

were males, and the age group most affected was that 15 to 19 years of age, followed by those 20 to 24 and 25 to 29 years old. The largest number of cases was in the Federal District, followed by the state of Jalisco. The drug most used among young people was marijuana. Solvent inhalation was the second cause, in order of importance, followed by alcoholism, depressive drugs, stimulants, and narcotics and hallucinogens.⁵⁶

The ethnic question in Mexico

The indigenous question is important in Mexico because of the size of the indigenous population, its cultural significance, and the complex situation this population faces today and—it can be predicted—in the immediate future. According to the 1980 census, there were 5,181,000 indigenous people in Mexico, or 9% of the total population and 15% of the rural population. The 1990 census showed this proportion to be 7.4%, or 5,282,000 people.⁵⁷ Since neither census included children under five years and used the language spoken (monolingual or bilingual—an indigenous language and Spanish) as their ethnicity criterion, and because of the magnitude of the processes of acculturation and the spread of basic education in Spanish, it is quite possible that these figures are considerable underestimates. Other sources believe that the total figure in 1990 was 8 million, or 10% of the population.⁵⁸

Mexico's Indian population is divided into 56 ethnic groups located almost throughout the country, though some states have higher proportions of indigenous population than the national average. Examples are Chiapas, Oaxaca, and the states on the Yucatán peninsula. The largest ethnolinguistic group is the Náhuatl, with about 1.5 million members. The Náhuatl, together with the Yucatecan Mayas, Zapotecas, Mixtecas, and Otomíes represent 60% of the indigenous population. Paradoxically, the largest indigenous population is in Mexico City because of migration to the capital. A strong urban indigenous identity has taken shape in this population in recent de-

cade which is in continuing dialogue and exchange with the working-class urban identities and is already part of the city's culture.

During the 1970s the state's policy concerning indigenous people was characterized by rapid implementation of the so-called Indigenist Coordination Centers, an institution of the National Indigenist Institute. At the same time, educational services for indigenous people were expanded and national organizations representing indigenous communities such as the National Council of Indigenous Communities (1975) and the Alliance of Indigenous Bilingual Professionals (1977) were established. Some progress was made through these policies in transforming the indigenous policy from "for indigenous people" into one "with indigenous people," which is also called "participative indigenism." The principal problems confronting these communities, which essentially revolve about basic problems of infrastructure, health care, food, education, land ownership, justice, social organization, and employment, were identified. Finally, COPLAMAR, a presidential agency to centralize activities in this area, was created.

An evaluation of these policies made at the end of the decade concluded that, though various programs and works have been implemented in this context, effective community participation has not been achieved. Participative indigenism did not materialize and no conditions were created that would allow indigenous people to affect the direction of governmental policies. The indigenist policy has run into resistance in carrying out its programs, which makes them expensive and relatively unworkable. Because direct participation by the groups and national organizations was not taken into account, these programs affected the traditional organization of communities, as a result of which resistance to their implementation naturally arose.⁵⁹ The policy concerning Indian communities is today carried out through the Program to Develop Mexican Indigenous Communities, which is part of the 1989-1994 National Development Plan and is closely connected with PRONASOL. It has been

noted that this policy recognizes the multicultural and multilingual nature of Mexican society.⁶⁰

It must be realized, however, that the problems of ethnic groups are so vast and their specific challenges are such that it is not possible to solve them with new assistance and support programs. Such is the case, for example, with the agrarian problem. A study conducted on the basis of a sample of 561 municipalities considered indigenous in the 1980 census and in which 32 ethnic groups are represented indicates a high prevalence of "legally indefensible" properties. In addition, the predominance of small farming in some indigenous communities is noteworthy. The limitations characteristic of the small size of individual properties do not offer conditions for meeting a family's basic needs, especially if it is realized that part of these parcels are unsuitable for farming. The precariousness of the agrarian situation, the material basis of indigenous communities, shows that indigenous people have been the sector most severely harmed by the agricultural modernization policy implemented in recent decades.⁶¹ The areas in which indigenous people live have been affected by the transformation of the agricultural structure which, by expanding demand for livestock products, has again promoted situations of land pillaging. In addition to this situation are problems such as erosion, deforestation, petrolization, and land flooding resulting from dam construction. Ethnic groups often lack the necessary legal and organizational protection to deal with these negative effects of modernization. All these situations, together with deterioration in the wages of indigenous day workers, have encouraged migration to urban areas.

