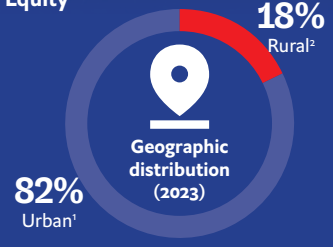
ECONOMIST IMPACT

Bridging the Equity Gap

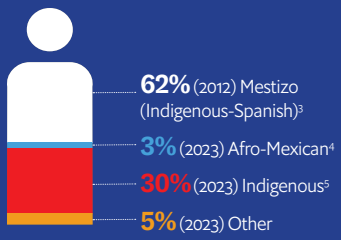
Cancer Care for Women in Mexico

Setting the context: Mexico's social and economic landscape is marked by deep structural divides, where urban centers serve as hubs of opportunity and development, while rural and Indigenous communities continue to face systemic exclusion from essential services and resources.

Equity



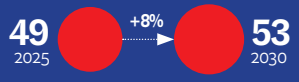
Demographics



> **"Policy focus should be on reducing inequities, rather than just improving the indicators per se. That's what has been missing—the emphasis on how policies should work to explicitly close gaps, rather than assuming that general improvements will automatically reduce disparities."**
>
> Dr Juan Pablo Gutierrez, PhD, Professor, Center for Policy, Population & Health Research at the School of Medicine, National Autonomous University of Mexico's (UNAM)

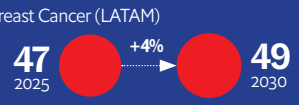
Cancer Status (For every 10,000 people)[6]

Breast Cancer (Mexico)

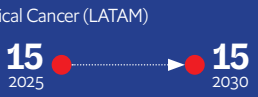


Cervical Cancer (Mexico)

Breast Cancer (LATAM)

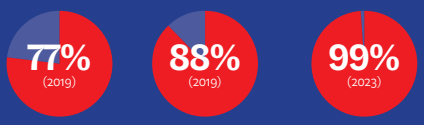


Cervical Cancer (LATAM)



HPV Vaccination

Mexico's National Cervical Cancer Screening Program, active since 1974, includes Pap smears, HPV testing for women over 35 and HPV vaccination programs.[7]

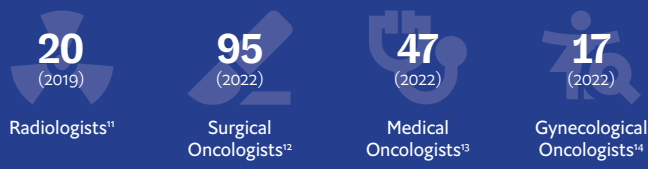


Screened in last 5 years[8] | Ever screened[9] | HPV vaccination coverage by age 15, first dose, females[10]

> **"Investing in prevention and education is not an expense—it is a long-term cost-saving measure."**
>
> Alejandra de Cima, Founder and President, Fundación CIMA

Equity in the Workplace and Health Infrastructure: Healthcare access in Mexico is shaped by geographic and socioeconomic disparities, with urban areas benefiting from specialized medical resources, while rural populations struggle with inadequate infrastructure, thereby reinforcing long-standing inequities in medical care and health outcomes.

Workforce (For every 10,000 cancer patients)



> **"Even after diagnosis, patients often wait a long time for treatment. The standard treatment for locally advanced cervical cancer is chemotherapy with radiotherapy, but access to radiotherapy is severely limited. At my hospital, there is a waiting list of 400 patients for radiation therapy. This situation is not unique. With limited access to radiotherapy, we try to manage patients with chemotherapy while they wait, but the results are poor."**
>
> Dr Patricia Cortés-Esteban, MD, Medical Oncologist, Centro Médico Nacional 20 de Noviembre

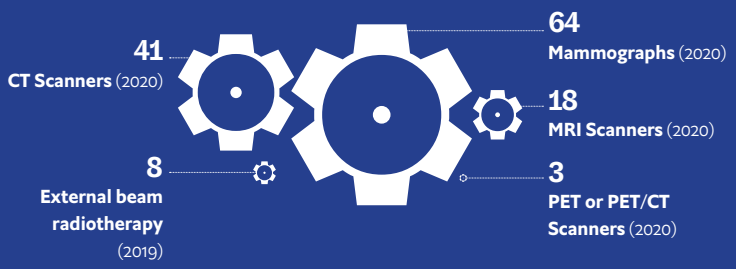
Mammograms (2021)[15]

Total 768

The top 3 states in Mexico	Machines	% of total mammograms
Mexico City	106	14
State of Mexico	51	7
Jalisco	48	6

The bottom 3 states in Mexico	Machines	% of total mammograms
Morelos	6	Less than 1%
Nayarit	6	Less than 1%
Colima	5	Less than 1%

Medical equipment (For every 10,000 cancer patients).[16]



Challenges

1. **Ethnic Health Inequality is a Significant Problem:** Indigenous communities face exclusion within healthcare settings, experiencing linguistic barriers and cultural stigmatization, which collectively diminish trust in formal healthcare systems and exacerbate health disparities.
2. **Health Infrastructure is Inequitably Distributed:** Medical specialists and equipment are heavily concentrated within urban centers, while rural regions remain underserved with limited access to cancer screenings and treatments.
3. **Barriers to Access Persist:** Rural and low-income populations struggle with financial, administrative and logistical hurdles in obtaining healthcare, where long wait times, bureaucratic complexity and the inability to afford medications perpetuate widespread inequities in medical access.

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11 WHO. Mexico: Cancer Country Profile 2020. Geneva: World Health Organization; 2020. Available from: https://cdn.who.int/media/docs/default-source/country-profiles/cancer/mex-2020.pdf?sfvrsn=1ca8f3e3_3&download=true. (Accessed on 12 Feb 2025).
12 Arango-Bravo EA, Celina-Pérez LDC, Galicia-Cermeno T, Castro-Eguiluz D, Gallardo-Rincón D, Cruz-Bautista I, Duenas-Gonzalez A. The health system and access to treatment in patients with cervical cancer in Mexico. Front Oncol. 2022;12:1028290. doi: 10.3389/fonc.2022.1028290.
13 Ibid.
14 Arango-Bravo EA, Celina-Pérez LDC, Galicia-Cermeno T, Castro-Eguiluz D, Gallardo-Rincón D, Cruz-Bautista I, Duenas-Gonzalez A. The health system and access to treatment in patients with cervical cancer in Mexico. Front Oncol. 2022;12:1028290. doi: 10.3389/fonc.2022.1028290.
15 Sofasco-Duport I, Galván-Espinosa HA, Villaseñor Y. Disponibilidad de mastografías en México: ¿Es posible ampliar la cobertura? [Availability of mammographs in Mexico: is it possible to expand coverage?]. Rev Med Inst Mex Seguro Soc. 2015;53(6):736-746. Spanish. doi: 10.5281/zenodo.10164296.
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