



Health Care

Geography plays a significant role in the ability of Upper Rio Grande residents to obtain health care. The region's major health care service centers all are located in El Paso; persons living in sparsely populated areas may have to drive more than 80 miles to the nearest doctor or hospital. The region also has a high percentage of citizens who lack health insurance.¹

The city of El Paso and El Paso County, however, have worked with local entities, the state and the federal government to develop innovative solutions for these challenges. El

Paso's new Paul L. Foster School of Medicine, for instance, is the result of a partnership between the city of El Paso and Texas Tech University's School of Medicine, and was made possible by state financial aid and private donations.

The Legislature and area universities also have established research programs that study illnesses common along the U.S.-Mexico border. Both for-profit and nonprofit organizations have established new service sites in El Paso, such as the new East Medical Center located in an underserved area of the city, as well as the city's first children's hospital currently under construction.

Health Care Infrastructure

Medical facilities anchor any health care infrastructure. They provide a central point



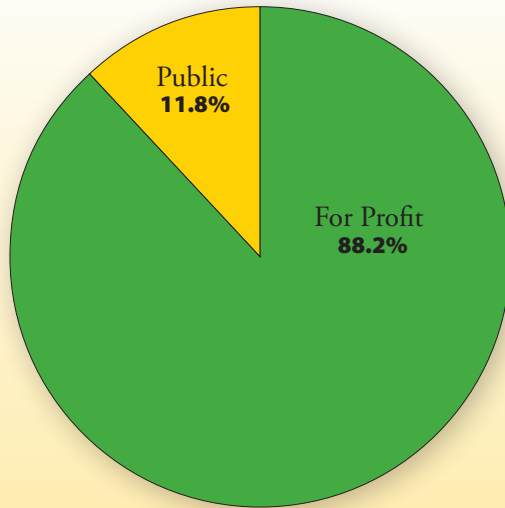
Ground breaking ceremonies at the new El Paso Children's Hospital

PHOTO: Jethro Armijo, Thomason Hospital



Exhibit 30

Upper Rio Grande Hospital Ownership, 2008



Source: Texas Department of State Health Services.

for advanced medical services; encourage the growth of affiliated medical services in surrounding areas; and often are major employers. Five of El Paso’s 14 largest employers are health-related organizations. Of these five, four are hospitals and one is a nursing association that provides home health care for patients.²

The Upper Rio Grande region has 15 for-profit hospitals and two public hospitals (Exhibit 30). El Paso accounts for 15 of these, including two public hospitals — R.E.

Thomason General Hospital and El Paso Psychiatric Center — and 13 for-profit hospitals, while Brewster and Culberson counties each have one for-profit hospital.

Providence Memorial Hospital in El Paso is the region’s largest, with 508 beds, and one of its largest employers. Sierra Medical Center and Del Sol Medical Center are the next-largest. In 2008, the region’s hospitals had a total of 2,377 staffed beds. Together, Culberson County Hospital and Big Bend Regional Medical Center in Brewster County accounted for only 39 of these beds.³

The Rio Grande region also has three hospital districts (Exhibit 31).⁴ These districts are authorized to levy taxes within their jurisdictions for the support of health care and hospital services. In 1991, Brewster County Hospital District and Presidio County Hospital District combined to create the Big Bend Regional Hospital District. Taxes levied from both counties support the district.⁵

In addition, the Texas Tech University Health Sciences Center maintains clinics in East, West, Central and Northeast El Paso. Texas Tech El Paso faculty members work through community partnerships to provide underserved areas in El Paso with health care.⁶

Three of the region’s six counties do not have a hospital (Exhibit 32 – page 71).⁷ Their residents must travel relatively long distances to reach hospitals, which can be critical in emergency situations. Even in Brewster and Culberson counties, some residents still must drive long distances for emergency care. For example, while Marathon has a health clinic with a doctor and nurse that is open on Mondays and Thursdays, the closest hospital is Big Bend Regional in Alpine which is 32 miles away.⁸

Exhibit 31

Upper Rio Grande Region Hospital Districts

Culberson County Hospital District

R. E. Thomason General Hospital District

Big Bend Regional Hospital District

Source: Texas Department of State Health Services.



Major Health Care Projects

Several El Paso medical institutions and Culberson County's hospital have plans for expansion. While the El Paso projects are proceeding, the current economic downturn has delayed the Culberson Hospital expansion.