There are a large number of indigenous organizations that defend the interests of Mexico's Indian communities: the National Coordinating Office for Indian Communities (CNPI), National Ayala Plan Coordinating Office (CNPA), National Indian Council (CNI), Independent Front of Indian Communities (FIPI), Mexican Federation of Prehispanic Peoples (FMOP), Indian Communities Renewal Council (COREPI), and the Indigenous Peoples' Action Secretariat of the National Revolutionary Confederation (SAI-CNR).

Regional organizations have great influence in areas experiencing ethnic conflicts such as Huasteca, Tarasca, Yaqui, Oaxaca, and Chiapas.⁶²

The human rights situation

The PRI has dominated the Mexican Government for more than a half-century. Cuauhtémoc Cárdenas' FDR, a political movement capable of endangering the PRI's hegemony, appeared for the first time in the 1988 elections. Several movements which aimed at putting a stop to persistent electoral fraud also appeared in those elections. The Government has sometimes responded with violence. Various human rights organizations have noted that human rights violations, such as intimidation, jailing, disappearances, torture, and murder of militants belonging to political opposition organizations, have occurred frequently during elections in municipalities and states throughout the country. One hundred and ten people have died from these causes since July 1988, and 15 people died in the last election in August 1991.

The environment and natural disasters

Environmental deterioration is one of the problems that has become more important in Mexico in recent decades. Although the problem concerns various parts of society, the institutional response has been to create an agency with specific environmental responsibilities and duties, the Secretariat for Urban Development and Ecology. The Government also promulgated a General Law on Ecological Equilibrium and Environmental Protection.

Because of its varying terrain, size, and location on both sides of the Tropic of Cancer and between two oceans, Mexico has an enormous variety of climates and ecological regions, among which are deserts, pasturelands, temperate highland forests, tropical jungles, and coastal areas. Its biodiversity is thus very great.

Mexico's rapid economic growth in this century, together with the historical effects of the colonial period, has severely altered the environment and its effects may already be irreversible. Eighteenth-century observers recorded that forests covered half of Mexico, but now they cover only 25%.⁶³

A diagnosis of environmental problems in the country notes a set of problems that should be dealt with on a priority basis. Among them are: (a) a large proportion of agricultural lands are not suitable for the activities to which they are put, which leads to their rapid exhaustion, erosion, and dependence on agricultural chemicals; (b) the growing use of agricultural and forest lands for large-scale livestock raising; (c) deforestation—more than 1 million hectares are deforested annually, which means a deforestation rate of 1.3% a year,⁶⁴ and up to 90% of the country's wet tropical forests have been lost; (d) erosion, which already affects more than 75% of Mexico's 200 million hectares, of which 30 million are so seriously eroded that it is impossible to use them productively;⁶⁵ (e) growing pollution of surface and underground waters by suspended solids, alkaloids, sulfates, nitrates, and fluorides from untreated household and industrial wastewater and agrochemical use, a problem which is especially serious in the Valley of Mexico basin, the Lerma and Tula Rivers, and the Atoyac-Zahuapan and other basins; (f) salinization of irrigated lands, which affects a half-million hectares, or 10% of the country's irrigated lands; (g) loss of biodiversity, more than 15% of the country's flora species now being in danger of extinction; (h) deterioration of coastal areas and especially of singular ecosystems such as estuaries, mangrove swamps, and reefs, and finally, (i) the lack of forest, water, and soil policies and the absence of an adequate and sufficient regulatory and legislative framework governing environmental impact, contamination, and resource use.

Mexico City's extremely high pollution levels are also one of the country's most important and perhaps its best known environmental problems. The Federal District contains 25% of the country's population and 45% of its industry and

consumes 20% of its oil. The city's air pollution is aggravated by the terrain of the Valley of Mexico and weather phenomena. Thermal inversions occur between November and February, and wind storms between March and June and August and October. The most common pollutants are suspended particulates, sulfur dioxide, hydrocarbons, ozone, peroxydoacetyl nitrates and some aldehydes, carbon monoxide, nitrogen dioxide, and lead. Ozone has become the most important pollutant in recent years. The city's air pollution has required the adoption of an Environmental Contingency Plan, according to which industrial activity may be suspended and the movement of a specific proportion of official vehicles may be halted on certain days and in different parts of the city. Changes have even been adopted in the school calendar and schedule to prevent exposing children to the high pollutant levels that occur during early morning hours.

In the area of disasters, it must be noted that Mexico is a country at high seismic risk because of its location in the subduction zone between two major tectonic plates. On average, more than 90 earthquakes with a magnitude of more than 4 on the Richter scale occur each year. The areas at greatest seismic risk are Colima, Michoacán, Jalisco, Guerrero, Puebla, Oaxaca, and the Federal District. Most of this century's earthquakes with magnitudes of or higher than 7 on the Richter scale have originated in a narrow southern area between the Sierra Madre del Sur and the Pacific coast of the states of Jalisco, Michoacán, Guerrero, and Oaxaca.

