Perspective



Public oral health policies in Mexico.

Guillermo Cruz¹ & Esteban Picazzo.¹

Affiliations: ¹Instituto de Investigaciones Sociales, Universidad Autónoma. Nuevo León, México.

Corresponding author: Guillermo Cruz. Instituto de Investigaciones Sociales s/n, Mederos UANL, Monterrey. Nuevo León, México. Phone: (01-81) 8329 4237. (045-81) 8010 7760. E-mail: gcp_master@hotmail.com

Conflict of interests: None.

Acknowledgements: None.

Cite as: Cruz G & Picazzo E. Public oral health policies in Mexico. J Oral Res 2017; 6(2): 32-33. doi:10.17126/joralres.2017.010

Historically, dentists have put their efforts into treating the effects of oral diseases. However, in recent decades a new trend has emerged focusing on people's health by taking into account the Social Determinants of Health (SDH). SDH are defined as the elements of the social structure that determine people's position in society, having a direct effect on their health.¹

Oral diseases play a significant role in the overall health of the population, affecting quality of life and self-esteem. Within the framework of SDH, meeting the oral health needs of the population depends on a range of social factors.² The Pan American Health Organization (PAHO) in their Proposed 10-year Regional Plan on Oral Health (Available at http://www.paho.org/hq/index.php?option=com_docman&task=doc_ details&gid=711&Itemid=270&lang=es) points out that low-income families, groups with lower social development, rural communities, migrants and people with disabilities receive less care and have an increased risk of developing oral diseases.

People with a higher level of education report a more frequent use of Dental Health Services (DHS). In addition, other SDH playing a significant role in the oral health of Mexicans include: income level, owning a house, having goods or other types of basic services and amenities in the home.² SDH refer to social factors that promote or negatively affect the health of individuals and the processes underlying the unequal distribution of these factors.¹ In this sense, health conditions and social aspects are fundamental in determining the oral health needs of the population.

In the context of SHD, dentists should not only focus on the clinical treatment of oral health problems; they should consider society as a whole and educate the people.³ In Mexico, one of the main obstacles to the design and formulation of oral health policies is the lack of information on the real needs of the population. This has contributed to the emergence of for-profit health institutions that have imposed an oral healthcare model focused primarily on curative rather than preventive measures. Consequently, it is imperative to change the current health care model into one that promotes prevention, education and community interventions.

The socio-political and economic conditions of Mexico make it difficult to approach oral health problems by taking into account SDH. These conditions have led to the creation of subsystems disconnected from the daily work in health services but that only coordinate joint technical reports.⁴ Therefore, it is necessary to reform and integrate all Mexican health institutions into a solid National Health System that addresses the needs of the population and not the interests of economic groups.

Mexico's National Development Plan 2012-2018 (available at http://pnd.gob.mx) has the mission of guaranteeing the exercise of social rights and closing the gaps of social inequality are still present in the Mexican population. The goal is to make Mexico a more egalitarian society, promote social cohesion and substantive equality. It seeks to improve the health conditions of the population, provide efficient and quality services for the patient, reduce inequalities through interventions focused on vulnerable groups and avoid impoverishment due to healthcare spending by implementing medical insurance for the whole population. Mexico's Health Sector Program 2013-2018 (available at http://www.spps.gob.mx/programa-sectorial-2013-2018.html) responds to the challenges of the National Health System by designing mechanisms that will strengthen the actions to protect against health risks, increase health promotion and improve disease prevention. The strategic area of oral health and its promotion, prevention and care are included in the dimensions of health promotion and disease prevention. The program shows the need to develop public policies and sectoral and intersectoral actions for health promotion and disease prevention based on a social determinants-oriented approach.

According to the Specific Program of Oral Health Action 2013-2018 (available at http://www.cenaprece. salud.gob.mx/descargas/pdf/PAE_PrevencionDeteccionControlProblemasSaludBucal2013_2018.pdf) the main challenges of oral health care in Mexico are to improve the oral conditions of the population implementing preventive actions, upgrading health technology, and improving its responsiveness and quality. The objective of this program is to expand health coverage to the most vulnerable communities and raise the quality and promotion of dental care.

The Mexican Secretary of Health must improve the quality of jobs and working conditions of dentists in the public health system in order to maintain a stable labor market and increase the responsiveness of health care services. It must also design attractive models with high social impact that can be financed by health insurers in the country. It also requires competence and moral commitment from dentists to improve the oral health conditions of the population and meet the challenges of the 21st century.⁵

The development of policies in oral health must consider the needs of vulnerable groups, epidemiological indicators and more cost-effective interventions. It is important that oral health be included in the national political agenda, as well as motivating legislators, and the professional and academic community to base their decisions on social justice and the actual needs of oral health care of the Mexican population.

REFERENCES.

- 1. Graham H. Social determinants and their unequal distribution: clarifying policy understandings. Milbank Q. 2004;82(1):101–24.
- 2. Cruz Palma G, Sánchez Najera RI, Quiroga García MA, Galindo Lartigue C, Martínez González GI. Caries dental y los determinantes sociales de la salud en México. Rev Cubana Estomatol. 2014;51(1):55–70.

3. Hechavarria Martínez B, Venzant Zulueta S, Carbonell Ra-

mírez M, Carbonell Gonsalves C. Salud bucal en la adolescencia. Medisan. 2013;17(1):117–25.

4. Espinoza-Peña FJ. El Sistema de Salud en el México del siglo XXI. Su Estado frente al Desarrollo Sustentable. MPA e-Journal MF&AP. 2011;5(1):27–9.

5. Montenegro Martínez G. Un nuevo enfoque de la salud oral: una mirada desde la salud pública. Universitas Odontol. 2011;30(64):101–8.