Texas' first new medical school since 1977, the Paul L. Foster School of Medicine, is being built in El Paso.⁹ The school is scheduled to start classes on July 13, 2009, and should increase economic activity within the region. One study estimates that the school will add \$1.3 billion in local business revenue, \$462 million in household income and \$12 million in local revenues over the next ten years. The school is also expected to generate about 4,700 new jobs in the region.¹⁰ Upon completion of the medical school, this historically underserved region will see an increase in its supply of medical professionals and well-paid professional jobs.¹¹

The long-awaited construction of the El Paso Children's Hospital began in February 2009. The project has a budget of \$119 million and should be completed in early 2012. The 224,500-square-foot children's hospital will feature pediatric operating rooms and 60 private rooms.¹²

El Paso's R. E. Thomason General Hospital is completing several health facility construction and expansion projects at a cost of more than \$250 million. In 2008, construction began on the hospital's Master Plan Implementation project, which is expected to cost \$139 million by its completion in late 2011.¹³ The project includes the expansion and renovation of a 345,500-square-foot Bed Tower (a building primarily for patient rooms) and a Level I Trauma Emergency Department. A Level I trauma center has the specialists and training available 24 hours a day, seven days a week to handle all trauma cases.¹⁴

(text continued on Page 69)

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The Paul L. Foster School of Medicine

The Texas Tech University Health Sciences Center's (TTUHSC's) Paul L. Foster School of Medicine in El Paso will begin classes on July 9, 2009. This inaugural class of 40 students was selected from a pool of 2,500 applicants.¹⁵

Texas Tech began work on establishing a medical school in El Paso in 1999.¹⁶ Its efforts bore fruit when the 2007 Legislature appropriated startup funds for the school.¹⁷

The Liaison Committee on Medical Education, the national medical school standards agency, has fully accredited the Paul L. Foster School.¹⁸ Its campus has taken shape with the construction of a 93,000-square-foot El Paso Medical Science Building devoted to research as well as a 125,000-square-foot classroom building.¹⁹ The school plans to increase its enrollment annually, accepting 60 students in 2010 and 80 students in 2011. By 2013, the medical school is expected to add \$1.3 billion to the local economy.²⁰

According to Dr. Manuel Schydlower, the school's associate academic dean for admissions and professor of pediatrics, a major objective of the Foster School of Medicine is to increase the number of doctors in El Paso and the Upper Rio Grande region. At present, El Paso has fewer than 110 physicians for every 100,000 residents, compared to an average of 150 per 100,000 residents in Texas as a whole and 198 per 100,000 in the U.S.

Dr. Schydlower also says that a number of students from the area will be in the first medical school class. Five of the 40 students admitted into the first class are coming from the University of Texas at El Paso pre-med program.²¹



Thomason Hospital/University Medical Center of El Paso

In March 2008, Thomson Reuters Healthcare selected El Paso's R.E. Thomason General Hospital as one of America's Top 100 hospitals, based on its national evaluation of best practices. This was Thomason's third time to receive this honor.

The hospital was selected from a total pool of 3,018 institutions and was one of just seven Texas hospitals to make this select list; no other hospital in El Paso has ever received this award. It recognizes hospitals that have achieved the highest standards in patient treatment and outcomes; their ability to attract more patients; operational efficiency; and financial performance.²²

A week later, INGENIX, a major medical information corporation, named Thomason as the fourth highest-rated major teaching hospital in America for the accuracy of its medical coding. After patients are discharged from the hospital, their medical records are sent to Thomason staff, which assigns codes that determine how insurers, including Medicare and Medicaid, will pay for services. The accuracy of such coding is essential for effective operations.²³

Thomason is El Paso's only nonprofit, acute-care teaching hospital that provides health care to all El Paso County residents regardless of their ability to pay.²⁴ In fiscal 2007, Thomason received about \$55 million from El Paso taxpayers, but provided more than \$100 million in care to the uninsured and working poor. More than 30 percent of its patients, furthermore, are covered by Medicaid or Medicare, which pay less than private insurers.²⁵

Thomason Hospital also has extended coverage to thousands of previously uninsured area residents through its participation in El Paso's First Health Plans Inc., a community nonprofit health maintenance organization. El Paso First has contracted with the Texas Health & Human Services Commission to provide health care for recipients of aid from State of Texas Access Reform (STAR) Medicaid, the Children's Health Insurance Program (CHIP) and CHIP Perinatal.²⁶ (The State of Texas has selected certain counties to have a Medicaid managed care program through STAR).²⁷ The CHIP perinatal coverage provides medical care for the unborn children of low-income women who do not qualify for Medicaid.²⁸

Thomason is affiliated with all of the region's health-related educational institutions. Since 1973, Texas Tech University Health Science Center at El Paso has partnered with Thomason to provide medical training at the hospital. The University of Texas at El Paso, El Paso Community College, New Mexico State University, Sul Ross State University, Angelo State University and El Paso's area magnet high schools also use Thomason as a clinical training facility for nurses, therapists, technicians and many other medical professions.²⁹

