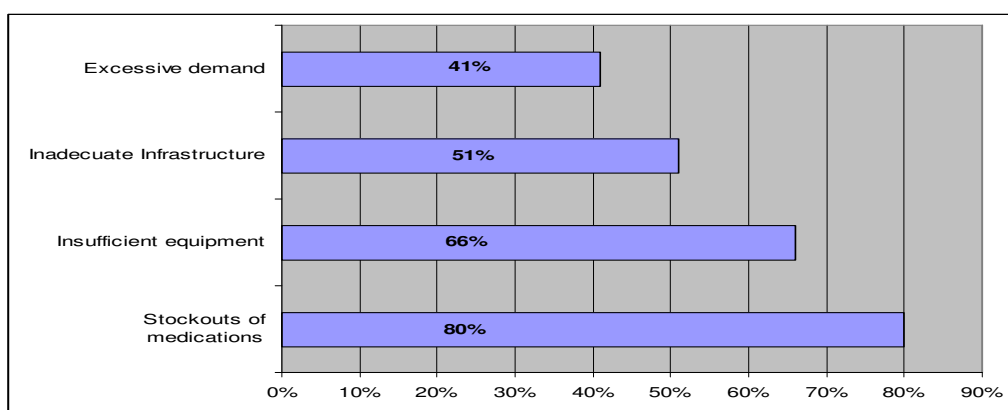


**Figure 3. Differences between total personal contracted in basic health units and the self-selected sample**

Occupational category	Total	%	M	F	Sample	%	M	F
Physicians	73	39	32%	68%	30	35	30%	70%
Nurses	50	27	1%	99%	27	32	4%	96%
Promoters	61	33	55%	45%	27	32	17%	83%
Total	184	100			84	100		

Source: Authors using data from the health services providers' questionnaire. Research project on public-private interactions in the Mexican health sector.

**Figure 4: Main service delivery problems faced by basic health unit personnel**



Source: Authors, using data from the health services providers' questionnaire. Research project on public-private interactions in the Mexican health sector.

**Figure 5. Basic health unit personnel reasons for qualifying as advantageous or disadvantageous the contracting mechanism.**

Category	Reasons
Somewhat advantageous	<ul style="list-style-type: none"> <li>a. Salary and benefits drawbacks</li> <li>b. Can not accumulate seniority</li> <li>c. Renewing contracts is dependent on productivity</li> <li>d. Untimely salary payments</li> <li>e. Short contract period (three months)</li> <li>f. Job insecurity</li> <li>g. Few benefits</li> <li>h. No medical insurance</li> <li>i. No update or continuing education courses</li> <li>j. Greater workload than those with permanent position</li> <li>k. Can combine this job with other activities</li> <li>l. Opportunity for employment</li> </ul>
Disadvantageous or very disadvantageous	<ul style="list-style-type: none"> <li>a. Fewer rights than permanent personnel</li> <li>b. Can not accumulate seniority</li> <li>c. Short contract period</li> <li>d. Salary and benefits drawback</li> <li>e. Greater workload than those with permanent position</li> <li>f. Job insecurity</li> <li>g. Undefined job activities</li> </ul>

	h. No social security benefits i. Untimely salary payments
Advantageous or very advantageous	a. Productivity payments b. Recent provision of health insurance c. Ability to work in their community d. Opportunity for employment