On September 19, 1985, an earthquake registering 8.1 on the Richter scale shook almost all of the country. The total area affected by the seismic wave was estimated at 800,000 square kilometers, and the earthquake is thought to have been the strongest in this century. The most affected states were Colima, Guerrero, Oaxaca, Jalisco, Michoacán, Morelos, and Veracruz, together with the Federal District. More than 150 aftershocks measuring from 3.5 to 6.0 on the Richter scale were recorded during the following 45 days. The strongest occurred on September 20 and had a magnitude of 7.5.

It is estimated that more than 20,000 people died as a result of the earthquake. The number of dead in the Federal District alone was estimated at 7,000. Half of the dead were aged 25 to 64 years; 78% of those who died were older than 15 years. It is calculated that at least 33,000 others were affected. In material terms, the earthquake caused numerous cave-ins along highways and rivers, the complete or partial collapse of many buildings, and serious damage to industry and public service networks. One hundred and fifty thousand jobs vanished. In the Federal District alone, noted the Metropolitan Emergency Commission, 2,831 buildings suffered structural damage of some kind, 31% were left completely in ruin, and between 30,000 and 50,000 dwellings were lost. The damage many buildings suffered showed that enforcement of earthquake-resistant building codes was very lax.

Health plant losses were also great. Thirteen hospitals were completely or partially damaged and 4,387 beds lost, as were 50 smaller units and 256 outpatient clinics. The city's general hospital completely lost its 244-bed obstetrics-gynecology unit and tower housing its resident physicians.

The September 1985 earthquake and, seven years later, a gas explosion in Guadalajara have shown that neither the Government nor society's traditional organizations are yet able to respond to disasters of such magnitude, though the recurrence of such natural phenomena and the risk of man-made disasters are in themselves a call to the organization and preparation of society and the country's institutions for emergencies. After the 1985 earthquake the lack of governmental response caused strong social tension. In this regard, the earthquake showed a need to strengthen the health sector's disaster plans, draw up vulnerability and contingency plans for risk areas, prepare hospital plans to deal with disasters, develop methods for rescuing people trapped in collapsed buildings, and promote information and training programs concerning the health care needs that disasters create. In turn, the Guadalajara disaster showed an urgent need for stricter measures to monitor and inspect companies and human activities with a risk potential.

The impact of cooperation and development institutions and policies

The official development aid (ODA) that Mexico received in 1990 amounted to USD 130 million, or approximately 0.1% of its GNP. In relative terms, the amount of aid received is among the lowest in Latin America and the Caribbean since, because of its greater relative development, Mexico is not eligible to receive ODA.⁶⁶ Of the total, 5.8% was used for social investment.

United States aid to Mexico has increased significantly since the mid-1980s as part of the two countries' increasing closeness and the NAFTA negotiations; the U.S. Agency for International Development (USAID) office in Mexico City was closed from 1966 to 1977.⁶⁷ In contrast to other Latin American countries, very little aid is now channeled through USAID and most is channeled through other agencies and programs. It is thought that Mexico is now the greatest recipient of United States aid other than through direct aid channels in the world.⁶⁸ The most important categories are food aid via concessionary credits and credit guarantees for importing U.S. agricultural products, support for debt management and restructuring and reforming the Mexican Government, and social compensation program support.

In the area of food aid, Mexico has become the world's greatest beneficiary of concessionary credits and credit guarantees by the Commodity Credit Corporation (CCC) of the U.S. Department of Agriculture (USDA) to purchase U.S. farm products, sales of which increased from USD 38 million in 1982 to USD 1,200 million in 1988. The spectacular growth of these programs is very significant as they are related to the equally extraordinary growth of Mexican imports of U.S. agricultural products, which in the same period rose by 42% from USD 1,900 million to USD 2,700 million. Food aid has been controversial in that it has helped weaken the country's food security and has served in the short term to offset governmental adjustment policies, which have

reduced or eliminated subsidies, credits, and supports for small and medium producers of basic grains, who in large measure are responsible for food supply. In addition, food aid has tended to strengthen governmental social compensation programs in the context of structural adjustment. According to USAID evaluations, 33 million Mexicans have received food aid from the United States averaging USD 2 per capita through subsidized products, the Government's social compensation programs (e.g., PRONASOL and DIF), or NGOs

Other significant programs focus on the health care area, birth control (through the NGOs of the Mexican Federation of Private Family Planning Associations), and private sector support through financing of imports of U.S. goods by the Export-Import Bank (EXIMBANK). Approximately a third of that agency's credits each year are for Mexico.