The state of Texas and the American College of Surgeons have designated Thomason as the only 24-hour Level I Trauma Center within a 250-mile radius. Air ambulances transport patients to the center, which serves more than 61,800 patients each year.³⁰

Thomason Hospital soon will change its name to the University Medical Center of El Paso. The new name reflects Thomason's evolution into a large medical complex including not only the Thomason Pavilion (the hospital itself), but also a Children's Hospital and the new Paul L. Foster School of Medicine.³¹



Thomason Hospital is also expanding its Northeast Clinic, adjacent to the Texas Tech Family Practice building. The new 28,447-square-foot building is estimated to cost \$12.3 million and officially opened its doors on May 29, 2009. The new building will house an orthopedic clinic, laboratory and outpatient pharmacy, and will provide X-ray and CAT scan imaging and outpatient rehabilitative services.³²

In May 2008, the Sierra Providence Health Network opened its East Medical Center in an underserved area on El Paso's East Side. The new 110-bed center was completed in three years at a cost of \$140 million. It is equipped with a 20-bed emergency services center, a 12-bed intensive care unit and an emergency helipad.³³

As noted above, Culberson County Hospital plans to expand and renovate its building. The new construction would add patient rooms, an emergency room and imaging facilities. At this writing, however, only \$700,000 of the \$7.5 million in bonds needed to finance the project have been sold.³⁴

Veterans' Health Care

The El Paso Veterans' Affairs Health Care System (VAHCS) offers specialized and primary outpatient medical services to veterans in El Paso, nearby Texas counties and Doña Ana County, New Mexico. The El Paso VAHCS opened in October 1995 and consists of a four-story building of about 250,000 square feet. In June 2008, a 29,000-square-foot East Wing addition opened.³⁵

The main health care center is located next to William Beaumont Army Medical Center (WBAMC) on Fort Bliss, with a Community

Based Outpatient Clinic (CBOC) in Las Cruces, New Mexico. (CBOCs were created in 1995 by the U.S. Veterans Health Administration to augment the delivery of primary medical care to veterans.)³⁶

The main health care center offers primary and specialized outpatient services. Consultants and specialists are available to supplement its medical staff. VAHCS has an eight-room outpatient surgical suite and conducts residency programs in internal medicine and psychiatry with Texas Tech University and WBAMC.³⁷

El Paso also has a Veterans' Affairs Health Center that provides counseling services for veterans returning from overseas deployment. These services focus on smoothing the transition from military to civilian life. Various services offered include individual counseling, marital and family counseling, medical referrals and employment counseling. Since 2003, the Vet Center is also authorized to provide bereavement counseling services to parents, spouses, children and siblings of service members who die while on active duty.³⁸ The center is available to veterans living in the Upper Rio Grande region.³⁹

Psychiatric Care

The region's psychiatric services are coordinated by two entities: the El Paso Community Mental Health and Mental Retardation (MHMR) Center, serving El Paso County; and the Permian Basin MHMR Center, serving Brewster, Culberson, Hudspeth, Jeff Davis and Presidio counties. Both offer inpatient as well as outpatient services for residents of far West Texas.⁴⁰

In addition, the El Paso area has many small mental health providers that provide

The El Paso Veterans' Affairs Health Care System offers specialized and primary outpatient medical services to veterans.



area residents with services, generally on an outpatient basis. These providers rely on the community's two large nonprofit public mental health providers, El Paso Community MHMR and the El Paso Psychiatric Center (EPPC), to receive referrals and provide more intensive services.⁴¹

The El Paso Community MHMR Center offers outpatient adult psychiatric services through treatment teams at three sites around the city. Each team includes multiple mental health professionals who provide services including medication, family education and individual and group counseling.⁴²

El Paso MHMR also provides mental health services for children and adolescents aged three to 17 who suffer from a variety of emotional disturbances through its Children Adolescent Mental Health Programs (ChAMHPs). The ChAMHPs provide crisis management, screenings and mental health referrals; case management; intensive family counseling; early childhood intervention; medications; and community/family support services through interdisciplinary treatment teams.⁴³

In-patient psychiatric services in the El Paso area are provided by the Texas Department of State Health Services' (DSHS') El Paso Psychiatric Center. EPPC is a 74-bed inpatient psychiatric hospital serving both adults and children. The adult services program consists of one acute admission unit, one sub-acute care unit and one specialty unit for long-term care. The child and adolescent services program offers in-patient crisis stabilization services in two separate units, one for children aged five to 12 and the other serving adolescents.⁴⁴

In addition to EPPC, the El Paso area also benefits from Peak Psychiatric Hospital (PPH), located in New Mexico serves the El Paso area. PPH is a private psychiatric hospital with 36 beds specializing in long-term and substance abuse care for children and adolescents. PPH uses an interdisciplinary team of treatment professionals to provide medication; individual, group and family therapy; special educational experiences; and activity therapies involving art, music and recreation.⁴⁵

