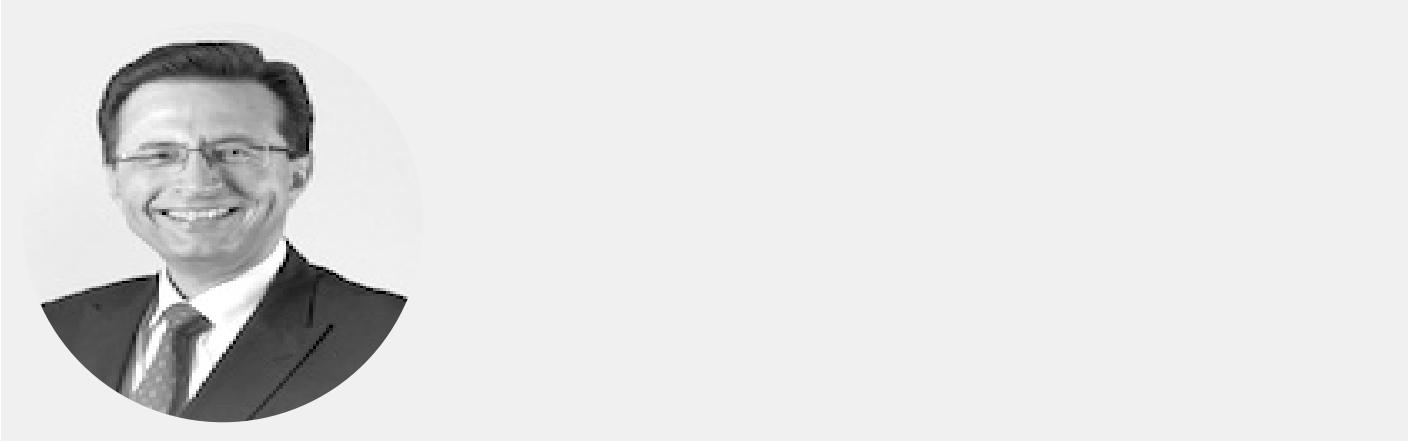
Roberto Tapia-Conyer – CEO, Carlos Slim Foundation – Mexico



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'Poverty is fought with health, education and, above all, employment and more employment'. This is the vision Carlos Slim has for Mexico. The CEO of the Carlos Slim Foundation discusses how the foundation is actively involved in shaking up the system to bring innovation – and energy – to health.

It's the first time we have the pleasure of meeting the Carlos Slim Foundation. We know health is one of the many areas the foundation is actively committed to. When and how did this involvement start?

The involvement of the Carlos Slim Foundation with health goes back almost 30 years. The organization was created in 1986 with the vision of improving the life of the most vulnerable segments of the Mexican population. The involvement in health started with the development of nutritional recommendation for the Children's Hospital of Mexico City, but it was only until the beginning of the century that the Foundation established a partnership with the Ministry of Health to enhance a network of primary care units to improve maternal and infant care, mainly in vulnerable regions of the country. Carlos Slim understood the impact the foundation could have on health in Mexico and decided to create a health institute as part of the foundation in 2007.

The foundation started with isolated interventions, but we soon came to realize that we needed to generate innovative models to change the health agenda of the country in a way we could tackle relevant health-related issues in Mexico, as well as across Latin America. That's why in 2007-08 we redefined our agenda to focus on innovative solutions for problems such as maternal and infant care, the increasing trend towards non-communicable diseases, neglected infectious diseases such as dengue and Chagas, as well as health education. Our goal: develop solutions that are innovative, sustainable and replicable; establish alliances with key players from public, private and social sectors in order to implement these innovative models; and act as a catalyst for change in services and public health policies.

What have been some of the most important innovative models the foundation has developed to improve the healthcare system in Mexico?

Two of the most important initiatives the foundation has embarked in are *Amanece* and *Casalud*. *Amanece* focuses on reducing maternal and infant mortality. We are currently present in the 138 municipalities with the highest maternal and infant mortality rates of the country, and are working very closely with the Ministry of Health and IMSS-Prospera.

On the other hand, the *Casalud* model aims at 'reengineering' healthcare services at primary care units, which are the base of the health systems pyramid. The model focuses on the active prevention and management of non-communicable diseases such as obesity, diabetes and hypertension and is intended to foster benchmarking and transparency, by tracking online activities of the healthcare units to generate feedback and, in turn, improve efficiency. Thanks to a strong partnership with the federal government, so far we have implemented this model in 26 states, for the benefit of more than 1.2 million patients, and have committed ourselves to bring it to all 32 states of the republic. The foundation is funding the model and is trying to demonstrate state-by-state that the system can change for good.

The foundation is also very active with regard to R&D and specifically genomics. What activities are you currently focusing on these days?

