How does Mexico compare?

KEY FINDINGS

- Life expectancy has increased much more slowly in Mexico than in other OECD countries, so Mexico now has the lowest life expectancy of all OECD countries. This is due to higher risk factors to health and mortality, but also to persisting barriers to access to high-quality care.

- Health spending in Mexico has increased fairly rapidly since 2012, particularly government expenditure, but total spending on health per capita in Mexico remains much lower than in nearly all other OECD countries and a greater share also is paid directly out-of-pocket by households.

In 2013, life expectancy in Mexico was the lowest among OECD countries at 74.6 years, compared to the OECD average of 80.5 years. The gap in life expectancy between Mexico and the average across OECD countries has widened from 4 years in 2000 to nearly 6 years in 2013, because the increase in Mexico has been much slower than in other countries. This slow progress is due to greater risk factors to health and mortality in Mexico, but also to persisting barriers to access to high-quality care.

While tobacco smoking and alcohol consumption in Mexico are low, unhealthy diets and lack of physical activity are causing drastic increases in obesity levels. Mexico has the second highest obesity rate among OECD countries, after the United States, with one out of three adults in Mexico being obese. Obesity is a known risk factor for cardiovascular diseases, diabetes and some forms of cancer. Whereas mortality from ischaemic heart disease in the OECD decreased by 45% between 1990 and 2013, in Mexico it remained nearly unchanged.

How Mexico compares with other OECD countries on selected indicators of health status, risk factors to health and quality of care (2013 or nearest year)

Note: The closest the dot is to the center “target”, the better the country performs. The countries in the inner circle are in the top quintile among the best performing OECD countries, while those in the outer circle are in the bottom quintile.

The quality of care in Mexico is also generally lower than in most other OECD countries. This is notably the case for hospital care provided for patients admitted for acute conditions such as a heart attack (AMI) or stroke. The percentage of patients surviving these life-threatening conditions is much lower in Mexico than in other OECD countries.

So-called ‘avoidable’ hospital admissions for chronic conditions such as asthma and diabetes are used as indicators of access to quality primary care; when primary care systems are working well to manage chronic diseases in the community, ‘avoidable’ admissions should be low. While Mexico has relatively low hospital admissions for asthma and chronic obstructive pulmonary disease (COPD), it has the highest admission rate for diabetes. This highlights the need to strengthen access to good primary care in Mexico.

**Health spending in Mexico has increased fairly rapidly since 2012, particularly government spending, but financial barriers to health care persist**

Since 2012, health expenditure in Mexico has increased more rapidly than in most other OECD countries, driven by increases in government (public) expenditure. Still, overall health expenditure per capita in Mexico remains much lower than in nearly all other OECD countries (except Turkey).

The share of direct out-of-pocket expenditure by households has come down in Mexico, as health insurance coverage became more universal and a greater share of health spending was paid through public sources. Still, the share of out-of-pocket expenditure in Mexico, at 45% of total health spending, remains the highest among OECD countries. The high burden of out-of-pocket spending may create financial barriers to health care access, particularly for low-income groups.

**Health at a Glance 2015** provides international comparisons of health status, risk factors to health, health expenditure, access to care and quality of care. For the first time in 2015, the publication also includes a set of dashboard indicators summarising the comparative performance of OECD countries on these different dimensions of population health status and health system performance.


For more information on OECD’s work on **Mexico**, please visit [http://www.oecd.org/mexico](http://www.oecd.org/mexico).