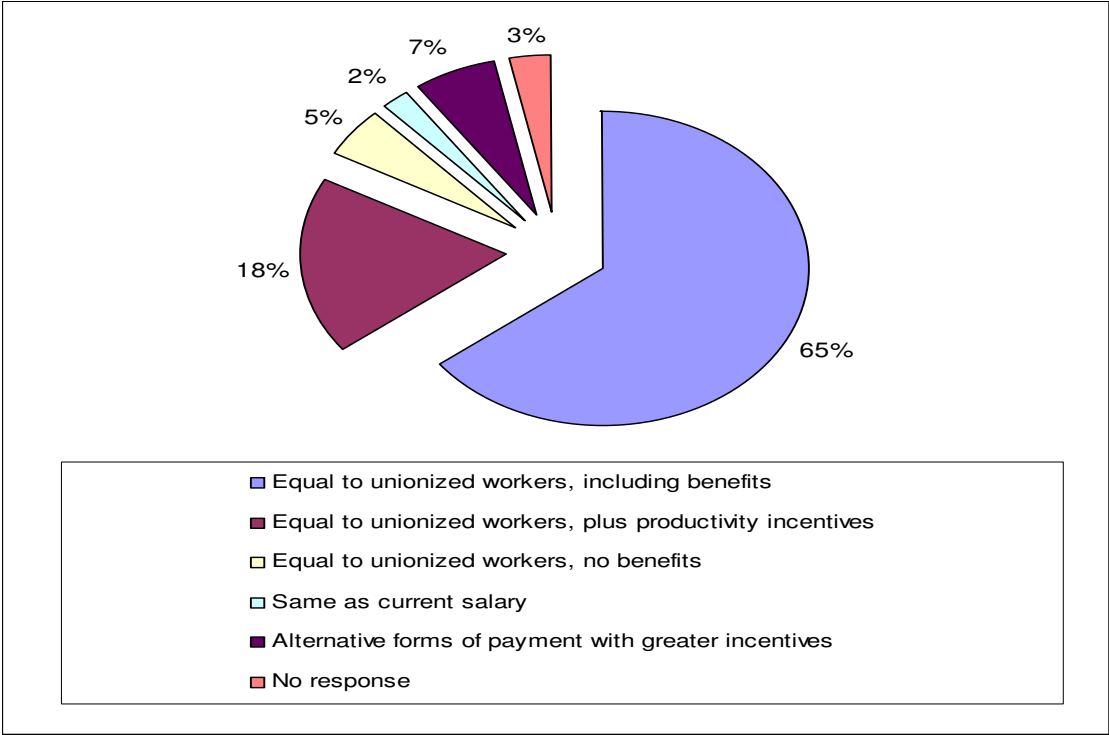
Source: Authors, using data from the health services providers' questionnaire. Research project on public private interactions in the Mexican health sector.

**Table 5. Basic health unit personnel preferences regarding contracts**

Preference of health unit personnel regarding contracts	% Basic health unit personnel			
	Total	Physicians	Nurses	Others
Maintain indefinitely	17	21	22	13
Maintain until find other job	1		4	
Obtain a permanent position with the state Health Secretary	67	70	55	77
Obtain a permanent position in another public institution	2		4	3
Work independently, in profession	1	3		
Other	2	3	4	
Don't know; no response	10	3	11	7
Total	100	100	100	100

Source: Authors, using data from the health services providers' questionnaire. Research project on public private interactions in the Mexican health sector.

**Figure 2: Basic health unit personnel payment preferences**



Source: Author, using data from the health services providers' questionnaire. Research project on public private interactions in the Mexican health sector.

**Figure 1. Characteristics of Jalisco State (circa 2005)**

	Mexico	Jalisco
GNP per capita (US dollars)	8,010 (2006)*	5,515* (2004)
% population covered by social security	49,523,389 (45.6 % of Mexican population (2006)**	3,464,189 (50.6% of Jalisco population) (2006)****
Physicians per 1,000 inhabitants	1.3 (2004)	1.3 (2004)
Health expenditure as % of GNP	2.9 (2006)***	3.1 (2006)***
Population	104,859,992 (2006)*	6,843,503 (2006)****

\* Source: Elaborated by E'dycsa with INEGI data. National Accounts System of Mexico. 2006 and Bank of Mexico. <http://www.mexicoenestadisticas.com.mx/oportec/Pib2.xls>

\* Source: <http://www.seijal.gob.mx/difusion/seijal.pdf>. Jalisco State Information System, based on data taken from INEGI.

\*\* Source: <http://sinais.salud.gob.mx/poblacion/2008>

\*\*\* Source: Salud México 2001-2005. Statistical Annex 1.12 (p. 182)

\*\*\*\* Source: National Population Council, August 2006. Historic series based on demographic estimates of the XII General Population and Housing Census 2000 and the II Population and Housing Count 2005. <http://www.mexicoenestadisticas.com.mx/oportec/pob2.xls>

**Figure 2. Budget and expenditures for the purchase of health services, 2002 and 2004 (in US Dollars)**

<b>Year</b>	<b>2002</b>	<b>2004</b>
Total budget	\$ 650,000	\$ 1'200,000
Total expenditure, by year	\$ 673,790	\$ 1'359,130
1. Basic Health Units	\$ 590.618	\$ 1'233,900
2. Hospitals	\$ 83,171	\$ 82,000