In recent years, however, the aid that has increased most in relative terms has been that for controlling the drug traffic, which responds to growing U.S. concern about drug shipments across the more than 3,000 kilometers of the U.S.-Mexican border, the U.S. Drug Enforcement Agency (DEA) has many agents in Mexico. In 1991, of USD 20.46 million in direct aid, USD 19.3 million was for drug-control assistance. USD 26 million was allocated to Mexico for the same purpose in 1992, and USD 27 million was requested from the Congress for that purpose for 1993.⁶⁹ The growth in narcotics-control assistance is very significant because of the relative absence for a long time of United States security assistance to Mexico.

Drug-control aid has been the subject of intense debate because DEA's operations have created strong tensions between the two countries and there is evidence that they, as well as those of the Federal Judicial Police, have led to human rights violations.

MEXICAN RED CROSS

Entrepreneurial efficiency and attachment to tradition in the face of social crisis and uncertainty about the future

The Mexican Red Cross is well developed institutionally. It is affected by various political and administrative conditions (the national federal system), demographic conditions (the population's size and high urban concentration), and the country's sociopolitical peculiarities, which historically have been characterized by the predominance of a single party and great social participation.

During the 1980s, Mexico began a process of opening, modernization, and economic adjustment which culminated in the second half of 1992 in the signing of the Free Trade Agreement with the United States and Canada. These events have undoubtedly favored the modernization and entry of the Mexican economy into the world arena, but at the same time they have created high social costs that are now reflected in unequal income distribution, deterioration in real wages, and increased poverty. In relation to social investment, governmental plans, though having social compensation components such as the National Solidarity Program, have not managed to halt the marked impoverishment of the population significantly.

The most important health indicators show increases in child mortality and malnutrition, a high rate of maternal mortality, and a high incidence of cholera and AIDS, which are aggravated by significant deficiencies in environmental sanitation. Large numbers of Mexican children and young people go to work at an early age and show an increasing consumption of drugs and delinquency problems.

Environmental deterioration is one of the most important problems. Deforestation, erosion, surface and underground water contamination, and air pollution in Mexico City, together with the earthquake risks the country faces, result in great vulnerability to environmental problems and natural disasters

Because of all these factors, Mexico faces a panorama of uncertainty in the 1990s in a context of deteriorating social conditions in which the advantages and risks, especially in social terms, of economic integration with the United States and Canada are still not clearly defined.

The Mexican Red Cross has a balanced structure of programs and services. Health services, human resources development, and social assistance are of prime importance in its institutional functioning. Nevertheless, it is pertinent to review the coherence and efficiency of the services it provides in the face of the new social demands imposed on it by an environment characterized by social crisis and uncertainty about the future.

The institution has more than 297,000 workers and facilities and equipment that, except for a few specific limitations, are of high quality. The strongest components of its infrastructure are its training centers (26 nursing schools and a large training center), its hospital network (50 medical care centers); its relief centers (16 relief posts), and its blood banks (24 blood donation centers and seven mobile units).

The option it has chosen to consolidate its human and social service base consists of strengthening its own volunteer corps and, at the same time, citizen participation in its responsibilities ("Mexican Red Cross-Society"). In doing this it conducts extensive educational activities and constantly searches for cooperative links with institutions and communities. It also promotes cooperation with other National Societies.

The Mexican Red Cross has a high degree of financial autonomy and is solvent, which allows it to carry out a policy of free care in most of the services it provides. The financial and technical support of foreign cooperation after the 1985 earthquakes that affected Mexico City played an important role in supporting the institution's

finances. The activities it undertook with citizen and international support after the disaster have had profound consequences in shaping its present organizational profile and practices. As the final report on the 1985 earthquake submitted to the Federation in 1989 shows, the projects implemented during the "rehabilitation phase" fostered new service alternatives which then became permanent.

Although this analysis has not been able to uncover the concrete conditions of a structure and operations that the National Society says are decentralized, it can be said that, with its regionalized organization and numerous local units, it has achieved good coverage of the entire country (416 delegations and 24 subdelegations). The Mexican Red Cross puts strong emphasis on deconcentrating its activities and, at the same time, it maintains a deeply-rooted tradition of institutional centralization, which it believes essential to preserving its national integrity.

Among the major challenges facing the Mexican Red Cross in coming years are, on one hand, necessary growth of its programs and services for the vulnerable and, on the other, development of a strategic planning system that will enable the National Society to adapt itself flexibly and in a decentralized way to the major changes that regional integration will bring about in Mexico. This must be done in particular by developing its capacity for streamlined and flexible response to new situations of vulnerability that may arise as part of that process.

