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THE RESEARCH SUBPROGRAM WITHIN THE ACTIVITIES OF PASCCAP

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COMMUNITY HEALTH TRAINING PROGRAM OF CENTRAL AMERICA AND PANAMA
(PASCCAP)

THE RESEARCH SUBPROGRAM WITHIN THE ACTIVITIES OF PASCCAP(*)

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1. THE PROGRAM

Background and Justification

There are presently 75 million of persons without health services in the Americas Region. To remedy this situation, the Ministers of Health of the Americas decided at their IV Meeting to carry out joint programs to extend the coverage of the health services to the most disadvantaged rural communities and the poorest quarters of the big cities. Primary health care strategies involving active community participations were to be used, the ultimate aim being that the entire population of the Americas should have access to health care.

Today, all the countries of Central America are carrying out programs to extend the coverage of the services, using various approaches that have reached different degrees of sophistication. In some cases the funding is derived almost entirely from national sources, while in others—the majority—the Inter-American Development Bank is the financing agency for the programs. PAHO/WHO is participating in all of them as technical agency.

The countries of the Central American isthmus have set as one of their primary aims the extending of the coverage and improving of the quality of their health services, recognizing that the most important requirement for achieving this goal is the availability of sufficient human resources of the quality required. Manpower training is included in the goals of the Ten-Years Health Plan for the Americas approved in 1972 at the Meeting of Ministers of Health held in Santiago, Chile.

At the XXIV Meeting of the PAHO Directing Council held in Mexico City in 1976, the Government of Costa Rica submitted a proposal for a Pan-American Center for Training in Community health, to be headquartered in that country. After considering this proposal, the Directing Council resolved (Resolution IX) among other things:

.........3. To accept the establishment of said Center and to authorize the Director to continue collaborating with the Government of Costa Rica with a view to:

a) Drawing up a detailed plan for said Center, which shall include its responsibilities, function, method of operation, cost and the benefits expected to be derived from it, an

b) Negotiating acceptable arrangements between the Center and the Organization.
At the beginning of 1979 the United Nations Development Programme agreed to provide financial support to the Project, leading to the establishment, in an initial stage, of a Community Health Training Program for Central America and Panama, with the following financing:

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Input of the Governments</td>
<td>US$1,240,000</td>
</tr>
<tr>
<td>UNDP input</td>
<td>US$ 400,000</td>
</tr>
<tr>
<td>PAHO/WHO inputs</td>
<td>US$ 452,000</td>
</tr>
</tbody>
</table>

The program commenced operation on March 20, 1979, in San José.

**Purposes**

1. **General**

   To set up a Community Health Training Program that will cooperate in the training of the human resources needed for the programs to extend the coverage of primary health care, with active community participation. The Ten-Year Health Plan for the Americas approved at the 1972 Meeting of Ministers of Health includes this program as a basic strategy.

2. **Specific**

   2.1. To increase the countries' manpower training capacity and to speed the training process, with the aim of achieving the main goal—health service coverage of the entire population by the year 2,000.

   2.2. To equip the personnel already trained to meet the new requirements, to rationalize their utilization and increase the possibility of retaining them.

   2.3. To promote socio-epidemiologic research as a basis for devising service methods and human resources structures that will make the activities referred to in the programs for extending coverage genuinely possible.

   2.4. To specify what is wanted in the way of "community participation" and to seek models and strategies for the detection training and better utilization of community volunteer personnel.

**Organization**

The program began its activities by organizing a Coordinating Unit based in San José, and promoting the formation, in each of the Central American countries, of National Units, responsibility for the local coordination of which was assigned to the human resource offices of the Health Ministries.
Central American working groups were also formed, made up of persons with first-hand experience of the problems and difficulties involved in the extending of coverage, basically in three fundamental areas:

1. Development of health services
2. Educational development
3. Research.

The San José group further assumed responsibility for defining work areas, on the basis both of the purposes and goals of the basic document and of the needs and aspirations of the countries visited for the purpose, in the light of the resources available in the Coordinating Unit in San José and in the countries themselves.

This led to the following areas being defined, with the components as set forth below on the right:

<table>
<thead>
<tr>
<th>1. Research</th>
<th>I-01 Research on and Development of Health Services</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>-Operational research.</td>
</tr>
<tr>
<td></td>
<td>Design alternative models on the basis of the</td>
</tr>
<tr>
<td></td>
<td>findings of the research.</td>
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<tr>
<td>I-02 Educational</td>
<td>-Research on education.</td>
</tr>
<tr>
<td>Development</td>
<td>Development of education technology. Models of</td>
</tr>
<tr>
<td></td>
<td>instruction-care integration. Training and</td>
</tr>
<tr>
<td></td>
<td>utilization of personnel. Direct training of</td>
</tr>
<tr>
<td></td>
<td>instructors for extension of coverage.</td>
</tr>
<tr>
<td>I-03 Social and</td>
<td>-Research on forms of community participation</td>
</tr>
<tr>
<td>Epidemiologic Research</td>
<td>in health. Epidemiologic research.</td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td>2. Educational</td>
<td>D-01 Continuing Education and Training in</td>
</tr>
<tr>
<td>Development</td>
<td>Supervision</td>
</tr>
<tr>
<td></td>
<td>-Educational Development.</td>
</tr>
<tr>
<td></td>
<td>Development of supervision systems. Training of</td>
</tr>
<tr>
<td></td>
<td>personnel in supervision. Research on education</td>
</tr>
<tr>
<td></td>
<td>for adults. Identification of basic education</td>
</tr>
<tr>
<td></td>
<td>needs of health personnel. Permanent training of</td>
</tr>
<tr>
<td></td>
<td>personnel.</td>
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<tr>
<td>D-02</td>
<td>Training in Administration appropriate for extension of coverage</td>
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<tr>
<td>------</td>
<td>---------------------------------------------------------------</td>
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<tr>
<td>D-03</td>
<td>Research on and Development of Middle-level Technical Personnel</td>
</tr>
<tr>
<td>D-04</td>
<td>Planning of Human Resources for Extension of Coverage</td>
</tr>
</tbody>
</table>