DSHS' Big Spring State Hospital (BSSH) in Big Spring, Texas provides in-patient psychiatric services for patients living outside of El Paso County. BSSH is a 200-bed psychiatric hospital serving adults living in a 58-county area in West Texas and the Texas South Plains, including Brewster, Culberson, Hudspeth, Jeff Davis and Presidio counties.⁴⁶

The Permian Basin Community Centers (PBCC) for MHMR provides outpatient psychiatric services for Upper Rio Grande residents living in counties other than El Paso County. PBCC offers services to children and adults with psychiatric disabilities, as well as their families, through clinics in Alpine, Van Horn and Presidio. In addition, it operates a 24-hour crisis intervention and suicide prevention hotline. PBCC also provides staffing for face-to-face interventions, including the coordination of emergency hospitalizations.⁴⁷

Community mental health providers indicate that it is proving increasingly difficult to maintain a suitable work force in the region, noting that the expected expansion of Fort Bliss military base will make it even more difficult to ensure both the quality and quantity of client services. Mental health workers believe that a significant increase in capital projects

The El Paso Community MHMR Center offers outpatient adult psychiatric services through treatment teams at three sites around the city.



and operating expenses is needed to address the area’s mental health issues effectively.⁴⁸

Professional Shortages and Rural Health Care

The Upper Rio Grande region’s shortage of health professionals is a significant problem. In 2009, the U.S. Department of Health and Human Services identified Culberson, Hudspeth, Jeff Davis and Presidio counties as having a shortage of primary care health professionals. Culberson, Hudspeth and Presidio counties also have a shortage in dental professionals, and all of the region’s counties are in dire need of mental health practitioners (**Exhibit 32**).⁴⁹

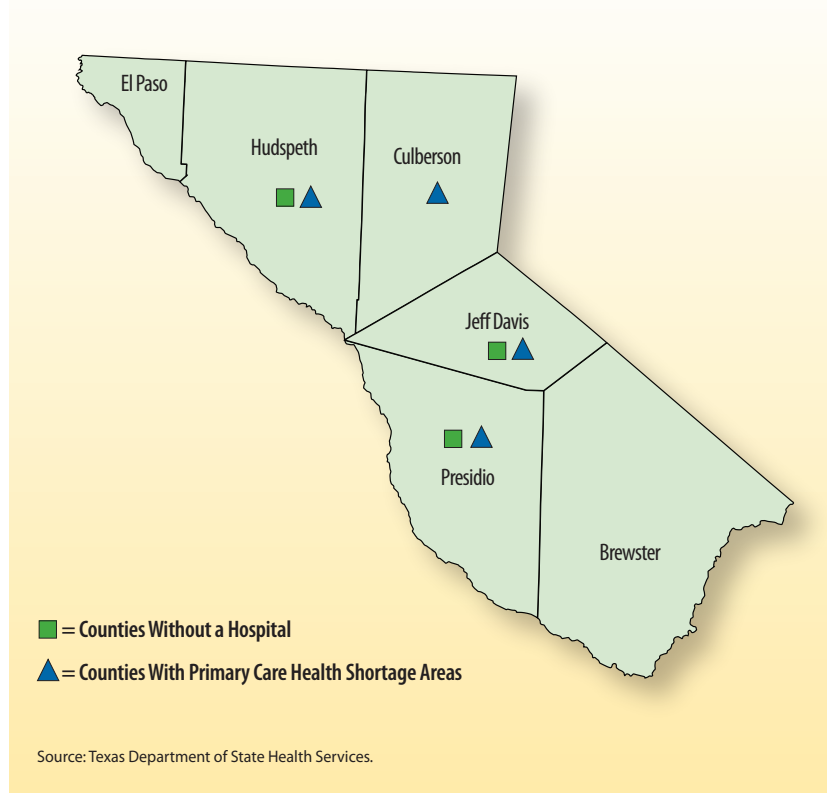
Primary care physicians have a primary specialty of family practice/medicine, general practice, pediatrics, obstetrics/gynecology, internal medicine or geriatrics.⁵⁰ In 2008, Culberson, Jeff Davis and Presidio Counties each had one primary care physician. The physician in each county served populations of 3,274, 2,566 and 8,402, respectively. Hudspeth County suffered from the worst shortage in 2008, as the area had no practicing licensed physicians of any kind.⁵¹

In 2008, El Paso County’s 36 licensed psychologists served a population of 755,157, while Brewster County had three psychologists for 9,624 residents. Culberson, Hudspeth, Jeff Davis and Presidio Counties had no licensed psychologists.⁵²

Culberson, Hudspeth and Jeff Davis counties had no dentists in 2008, while Presidio County had only one dentist serving a population of 8,402.⁵³ These shortages of health professionals cause considerable difficulties for the region’s residents, often requiring them to travel many miles for medical care.

