The COVID-19 pandemic has demonstrated that unilateral approaches and narrow understandings of the dynamics of cross-border security fall short of securing the lives and wellbeing of citizens: disease, drugs, and guns are threats that all cross borders. The Biden and López Obrador administrations understand the value of policies that address harm to all of society and especially the most vulnerable and will have a unique opportunity to reset and reconfigure bilateral security understandings.

Current security cooperation is framed by the fourteen-year-old Mérida Initiative. Since its reformulation in 2014, the program deepened and broadened its goals under the principle of “shared responsibility.” The inefficacy of repressive and kingpin-focused policies has been exacerbated by legal changes in Mexico that limit international cooperation. There are ongoing concerns regarding high-level corruption, underscored by the arrest and then release of General Salvador Cienfuegos. And intelligence exchange and inter-agency coordination are constrained by a lack of mutually accepted policies, constraining effective response to security threats which have largely been defined by drugs and guns, ignoring the great threats posed by disease.

The current pandemic has brought to the fore the differential impact that insecurity has on different sectors of society based on gender, race, ethnicity, age, and class, on both sides of the border. It has also highlighted the need to include the public health perspective when thinking about security issues including the acknowledgement that crime and violence has a human cost in terms of life expectancy, mental health, physical harm, and the erosion of community ties. The next four years offer the opportunity to reconfigure security policies to incorporate public health in a way that will address the major causes of mortality in both countries.

**KEY TAKEAWAYS**

- Create a bilateral coordinating group to align priorities for both nations with a joint U.S.-Mexico taskforce on fentanyl disruption and bilateral units for monitoring piracy of medical supplies high priorities.
- Maintain or increase funding for USAID programs supporting grassroots citizen-led efforts in areas affected by chronic violence.
- Incorporate evidence-based and life-saving public health interventions as solutions to some public safety problems such as applying a harm reduction approach with drug users on both sides of the border. Use WHO guidelines for addressing homicides as a health crisis.
- Improve health data collection and sharing capabilities in Mexico, developing record keeping systems similar to those used by the CDC which include police reports, medical examiner files, and hospital charts that enable standardized data exchange with appropriate privacy protections.
- Reactivate binational mechanisms for public health coordination.
- Develop federal, state, and local programs on both sides of the border that address structural and social drivers of harm and mainstream gender in their design, with an emphasis on interventions that address root causes including poverty and marginalization.