J. Perez-Stable, Yolanda Gutierrez , Leslie Pruitt, Luz A. Monreal, Pastor Bonilla</p>	6/2006	<ul style="list-style-type: none"> <li>▪ N/A</li> </ul>	<ul style="list-style-type: none"> <li>▪ CONACYT</li> </ul>	<ul style="list-style-type: none"> <li>▪ N/A</li> </ul>

<p><b><i>The Journey: Oxnutzcab, Yucatán/San Francisco, California</i></b></p> <p>Principal researchers: Patricia Zavella Maria P. Fortuny Loret</p> <p>Other participant researchers: Carlos M. Bazua Morales</p>	12/2005	<ul style="list-style-type: none"> <li>▪ Radio Show of Felipe Tapia of Radio Maya in the Canal Community of San Rafael, CA</li> <li>▪ Grupo MAYAB, 2005</li> <li>▪ Presbyterian Church of Oxnutzcab, 2005</li> <li>▪ Binational Health Week, Chicago, 10/2005</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ford Foundation</li> <li>▪ CONACYT</li> </ul>	<ul style="list-style-type: none"> <li>▪ <i>A video and accompanying materials will be created and used for classes on Public Health, Migration, and U.S. Relations at the researchers' host universities</i></li> </ul>
<p><b><i>On the Other Side: An Educational Radio Production About Mexican Migrants on Both Sides of the Mexican-American Border</i></b></p> <p>Principal researchers: Yvette Flores-Ortiz Enriqueta Valdéz Curiel</p>		<ul style="list-style-type: none"> <li>▪ N/A</li> </ul>	<ul style="list-style-type: none"> <li>▪ N/A</li> </ul>	<ul style="list-style-type: none"> <li>▪ N/A</li> </ul>
<p><b><i>Patterns of Health Expenditure, Provider Preferences and Insurance Enrollment Among Mexican Families who Receive Remittances from the U.S.</i></b></p> <p>Principal researchers: Blas Pérez Henríquez Juan Pablo Gutierrez</p> <p>Other participant researchers: Eduardo Pesqueira Villegas</p>	08/2005	<ul style="list-style-type: none"> <li>▪ Foro Binacional de Políticas Públicas, 10/2005</li> </ul>	<ul style="list-style-type: none"> <li>▪ Hewlett Foundation (\$75,000)</li> <li>▪ California Health Care Foundation (\$100,000)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Journal of Social Science and Medicine</li> <li>▪ Journal of Policy Analysis</li> <li>▪ Migraciones Internacionales</li> </ul>



<p><b><i>Research on Mexican women who Seek Safe Abortion Services in California</i></b></p> <p>Principal researchers: Jessica Kingston Daniel Grossman</p> <p>Other participant researchers: Thomas Moran, Deborah Lynn Billings, Ana Langer</p>	12/2005	<ul style="list-style-type: none"> <li>▪ Association for Reproductive Health Professional (abstract accepted), 9/2005</li> <li>▪ 133<sup>rd</sup> Annual American Public Health Association Meeting, New Orleans, 11/2005</li> <li>▪ San Diego Health Clinics, 2006</li> <li>▪ Pro-Choice Alliance, 2006</li> </ul>	<ul style="list-style-type: none"> <li>▪ Packard Foundation</li> <li>▪ Anonymous Donor</li> </ul>	<ul style="list-style-type: none"> <li>▪ Journal of Contraception, Obstetrics, and Gynecology</li> </ul>
<p><b><i>Risk Factors for Pediatric Overweight Including Migration and Acculturation: Two Case Control Studies in the Tijuana and San Francisco Public Schools</i></b></p> <p>Principal researchers: Melvin B. Heyman Arturo Jiménez-Cruz</p> <p>Other participant researchers: Janet M. Wojcicki Montserrat Bacari-Gascon</p>	6/2006	<ul style="list-style-type: none"> <li>▪ <b>N/A</b></li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>N/A</b></li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>N/A</b></li> </ul>
<p><b><i>Schizophrenia in Mexican Communities on Both Sides of the Border</i></b></p> <p>Principal researchers: Steven R. López Carmen Lara-Muñoz</p> <p>Other participant researchers: Linda Carol Garro, Alex Kopelowicz, Jorge I. Ramirez (from Chicago), Elena Medina-Mora</p>	09/2006	<ul style="list-style-type: none"> <li>▪ Mental Health Services Research 2005: Broadening the Scope of Scientific Investigation, 07/2005</li> <li>▪ Instituto Nacional de Psiquiatria Ramon de la Fuentes in Mexico City, 2004/ 2005</li> <li>▪ Latino Behavior Health Institute, 09/2004</li> <li>▪ Spanish-speaking Clinician Group, 05/2005</li> <li>▪ Latino Access Program Meeting, 05/ 2005</li> <li>▪ Spanish-speaking Clinician Group, 05/ 2005</li> <li>▪ National Alliance of the Mentally Ill, 06/ 2005</li> <li>▪ Foro Binacional Sobre Políticas Públicas y Migracion, Guanajuato, 10/2004</li> </ul>	<ul style="list-style-type: none"> <li>▪ National Center on Minority Health and Health Disparities (\$500,000)</li> <li>▪ The California Endowment</li> <li>▪ National Institute of Mental Health</li> <li>▪ National Institute of Drug Abuse</li> <li>▪ Substance Abuse and Mental Health Services Administration</li> </ul>	<ul style="list-style-type: none"> <li>▪ Revista Latino Americana de Psiquiatria</li> <li>▪ Psychiatric Services</li> <li>▪ American Psychiatric Association</li> <li>▪ Psychological Services</li> <li>▪ Mental Health Services</li> </ul>