Exhibit 32

Upper Rio Grande Counties Without a Hospital, 2008 and Primary Care Health Professional Shortage Areas, 2009



For example, residents of Fort Davis in Jeff Davis County must go to Alpine in Brewster County, 25 miles away for dental care.⁵⁴

Promotoras, community health workers who provide a link between health care providers and patients for residents in underserved communities, help to fill the gaps left by the shortage of health professionals.⁵⁵ *Promotoras* work in clinics, hospitals, faith-based organizations, community-based organizations, academic institutions and public health departments.⁵⁶ Their work includes visiting patients in clinics; making home visits to follow up on patient progress after clinical visits; and making presentations at schools to inform students on health care issues.⁵⁷

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El Paso Inter-religious Sponsoring Organization

The El Paso Inter-religious Sponsoring Organization (EPISO) has served parts of the Upper Rio Grande region for 27 years. The organization works in several civic arenas including worker training, the provision of water resources and college course enrollment.

EPISO also offers Civic Academies several times each quarter. These are community educational meetings that focus on economic development, immigration and toll roads. The academies help inform community members on practical ways to prevent poverty, combat social ills and in general improve the plight of the working poor. Most recently, an academy was offered on the role of community colleges as a gateway to the middle class.

EPISO has worked as a key player in the ongoing effort to bring water to all residents in *colonias* in the Upper Rio Grande region. When EPISO began work on this project, nearly 70,000 people in the region were without water; today that number is down to about 3,000, and continues to fall. EPISO continues to take an active role in this endeavor and is committed to bringing clean water to all of the region's residents.

EPISO also has partnered with the University of Texas at El Paso and El Paso Community College to provide training in healthcare occupations through the Arriba program. A majority of Arriba participants are single heads of households with one or more children, Hispanic and female, and average around 30 years of age. The program often trains individuals for jobs in the medical field such as nursing, but also offers training in the education and information technology fields.

Arriba participants report earning an average of about \$7,000 per year on entering the program. Upon completion, they become trained professionals who can earn up to \$20 an hour. Participants also receive help with preparing for college enrollment.⁵⁸

The work of the *promotoras* is funded through various sources such as local, state, and federal grants and private funding. The Texas Health and Human Services Commission funds about 24 of the region's *promotoras*. While *promotoras* are active in El Paso County, the region's other counties have no funding to support their work. From time to time, *promotoras* will volunteer to offer unpaid services to those in need in their communities.⁵⁹

Uninsured Residents

For the years 2006 and 2007, an average of 24.8 percent of all Texans lacked health insurance. This was the highest uninsured rate of

any state.⁶⁰ Within Texas, in turn, the Upper Rio Grande region has among the highest rates of uninsured residents. In 2005, more than 29 percent of the residents of all six Upper Rio Grande counties were uninsured. The lowest rate was in El Paso County, with an estimated 29.5 percent of its residents uninsured, while the highest rate was in Hudspeth County, with a 44.2 percent uninsured rate.⁶¹

According to a recent study, El Paso's high uninsured rate accounts for many cross-border purchases of medications and health care obtained in Ciudad Juarez, Mexico. Among adults surveyed for the study, 33 percent had crossed the border to purchase medications



in Mexico, while only 5 percent of Ciudad Juarez residents crossed the border to purchase medications in the U.S. The study's authors attribute these patterns to generally less costly and more accessible health care in Mexico, including the ability to purchase some prescription drugs without a doctor's prescription.⁶²

Uninsured residents of El Paso County typically receive care from a variety of "safety-net" providers including the public hospital (Thomason Hospital), other area hospitals, Texas Tech University Health Sciences Center clinics and community health clinics including Centro de Salud Familiar La Fe, Centro San Vicente family health center and the Project Vida Health Center. El Paso's Thomason Hospital is a major provider of health care to the uninsured. In fiscal 2007, the hospital collected about \$55 million in taxes but provided over \$100 million in charity care.⁶³

Another source of health care for low-income and uninsured people is the community health center (CHC), usually a private, nonprofit entity supported by faith-based organizations, civic leaders and local business owners. These CHCs generally are located in underserved areas, both urban and rural, and provide one-stop health services for low-income families. In addition to primary care and laboratory services, CHC patients also receive preventive care. CHCs also may provide outreach, health education and screening programs as well as other social services tailored to meet the needs of their community.

