



# 3-minute case study: Companions for health

By Lia Novotny | August 28, 2018

## The problem

While Mexico guarantees universal healthcare, it is difficult to deliver care to remote rural regions. Take the southern mountains of Chiapas, where hundreds of small villages are scattered across a web of narrow dirt roads, existing government health clinics were unstaffed, and three-fourths of residents live below the poverty line.

## The solution

To address the community's acute and chronic healthcare needs, Partners in Health (PIH), the U.S.-based nonprofit, established a sister organization in 2011, *Compañeros en Salud* (CES), in Chiapas.

In partnership with the Mexican government, the organization revitalized 10 public clinics and recruited new doctors to staff them during their obligatory, post-grad service. The doctors focus on providing comprehensive primary care, including

for noncommunicable diseases such as diabetes, hypertension, asthma, epilepsy and depression.

According to CES cofounder Dan Palazuelos, M.D., director of community health systems at PIH, the program is distinguished by its focus on "active case finding" and its reliance on a network of nearly 100 community healthworkers, called "acompañantes," for active case retention.

The process begins every two years when medical students and other volunteers travel house-to-house taking blood pressures and measuring glucose levels, recording heights and weights, filling out detailed health questionnaires on residents — and "often finding diseases [the residents] didn't even know they had," says Palazuelos.

When patients have risk factors, they are asked to visit their community clinic for diagnosis and treatment. Then they are linked to an *acompañante*: A health worker whose job it is to support that patient throughout

his or her journey from diagnosis to stable health. Acompañantes visit patients at home and provide education, emotional support and troubleshooting on how to incorporate the doctor's orders into their daily lives.

And they keep coming back, because those friendly conversations help patients adjust to their condition and adhere to treatment.

This sometimes takes the wisdom and creativity of acompañantes; if patients can't remember to take their pills, the worker may help them set up a pillbox, put it in a place they always walk by, set up an alarm reminder, or enlist their spouse to help. The key, says Palazuelos, is "getting to know patients really well so you can help them realign their life to better address why they are sick."

## The outcome

People in the region of Chiapas have welcomed this new way of getting care, active case finders and acompañantes, into their homes and their lives. This combination of supports has led to published clinical successes, such as rates of clinical control of hypertension reliably over 70 percent – a range rarely achieved in Mexico or even in many parts of the U.S.

"Providing this extra social support in the community and in the household, on top of the high-quality care newly being given in the clinics," says Palazuelos, "really takes clinical control to a new level."

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*Lia Novotny is a frequent contributor to athenainsight.*

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