Since the beginning of its activities, prevention has been carved in the DNA of the foundation. And we firmly believe genomics can play a crucial role in this sense. That's how we came to partner up with some of the leading local as well as international institutions in this field, such as the Broad Institute in Boston, Massachusetts, the Institute of Genomic Medicine (INMEGEN), the Cancer Institute and the Institute of Medical Sciences and Nutrition Salvador Zubirán in Mexico. We are focusing efforts to study two problems: breast cancer and non-communicable diseases, mainly

diabetes.

In January 2010 through the Slim Initiative for Genomic Medicine in the Americas (SIGMA) we launched a very broad agenda aimed at strengthening and accelerating Mexico's genomic research capabilities. In its first five years the initiative has made important breakthroughs, which have changed the use of genomics in the country, especially to better understand what role does genetics play in a condition with such a high-prevalence in Mexico, such as diabetes.

What about the programs to strengthen immunization?

The foundation also started an infectious disease agenda, mostly to tackle dengue and the Chagas disease, two widespread diseases in Mexico as well as in the rest of Latin America. In this field we entered interesting associations with the Baylor College of Medicine in Houston, Texas, for the development of a therapeutic vaccine for Chagas, as well as with the University of California, San Francisco, Berkley and colleagues in Nicaragua to develop rapid diagnosis systems for dengue. We have made a very interesting exercise with all vaccine manufacturers to see the feasibility of a dengue vaccine, whereby Mexico was the first country in the world to proactively look for a concrete solution to the problem, instead of waiting for a product from abroad.

To better understand the status of immunization programs in Latin America, we carried out a regional study. Latin America has been very successful in the past in eradicating diseases such as polio and measles. But suddenly the region found itself in stand-by. The findings of the study identified several areas of opportunities, among them the need for more systematic training for medical professionals, new regulations to ensure countries have a larger number of vaccines available, and an improved regulatory framework to accelerate the approval of new vaccines. Based on the results of this study together with the Mexican Public Health Association we developed a proposal currently in discussion in Congress to reform the General Health Law to feature a specific vaccination section and ensure immunization programs are always sufficiently funded, independently of budget cuts.

What about education for the medical community and for patients?

For heath professionals we have developed PIEENSO (*Plataforma Interactiva de Educación en Salud Online* in Spanish), an online platform intended to provide training in four key areas – chronic diseases, maternal and infant care, vaccination and women's health – and an introduction to genomics. On the other hand we have the portal ClikiSalud (www.clikisalud.net), created to provide health and preventive information to the general public.

What are most important challenges the foundation faces to effectively implement innovation in the healthcare system in Mexico and how are you overcoming them?

It’s a huge challenge. We are moving a system, which in the past has been successful on many fronts, mainly on infectious diseases, but today is dealing with problems that require the system to work as a system. Prevention has become more a political statement, than a reality, as besides vaccines not much was done in the past. We had to take a proactive prevention approach, shake the system up and push it outside of its comfort zone. We really think we need to bring energy to health. And this mainly implies a complete reengineering of primary healthcare. In Mexico second and third level healthcare institutions are used to innovation, as they are high-specialty structures. But we need to bring innovation into primary care.

We slowly started to move the system, mainly at a federal level, as the foundation works very closely with the current Minister of Health, who was part of our board before, and the regulatory authority. However, Mexico’s complexity does not only depend on the fragmentation of its healthcare system, but also on the presence of 32 states that have freedom of action and low accountability, in terms of money and outcomes. Now, we need them to become more proactive and committed – and that’s the main challenge.

We have heard that one of the next reforms on the agenda of the government is the healthcare reform. How do you envision it?

The previous health reform was mostly a financial reform that did not really impact on people’s health. In my opinion, Mexico needs to satisfy a number of conditions before even thinking in embarking in a new health reform. How can you imagine an integrated health system without having a shared information system among the different institutions? How can you think of having an accountable health system if the different institutions are not connected? We are going slowly but firmly believe it’s the right time to push for concrete changes. Unfortunately we do not see the health agenda moving forward at the pace we’d like to. Alas, how can we have an economically competitive country if health and education are not top priorities?

What are the benefits of having an institution such as the Carlos Slim Foundation so much involved in the health sector?

The foundation contributes in accelerating the adoption of innovation in Mexico’s health system. The system is too busy handling its everyday problems and has to struggle with a regulation, which seems to be against innovation. From outside we have the capacity to facilitate this process because we rely on our own resources and want them only to do their part, so there is no conflict of

interest.

What are the priorities of the foundation to help bridge the health gap in Mexico also in the coming future?

We'll continue working on the initiatives presented leveraging our local and international partnerships. It's not only about providing economical resources, it's about making sure the resources can change the system. We have a huge vision, and it's Mr. Slim's vision. He thinks that health together with education and employment can change a population and that the development of any society goes through these elements. So it's our role to keep health high on the agenda.

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