One of El Paso's oldest CHCs is Centro de Salud Familiar La Fe clinic, which has treated low-income and uninsured children and families since 1967. The clinic got its start when a group of parents living in one

of El Paso's poorest neighborhoods formed the "Ochoa Parents Association," primarily comprising women working in low-wage garment and cannery industry jobs, to tackle the health and social problems affecting their community. From its beginnings as a single-room clinic in a neighborhood house, La Fe now includes several clinics, a Child and Adolescent Wellness Center and a Cultural and Technology Center. La Fe continues to provide much-needed health care for U.S. and Mexico border children and their families in the El Paso area.⁶⁴

Centro San Vicente, founded in 1988, is a nonprofit community-based clinic providing health care services, social services and health education programs to low-income and uninsured individuals in El Paso County. Ninety-one percent of its patients live in poverty and 68 percent are uninsured. In addition to its two health care clinics, the Centro also runs a clinic for homeless children and families.⁶⁵

Project Vida, a community health clinic in El Paso, runs three primary care health clinics that provide care to low-income families as well as other social services designed to improve the health of the poor.⁶⁶

The County Indigent Health Care Program (CIHCP) provides medical services for eligible low-income individuals who do not qualify for other government programs such as the Children's Health Insurance Plan, Medicaid or Medicare.⁶⁷ Program eligibility is based on income, the number of people in a household, financial resources and residence. Where available, CIHCP services are provided through public hospitals and hospital districts.⁶⁸

Another source of health care for low-income and uninsured people is the community health center.



Each of the six counties in the Upper Rio Grande region operates a County Indigent Health Care Program. Several that lack a hospital district or public hospital partner with an adjacent county to provide health care through CIHCP. For example, Big Bend Regional Medical Center in Brewster County runs CIHCP for both Brewster and Presidio counties. Similarly, indigent residents of Presidio County receive health care services at the Big Bend Regional Medical Center in Alpine.⁶⁹ And Hudspeth County residents can go to either Culberson or El Paso County to receive medical services.⁷⁰

In El Paso, CIHCP is offered through the HealthCARE Options program at Thomason, the county's public hospital. This benefit plan is designed primarily for El Paso residents who are at or below 100 percent of the federal poverty level. Those who qualify can receive services such as in-network specialist care, physician office visits and x-rays.⁷¹

Diabetes and Obesity

In 2006, the Upper Rio Grande region had slightly higher adult obesity and diabetes prevalence rates than the Texas average. Obesity is a major risk factor for diabetes, a serious public health problem in the U.S. and Texas.⁷² The prevalence of adult diabetes in Texas is rising rapidly, from 7.7 percent in 2004 to 10.3 percent in 2007.⁷³ Hispanics have a higher prevalence of obesity and diabetes than Anglos. In 2008, 80.9 percent of the Upper Rio Grande region population was of Hispanic origin.⁷⁴ A 2005 study noted that by the late 1990s, three out of four Mexican-American adults were either overweight or obese.⁷⁵ Unsurprisingly, diabetes is more common in

the Upper Rio Grande region than in the state as a whole — 8.1 percent versus 8 percent in 2006.⁷⁶ **Exhibit 33** compares adult diabetes prevalence among Texas' regions.

Untreated or poorly controlled diabetes can lead to long-term health complications including heart disease, stroke, vascular disease, blindness, kidney disease, nerve damage and amputation. Diabetes was the sixth-leading cause of death in Texas from 2002 through 2005.⁷⁷ A U.S.-Mexico Border Diabetes Prevention and Control Project found that diabetes was the fourth-most common cause of death among Texas Hispanics in 2002, and the fifth-most common in El Paso.⁷⁸ Mortality from diabetes, furthermore, is probably higher than indicated in statistics, since it is often listed as a contributing factor rather than a cause of death.⁷⁹