Organization of the National Society

Organizational structure and geographic coverage

The constitution of the Mexican Red Cross goes back to 1910, the year in which the Mexican Revolution began. According to prevailing legislation, it is an association providing private assis-

tance in the public interest. Because it is located in the Federal District, it is a national institution.

Its internal structure and functioning are basically defined by its statutes, in force since 1967. It also has a large body of regulations.

The institution's higher central government consists of three collegial units: the National Assembly, National Council, and National Convention. The National Assembly is composed of sponsoring and regular associates and is responsible for internal electoral matters, statutory reform, and inspection of accounts. The National Council is the institution's executive body and is composed of former Presidents for life, plus 16 people elected by the sponsoring associates and eight by regular associates (at least four of the latter should be Presidents of local councils). The Council elects its own President, who is also President of the entire institution, its General Manager, and a legal counsel. It also elects two Vice Presidents and the Treasurer from within its own ranks and appoints the Secretary and Deputy Secretary.

In each of the delegations, and as "auxiliary bodies subordinate to the National Council," are local councils.

The National Convention is open to all associates and members of the National Society, analyzes the institution's activities, and adopts resolutions concerning them which take effect only if approved by the National Council or the Assembly (depending on the matter in question). State and regional conventions are also held when approved by the National Council.

According to the statutes, sponsoring associates (individuals or corporations making financial contributions) control the National Council and thus its decision-making authority.

Geographic coverage is based on a regionalized organization and the operations of a network of "delegations." There are eight regions which were created in accordance with the requirements for the control and continuity of activities. The largest is Region I, which comprises five northern states, and the most densely populated is Region V, which includes the Federal District and four neighboring states. A regional delegate

is responsible for coordinating each region. There are also state delegates, and there can be an unlimited number of state subdelegates.

Delegations are delimited on the basis of population parameters (they are not necessarily established in pre-existing legal and administrative jurisdictions). Their number in each state thus varies considerably (from 1 to 40). The states with the most delegations are Veracruz (Region VI) and Sinaloa and Sonora (Region I).

To organize a delegation, its "founding group" should determine whether it is needed from a geographic and population standpoint, whether its citizenry is willing to support it, and whether it has an adequate infrastructure and could have an ambulance. There are instances in which a delegation is not created. There has nevertheless been an increase in the number of delegations: 366 delegations (and 24 subdelegations) were reported in May 1991, and 416 exist today.

The representation that the various national committees have in each delegation decisively affects its operations. The Ambulance and Relief Service Committee is the only one represented in all delegations, followed by the Ladies, Youth, and Medical Services Committees.

Administration and planning

The Director General is responsible for directing the institution's administrative affairs and is directly in charge of all central coordinating offices. There are a director and an executive secretary of delegations. The departments have their own chiefs.

The 21 National Committees are the "backbone" of institutional activities. Ten of them deal with internal management and administration: Finance; Regulatory Matters and Consultation; Uniforms, Insignia, and Emblems; Honor and National Justice; Associate and Member Admission; Compensation; Review of Employment Records, Publicity and Information Activities; Institutional Assets, and Development.⁷⁰ Ten other "operational" committees are in direct

contact with the community and thus define their activities as outside the institution.

The administrative importance of the "internal management committees" is clearly reflected in their support and management functions. The "operational committees" are also important in this field, but their role is clearer and more decisive in institutional planning: they are devoted to major program areas and so become relatively stable instruments for central coordination.

The structuring of the institution's major programs through operational committees is clear and advantageous from the administrative viewpoint, but it hinders linking different programs into a homogeneous whole and prevents the National Society's working strategies from being clearly established and adequately ranked by priority. Additional problems are the lack of relatively precise criteria for establishing priorities in allocating financial resources and weaknesses in diagnosis, programming, and evaluation which, according to some intermediate-level managers, exist in specific fields of activity.

Moreover, the way in which programs resulting from the existence of the committees are organized does not allow all programs and projects under way to be included, simply because many of them do not fit directly into the committees' areas of activity. There is a need to develop a common language governing their designation and classification.⁷¹

Finally, planning is impeded by internal arguments about the values that the "institutional philosophy" has established which hinder possible activities such as family planning and AIDS prevention.

Human resources

The Mexican Red Cross now has 297,477 personnel, according to the National Society's own data, of whom 7,307 are paid staff and 290,170 are volunteers. The largest volunteer groups are the Relief, Youth, Training, Ladies, and Disaster Committees. The internal management committees of the national headquarters and

a number of delegation programs have 80,400 volunteers.