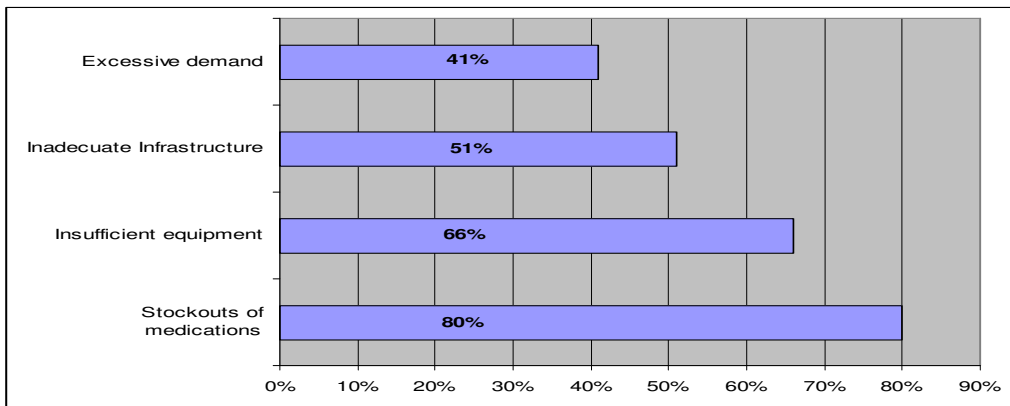
Source: Authors, using data provided by Jalisco Health Services.

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Advantageous or very advantageous	<ul style="list-style-type: none"> <li>a. Productivity payments</li> <li>b. Recent provision of health insurance</li> <li>c. Ability to work in their community</li> <li>d. Opportunity for employment</li> </ul>

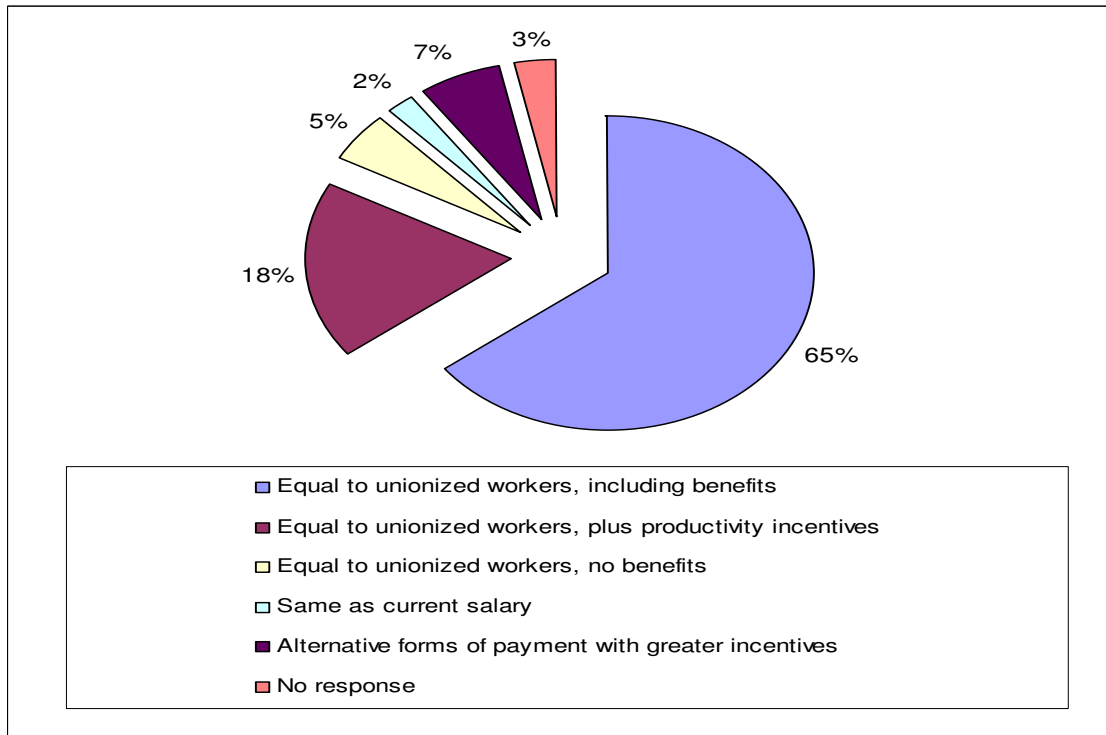
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Other	2	3	4	
Don't know; no response	10	3	11	7
Total	100	100	100	100

Source: Authors, using data from the health services providers' questionnaire. Research project on public private interactions in the Mexican health sector.

**Figure 7: Basic health unit personnel payment preferences**



Source: Author, using data from the health services providers' questionnaire. Research project on public private interactions in the Mexican health sector.

**Additional files provided with this submission:**

Additional file 1: cover letter rrhh final.doc, 44K

<http://www.human-resources-health.com/imedia/1847043391257116/supp1.doc>