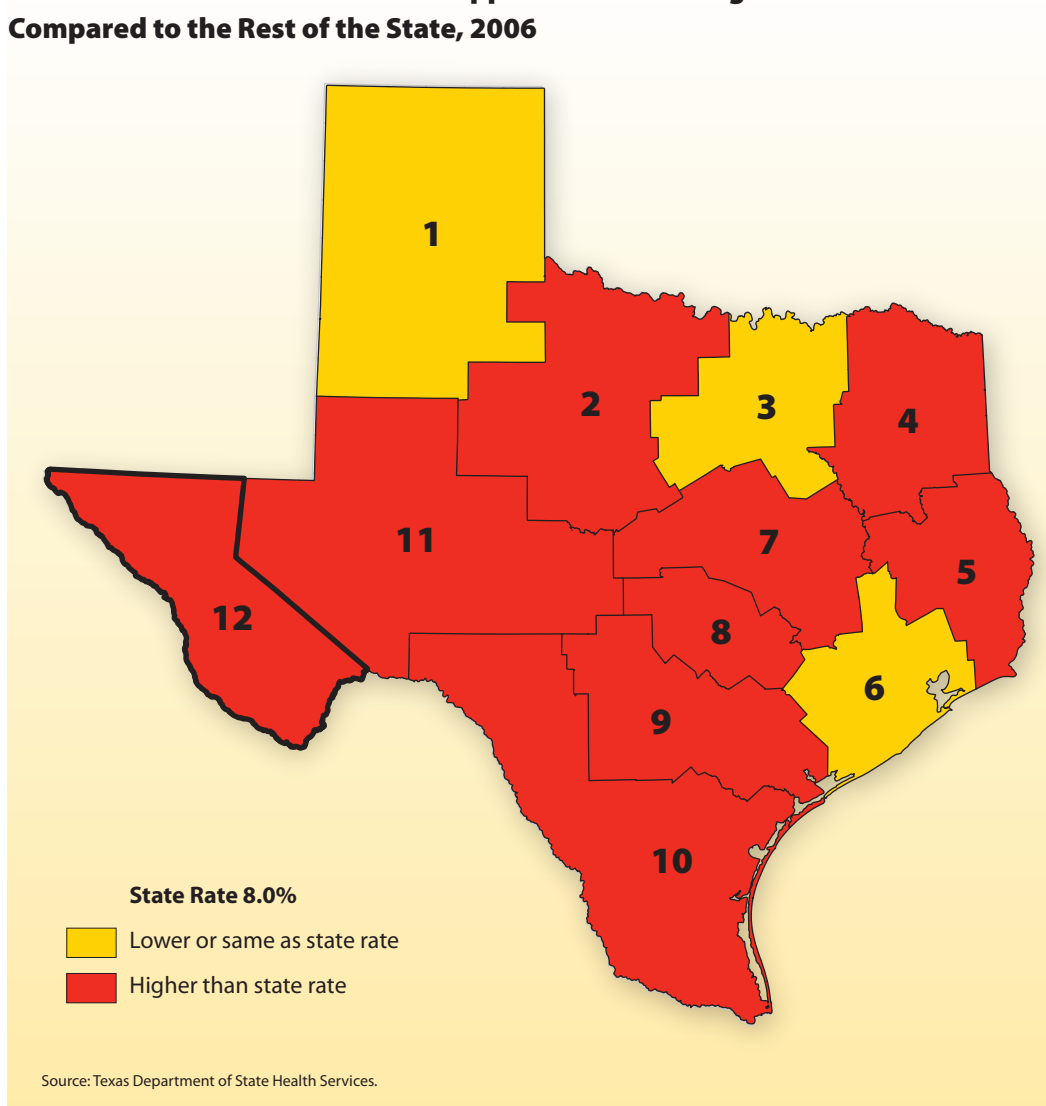
Texas hospital data reveal that two of the region's six counties have a higher-than-average number of admissions per 100,000 residents for long-term diabetes complications. In 2005, the state average for such admissions was 122 per 100,000 residents; in El Paso and Hudspeth counties, the rates were 166 and 238, respectively.⁸⁰

Local organizations in the region are joining the fight against obesity and diabetes. The El Paso Diabetes Association, in collaboration with Texas Tech-Pediatrics, Thomason Hospital Diabetes Management Program and Sierra Providence Diabetes Center sponsor two children's summer camps — Camp Lydia Mann and In Control Teen Camp — to educate children about diabetes.⁸¹ At the camps, children learn more diabetes, share common experiences and hear what they can do to avoid long-term diabetes complications.



Exhibit 33

Adult Diabetes Prevalence in the Upper Rio Grande Region Compared to the Rest of the State, 2006



Many local area hospitals and community health centers also provide educational and treatment programs to individuals with diabetes.

Las Palmas and Del Sol Healthcare System is home to the region’s first Diabetes Center of Excellence. The hospital’s diabetes treatment program takes a multidisciplinary-team approach and addresses the physical, psychological and social needs of the diabetic

patient. The hospital provides a wide range of services that include meal planning, exercise regimes, blood-glucose monitoring, proper foot care and the prevention and detection of long-term complications.⁸²

In 2005, the Diabetes Center at El Paso’s Sierra Providence Memorial Hospital was awarded the American Diabetes Association’s (ADA’s) Education Recognition Certificate for meeting stringent national standards for diabetes



self-management education programs. Diabetes self-management education teaches people to better manage their diabetes and avoid disease-related complications. In 2008, the ADA re-accredited Thomason Hospital's diabetes education program for three more years.⁸³

Community health centers, including Centro de Salud Familiar La Fe, Centro San Vicente Clinic and Project Vida Health Center, also provide diabetes education and lifestyle promotion programs that emphasize prevention. In 2007, following a competitive review, the Diabetes Program at the Texas Department of State Health Services selected the Project Vida Health Center in El Paso as a Community Diabetes Project (CDP) to provide community-based diabetes prevention and management. These CDP projects, according to the Texas Diabetes Council, "implement evidence-based programs and strategies at the community level, and create

or advocate for community policy, and systems and environmental changes conducive to primary and secondary diabetes prevention."⁸⁴

In recognition of the need for diabetes prevention and control in Border communities, the Texas Legislature created the Diabetes Research Center at Texas Tech University in El Paso in 2001. The center conducts epidemiological studies of diabetes and its complications; provides curriculum development assistance for medical education programs; and supports health education by disseminating information through its Web site.

