

RED CROSS PROGRAM IN INDUSTRIAL SAFETY

The *Cruz Roja*, Red Cross, has a large training facility called the *Centro Nacional de Capacitación y Adiestramiento (GENCAP)*, the National Training Centre, considered the largest in Latin America. It offers training for Red Cross staff and general company personnel in areas such as professional training, industrial safety, first aid, and emergency services.

INDUSTRIAL SAFETY AND FIRST AID

The Mexican Constitution makes employers responsible for the health of their employees, and all companies with more than 100 employees must have a medical doctor on staff. The doctor provides annual check-ups as well as training in accident prevention, hygiene and workplace health.

Some health care institutions hire foreign companies to provide staff or instructor training. The *Cruz Roja*, Red Cross, for example, sent a group of doctors to the U.S. to be trained in the Advanced Trauma Life Support program. A number of private sector firms are also well established in this field.

DISTANCE LEARNING OPPORTUNITIES

Teleconferencing, videoconferencing and other interactive training programs or professional exchanges provide good opportunities for international medical training and cooperation. Links between Mexican and Canadian medical schools could have mutually beneficial results. Teleconferencing hook-ups for remote regions offer obvious opportunities.

Home-based medical support services through modem and computer connection to an information centre deliver immediate response to questions asked by patient and relieve some of the pressures on health care infrastructure. These services are beginning to appear in the market via private emergency care operations.

INDIGENOUS HEALTH PILOT PROJECT

In an effort to provide health care services in remote regions, the *Secretaría de Salud (SS)*, Secretariat of Health, in conjunction with the *Instituto Nacional Indigenista (INI)*, National Indigenous Institute, created a new hospital to serve the indigenous population. The indigenous population is, for cultural reasons, reluctant or unwilling to use modern health care facilities. This trial project between *SS* and *INI* combines both allopathic and traditional medicine. Prototype projects were created in Cuetzalán, Puebla and a larger hospital is close to completion in Jesús María, Nayarit. Another project is underway in the state of Oaxaca.

HEALTH CARE SERVICES TO REMOTE REGIONS

Health services to remote regions are provided by the *Secretaría de Salud (SS)*, Secretariat of Health and *Instituto Mexicano del Seguro Social (IMSS)*, Mexican Institute for Social Security. In its effort to cover the open population, *SS* has built a large number of primary care facilities in small rural communities called health centres, which offer the services of one doctor, one nurse and, where possible, a health promoter. The doctors located in remote regions are usually young medical graduates who are completing their mandatory year of service following graduation from a public school.

The prevalence of these remote medical units creates a need for low-cost, efficient diagnostic technologies. Examples of potentially important new technologies include visual methods of screening for cervical cancer, rapid plasma finger-stick diagnostic tools for sexually transmitted diseases and new diagnostic tests for malaria. Rapid diagnostic tests avoid reliance on other levels of the health system because the health centre or clinic can treat the problem on the spot. New diagnostic technologies that are inexpensive, simple and convenient to use are needed to provide rapid, stable and accurate results. Canadian experience in providing health care in remote regions may find a niche market in this area.