The volunteers have a determining role in the institutional strategy, but the "Mexican Red Cross-Society" policy minimizes the need to produce separate census information about them. Three problems are important in regard to volunteers: (i) they participate extensively in decision making and are free to voice their opinions, but their poor knowledge of the institution's objectives and activities prejudices their identification with it; (ii) the efforts made to train them are still inadequate because of methodological limitations and the large number of volunteers to be given instruction, and their assignment to areas of work is usually inadequate; and (iii) their morale is generally high, but the procedures (incentives and rewards) used to motivate and retain them do not produce satisfactory results. Although not great, their dropout rate is a cause for concern by the Mexican Red Cross and is intensified externally by promotion of volunteers in other institutions.

As for paid staff, the national headquarters has 107 employees, all in administrative and secretarial work.

The paid staff in the delegations numbers 7,200, of whom 2,450 are nurses and 1,500 are ambulance attendants. It is believed necessary to review the system of incentives for these workers since other institutions can attract them with better wages.

Finance and budgeting

According to the financial statements of the Mexican Red Cross, the institution's revenues were almost MXN 40,000 million (approximately USD 13 million⁷²) and expenditures amounted to MXN 29,000 million (about USD 10 million) during the fiscal year ending December 31, 1990, and there was a surplus of approximately MXN 10,000 million at the end of the fiscal year.

The institution does not receive subsidies from the state. Its most important sources of revenue are:

- a) Activities coordinated by the National Fund-Raising Committee, among which the most important is the *Oro Raspadito* lottery held once a year. The revenue from this source in 1990 was approximately MXN 15,600 million (about USD 5 million).
- b) Its own investments: external debt purchases known as "swaps" or debt "exchanges" were made in fiscal years 1989 and 1990 in order to carry out projects of social benefit which were subject to substantiation and approved by the Secretariat of Finance. In 1990 this category produced around MXN 8,000 million for the National Society.
- c) Contributions from individuals and corporations: contributions from sponsoring members and donations in kind, inheritances, and bequests. This category produced about MXN 7,000 million in 1990.
- d) International (Governments, other National Societies) and national financial cooperation to carry out specific projects. Because of the institution's solvency, this category is not essential for conducting its activities today, though it has been important at other times, especially after the Mexico City earthquake of 1985.⁷³

Role and activities of the National Society in the context of the country

Principal activities

Health services

The institution's health system has a strong infrastructure: 50 medical care centers and 16 relief posts (1991). There is a National Medical Services Committee.

The Mexican Red Cross's health care model is based on emergency services. This is evidenced in Mexico City by the Emergency Pre-hospital Medical Care System (SAMPU).

This system links two key components: (a) a communications center (CECOM) with a computerized telephone switchboard and cellular telephony which can record an emergency and advise the nearest Red Cross center (eight are connected to CECOM); and (b) a set of standardized basic and advanced life support procedures applied at the site of an accident or in a suitably equipped ambulance by emergency medical technicians.

The Mexican Red Cross has also adopted a policy of strengthening its trauma hospitals. This is seen in the Guillermo Barroso Corichi Central Hospital.

Seven million medical treatments and 1,336,000 emergency ambulance services were reported for 1990 and 1991.

The institution now operates 24 "Voluntary Blood Donation Centers" throughout the country. Most of them belong to "type A," which has full services and training activities; five are of the "AA" type (the largest and having regional coverage), while a few are in the "B" category and have very limited activities. The National Blood Committee advises and oversees them. Their staffs are paid because of the specialization their work demands.

There are also seven mobile units for collecting blood donations, three of them in Mexico City. Recipients are not charged for blood by institutional policy and for legal reasons. Direct and indirect costs are paid by benefiting institutions.

The National Rehabilitation Program, which was created to care for victims of the 1985 earthquakes, is now permanent and one of the National Society's most important areas of work. It serves patients with physical disabilities of various kinds and the hearing-impaired. Its interdisciplinary team uses a comprehensive approach and receives cooperation from several committees.

A National Organ Transplant Program is being undertaken, and transplantations have already been performed.

Nurse training is conducted in a network of schools: 11 at the university level, five at the technical level, and 10 for auxiliaries, and ap-

proximately 25 are being planned, incorporated, or finishing their courses (1991 data). There is a National Committee on Nursing Schools.

The health care programs have broad coverage, are pioneering, and have national and international recognition. It was noted self-critically that some of them are not well planned and may have been established because their activities were then "fashionable."

Social assistance and welfare services

"Special projects" are one of the priority policies of the Mexican Red Cross. They provide financial assistance for building or improving facilities to care for disadvantaged children and elderly persons and for constructing dwellings in marginal areas.