Plans are under way to incorporate the Diabetes Research Center into the Diabetes and Obesity Research Center of Excellence at Texas Tech University Health Sciences Center in El Paso. The Center of Excellence will continue the research work of the Diabetes Research Center and provide the public with the latest information on diabetes and management of the disease.⁸⁵

Local health care initiatives as well as the efforts of higher education institutions have increased the availability of health care in the Upper Rio Grande region and should continue expanding services there.

Endnotes

- ¹ Margaret A. Laws, "Foundation Approaches to U.S.-Mexico Border and Binational Health Funding," *Health Affairs* (July/August 2002), p. 271, <http://content.healthaffairs.org/cgi/reprint/21/4/271> (last visited May 11, 2009); CHC Border Health Policy Forum, "The U.S./Mexico Border: Health Care Access and Resource Profile II," (Hotel Albuquerque, Albuquerque, New Mexico, December 11-12, 2006), http://www.borderhealth.org/files/res_806.pdf (last visited May 11, 2009) (Conference proceeding); and Martha M. Beard, "Ambulances, Ho! The Uniquely Precarious State of Health Care in Rural Far West Texas," *Health Law Perspectives* (September 23, 2004), pp. 1-2, 5, [http://www.law.uh.edu/healthlaw/perspectives/\(MB\)ruralwtexhealth4.pdf](http://www.law.uh.edu/healthlaw/perspectives/(MB)ruralwtexhealth4.pdf). (Last visited June 8, 2009.)

The Texas Legislature created the Diabetes Research Center at Texas Tech University in El Paso in 2001.

Texas Fitness

In 2007, Texas Comptroller Susan Combs announced the Texas Fitness Now grant program, aimed at middle school students attending schools whose enrollment is at least 75 percent economically disadvantaged. Texas Fitness Now helps teach children the importance of physical activity and fitness.

To be eligible for a Texas Fitness Now grant, a school must ensure that students in grades 6, 7 and 8 participate in physical activity either for 30 minutes a day or 225 minutes per two-week period for the entire school year, and meet several other physical fitness or administrative requirements. The grants may be used to buy equipment, develop physical education curricula and instructional materials or to train teachers to help their students become fit. At least 25 percent of the funds are directed for nutritional education.⁸⁶

Schools in the El Paso Independent School District and the Marathon Independent School Districts are among schools that received this funding in 2008-09.⁸⁷



- ² Roberto Coronado and Robert W. Gilmer, "El Paso Medical School: New Facility Kindles Hopes for Well-Paying Jobs," *Southwest Economy* (July/August, 2008), p. 15, <http://www.dallasfed.org/research/swe/2008/swe0804d.pdf>; and Texas Workforce Commission, "SOCRATES," <http://socrates.cdr.state.tx.us/>. (Last visited April 16, 2009.) A custom database query was created for Employer Contacts, LWDA Region 10 (Upper Rio Grande).
- ³ E-mail communication from Dwayne E. Collins, Hospital Survey Unit, Center for Health Statistics, Texas Department of State Health Services, January 22, 2009; data provided by Texas Department of State Health Services, "Texas Acute and Psychiatric Hospitals 2008." (Excel spreadsheet.)
- ⁴ Texas Comptroller of Public Accounts, "Hospital Districts, 2008," Austin, Texas, June 16, 2008. (Excel spreadsheet.)
- ⁵ Interview with Maria O'Byrant, executive secretary, Big Bend Regional Hospital District, Alpine, Texas, April 28, 2009.
- ⁶ Texas Tech University Health Sciences Center El Paso Campus, "About TTUHSC at El Paso," <http://www.ttuhs.edu/elpaso/about.aspx>. (Last visited May 11, 2009.)
- ⁷ Data provided by Texas Department of State Health Services, "Texas Acute and Psychiatric Hospitals 2008."
- ⁸ Lisa Selin Davis, "Where Cowboy Hats Meet Birkenstocks," *New York Times* (July 18, 2008), <http://travel.nytimes.com/2008/07/18/greathomesanddestinations/18havens.html>. (Last visited May 11, 2009.)
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