

## Budgets for Health Services for the Poor in Mexico

From the 1960s the Ministry of Health (*Secretaría de Salud*, SS) in Mexico provided healthcare services to uninsured people through public hospitals and clinics run by the government. Meanwhile the Mexican Institute for Social Security (IMSS) and the Institute for Health and Social Security for Government Workers (ISSSTE) provided social security, including health services, for formal sector workers and their dependents. Each of the institutions controlled its own financing systems. However, IMSS and ISSSTE had far more resources than the SS.

The General Health Care Act of 2003 aimed to create a Social Protection System for Health (SPSS) to provide health insurance to the approximately 50 million uninsured people in Mexico. This was to be done by reallocating federal resources to the states and allocating additional resources to health. However, there was still a big gap between the resources available for the poor people served by the SS and those served by the IMSS and ISSSTE.

In 2009 the civil society organization Fundar started a new project to advocate for: a) more transparency and accountability in spending of the SS, and b) better control of expenditure.

Fundar planned to work on this project with smaller local organizations that focused on health issues in poor communities. They planned to help these organizations learn how to analyze and monitor health policies and budgets and access information. Fundar meanwhile learned from the smaller organizations that the main health problems included shortage of medicines, high out-of-pocket spending, and poor infrastructure and medical equipment. Fundar found that the organizations were less interested in the budget issues than in the practical problems faced by poor people.

After the 2009 congressional elections, Fundar tried to identify key people in the new Congress. Fundar also had meetings with the federal executive, including meetings with the head of the *Comisión Nacional de Protección Social en Salud* (CNPSS), the agency that coordinates the SPSS. In these meetings Fundar tried to learn more about how the SPSS operated.

During 2010 Fundar built its relationship with the Congress's health committee. But Fundar's relationship with the CNPSS worsened after a newspaper published articles in which Fundar criticized the SPSS.

Fundar decided to prioritize work to amend the federal budget because it had the most experience in this type of work. It attended Congress regularly to monitor discussion of the Federal Budget Decree, and especially the discussion in the health committee. It worked with congressional staff on amendments to the budget decree. The amendments were sent to the Budget and Public Accounts Committee but were not accepted.

In 2011 the CNPSS said it was again willing to share information and discuss with Fundar how to improve the SPSS operations. In Congress, Fundar also began working closely with the deputy who chaired the National Audit Oversight Committee. This deputy arranged for Fundar to work with the technical advisors of the Oversight Committee. Finally, the proposed amendments for improved budget transparency were included in the budget decree.