Several projects to "strengthen the institutional infrastructure" also fall into this category.

The Bilateral Community Development Support Program (Mexican Red Cross and American Red Cross) is of great financial and technical importance. It has led to implementation of primary health care activities, technical advice on agricultural production, latrine construction, etc. It is conducted in rural and marginal urban areas.

The Ladies Committee has organized a Committee on Community Aid to assist delinquent children and women prisoners. It also takes part in various solidarity activities, fund raising, rehabilitation, etc.

The Veterans Confederation also plays a significant role in the Mexican Red Cross's social action.

Relief and emergency services

Noteworthy in this area are the activities of several committees covering related program areas.

The National Relief Committee, whose chairman oversees all relief bodies in the country, takes part in activities to promote the integration of volunteers and provide them with training. It organizes local and national meetings to exchange information and standardize procedures.

The National Disaster Committee is responsible for directing and advising corresponding local committees, though they have still not been organized in all the delegations. Its basic guideline is the "National Disaster Relief Normative and Operational Program, Series 3000," prepared with support from the American Red Cross. It is developing a "National Radio Communication System for Disasters" and has launches and transportation units.

The Mexican Red Cross is organized to respond to emergencies through a system that enables it to mobilize successive levels of capability according to their seriousness. It has warehouses for medical and general supplies. It has coordinated aid shipments to several countries affected by earthquakes.

There has been extensive training in connection with disaster relief. Coordinated by the National Training Committee, national schools have been established for paramedics, mountaineering, parachuting, urban rescue, disasters, cave exploration, and aquatics.

The National Training and Development Center (CENCAD) in Toluca brings together the staff, infrastructure, equipment, and teaching materials needed to provide training in preventing and managing very varied emergencies. On a 41,000 square meter campus, it has a logistics and administrative building, eight classrooms, a field for firefighting practice, and a multiuse tower for simulating rescue situations. It is administered by the National Training and Development Coordinating Office. During disasters it operates as a logistics and supply center.

This entire educational system is open to the National Society's own volunteers and the civilian population.

Other programs and activities

The Youth Red Cross operates in 75% of the delegations. Its National Committee establishes policies for corresponding local committees and supports their work in various ways. As a volunteer group, it has its own areas of activity such as student committees, camps for young people, and

various training activities, primarily for children under 15 years old. It also contributes to the activities of several other committees and programs.

Relations with the Government

The Mexican Red Cross has several formal links with the Government. The "Private Assistance Board for the Federal District and Territories" has the authority to approve its statutes and supervise its activities throughout the country. For reasons of protocol, many of the Government's executive officials are honorary members ex-officio of the National Society and the President of the Republic is its Honorary President ex-officio.

These links are intertwined with many others of an operational nature in all the program areas of the Mexican Red Cross. As an example, the Youth Committee has collaborative ties with the Secretariat of Public Education, the Disaster Committee with the National Civil Protection System and the National Institute of Statistics, Geography, and Information Processing, etc.

Relations with other organizations and agencies

These are very diverse. Three are noteworthy: (a) the special projects are a bridge to numerous social welfare organizations and commercial firms; (b) the target population of relief training is workers in innumerable companies and institutions, especially those able to shelter large groups (hotels, industries, etc.); and (c) the participation of private companies as associates of the Mexican Red Cross facilitates the financial contribution of business groups as sponsoring members and, at the same time, enables a large number of volunteers from this sector to be recruited for collaboration with the National Society.

The role of external cooperation

Cooperation with the American Red Cross is significant. That National Society cooperates in the disaster, social assistance, and blood services areas. An additional area of cooperation is the joint program that locates military members assigned to the Persian Gulf during the recent war there on behalf of their Mexican families.

The institution is eager to support the National Societies in the region, especially in developing human resources for relief and health care activities—areas in which it has accumulated great experience. For this it has an excellent infrastructure, which includes the National Training Center. The institution sent aid to Peru, Armenia, and Iran after earthquakes that affected those countries.

Only one appeal for aid has been made through the Federation since 1984, as a result of Hurricane Gilbert (1988). Approximately CHF 50 million was received after the 1985 earthquakes.

The National Society's perception of its public image

The institution's members voice a high level of confidence in their good institutional image and take pride in the varied successes of their activities, especially in the areas of health services and human resources development. They believe they have good community acceptance, recognition by the authorities in specific fields, and positive ties with the public and private sectors.

Various factors contribute to this perception: financial independence from the Government, staff activities, support in the mass communications media, etc.

Nevertheless, this confidence tends to weaken external information dissemination activities and updating of information. External communication is not clearly programmed and available channels are not adequately used to publicize the activities of the Mexican Red Cross.

Two factors are viewed negatively: the use that some people make of the institution to advance themselves politically, socially, or financially, and inadequate protection of the institutional emblem.

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

The Mexican Red Cross is one of the strongest National Societies in Latin America. It has achieved balanced and solid program development sustained by a strong infrastructure and abundant financial resources. There is also awareness in the National Society that it cannot rest on its laurels and must deal with new challenges of institutional growth and strengthening.

In direct relation to its possibilities of growth, it is essential to analyze the environment in which the National Society operates, which in recent years has been characterized by modernization and the internationalization of the Mexican economy in a process that is producing heavy costs in social vulnerability. This is clearly reflected in the increase in poverty, deterioration in wages, and inequity in income distribution which negatively affect large segments of the population and is perhaps the greatest challenge to the Mexican Red Cross's future growth in terms of demand for services.

Some of the problems that may become obstacles to the institution's growth are the following:

- a) Institutional planning is not generally formalized or integrated, which may impede the unity, flexibility, and direction the planning system needs to deal with the National Society's vast program complexity in a context of change and uncertainty.
- b) Some fields of activity, such as health care activities, show weaknesses in diagnosis, programming, and evaluation and do not always respond to the priority needs of the vulnerable.
- c) The institution's financial solvency is clear, but the internal distribution and prioritization of financial resources is relatively inequitable and sometimes inadequate to meet the needs of the branches, according to some of the National Society's members
- d) In the area of human resources development, though the National Society's ability to attract volunteers is successful and its paid staff is large, the fact that there is no overall policy to promote their development is noteworthy. In consequence, some key areas such as participation, training, and motivation are deficient.
- e) Finally, the activities and means that the Mexican Red Cross uses to communicate its experience and information do not match its needs and possibilities in this area. Some members perceive the absence of an analytical methodology for exploring the institution's wealth of activities and publicizing its successes and problems.

RECOMMENDATIONS

- 1. Improve the planning system in order to respond to situations of vulnerability in the country more adequately**
- 2. Review and make systems for allocating financial resources responsive**
- 3. Improve institutional evaluation procedures**
- 4. Establish a human resources development program**

1. Improve the planning system in order to respond to situations of vulnerability in the country more adequately

- 1.1 Adopt a strategic planning approach for the entire institution that makes current programs and services coherent and enables them to develop flexibly and in a decentralized way.
- 1.2 Draw up a long-term Development Plan defining the National Society's general policies and priority areas of activity, taking into consideration the main trends in Mexico's social sphere in coming years, specifically the needs of the most vulnerable, with emphasis on the local level.
- 1.3 Improve procedures and methods of diagnosis, programming, follow-up, and evaluation, especially those applicable at the local level, to provide feedback to the Development Plan and guarantee its coherence with annual and regional plans.
- 1.4 Evaluate the pertinence, efficiency, and impact of current programs and activities with respect to the needs and demands of the most vulnerable.
- 1.5 Develop the social welfare area as part of the Development Plan and make this area the basic thrust of institutional growth in coming years.

2. Review and make systems for allocating financial resources responsive

- 2.1 Evaluate current procedures for allocating financial resources, in particular the consistency between institutional policies, budgeting, and expenditure.
- 2.2 Establish budgeting systems and procedures based on objective, transparent, and financially efficient criteria which guarantee that resources are allocated in a way congruent with the action priorities noted in the Development Plan.
- 2.3 Introduce systems for measuring administrative and operational efficiency so as to have precise indicators in preparing budgets.
- 2.4 Allocate greater financial resources to the branches to increase the institution's coverage and social impact.

3. Improve institutional evaluation procedures

- 3.1 Establish a system for continuous follow-up and evaluation of programmed activities that analyzes their effectiveness, efficiency, and impact, as well as the process and context of programs to investigate longer-term results less apparent in the short term.
- 3.2 Strengthen the system of internal information about factors sustaining institutional activities, both with respect to technical means (data-processing support) and to human resources (personnel training) so as to support the evaluation system.
- 3.3 Improve the systematization of reports on the institution's general activities and by program to strengthen planning and programming.

4. Establish a human resources development program

- 4.1 Conduct a study to determine the training needs, expectations, and working conditions of the institution's human resources.
- 4.2 Based on the above study's findings, design and implement a continuous training program based on participative methods.
- 4.3 Include a unified human resources development program for volunteers and paid staff which includes on-going training and promotion and incentive systems and is based on experiences gained and activities under way in the Development Plan.

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