**3. Support Sectors**

<table>
<thead>
<tr>
<th>S-01</th>
<th>Production of Education Material</th>
</tr>
</thead>
<tbody>
<tr>
<td>S-02</td>
<td>Information and Documentation Center</td>
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</tbody>
</table>

The research area forms the basic element from which it is hoped to generate the knowledge and experience that will make it possible to develop training programs that are best suited to the requirements of the plan for the extension of service coverage adopted by the countries.
In addition, the Program functions in accordance with a Model for Technical Cooperation between Developing Countries, which makes it possible for better use to be made, at subregional level, of certain resources and facilities that are more developed in some countries than in others. Work and/or demonstration areas have been identified in the different sanitary regions of various of the countries, with the intention that the experience acquired in them, as regards aspects such as community participation and primary care models, be made available to and, if appropriate, be used by the others.

The second part of the presentation related specifically to the Research Subprogram, currently already under way.

2. THE RESEARCH SUBPROGRAM

1. Introduction

A prerequisite for the programs to expand coverage is better understanding of the health problems of each country and their communities, together with better knowledge of the health services and of the human resources of the health sector.

It is PASCCAP's view that research applied to the coverage expansion processes constitutes the basis for enabling the countries:

(a) to obtain a better understanding of their problems
(b) to be able to evaluate the programs carried out
(c) to reformulate their health plans.

In accordance with this view of the importance of applying research as a tool in the coverage expansion programs, PASCCAP has set up a research subprogram, the aims of which are as follows:

General Purpose

To promote, at the level of the countries, research applied to the coverage expansion processes, with the emphasis on the primary care strategy and focusing on two fundamental aims:

1. To serve as a learning process for better understanding of the true nature of the particular country's health problems, of the services provided and of the human resources available to the health sector.

2. To have the results of the research form the basis for reformulation of the health plans.

Specific Purposes

- To advise and assist each in the performance of applied research.
- To coordinate the comparative research carried out in the region.
- To train service and teaching staff in the most efficient utilization of the scientific method.
- To promote, in the countries and at regional level, the analysis, interpretation and discussion of the findings of the research in order that full and appropriate use may be made of them.

- To carry out research applied to the coverage expansion processes with the accent on the primary care strategy.

- To support the other PASCCAP subprograms through participation in research and the provision of information that will serve as a basis for the performance of their activities.

- To encourage and further research into teaching activities and the management of the health services in each individual country.

2. **Activities Carried Out to Stimulate Research Applied to the Coverage Expansion Processes in the Countries**

To begin with, the coordinators of the national units of each country were asked to select and form a research group made up of persons directly or indirectly connected with the programs to expand coverage.

Next, by means of a visit to the countries by two PASCCAP advisers the research groups were helped to identify certain problems connected with the programs each country was carrying out to expand the coverage of its health services and which would be suitable topics for research. Some criteria that could be used to identify the priority topics were also discussed.

Subsequently, PASCCAP developed a workshop on research methodology designed to introduce the basic concepts of the scientific method. In the course of this workshop the national research groups used the preparation of an initial research project as a learning tool, a procedure which, besides providing motivation for overcoming the obstacles in their path, facilitated inclusion of the theoretical aspects of the scientific method.

The preparation of the projects was not carried through to the same degree of completion in each case, owing to the particular difficulties involved in each topic and the individual and group characteristics of those taking part.

Each national group will draw up the final version of its projects and request the financing needed. For these activities and throughout the research process the countries will have PASCCAP's support, which will also be provided for the publicizing of the results obtained.

The research process begun as described will have another activity peak in August, when the second workshop will be held in Panama; this will include the fundamental techniques for descriptive study and the analytic techniques to be applied to the findings of the research.

A summary by country is given below of each of the research projects started during the first workshop.
EL SALVADOR

The subject selected is investigation of the system of patient referrals between the institutions and/or individual health service staff in a department of the country, through study of the care during pregnancy, childbirth and the postnatal period and its relation to the social position of the woman, the degree of risk during pregnancy and the geographic accessibility of the institutions and/or individuals providing health services.

The purposes of the study are:

- To ascertain by whom, how and where the mother is referred for care during the pre-peri and postnatal period.

- To ascertain whether there is any difference in the referral procedure used for women with normal pregnancies and those at risk.

- To verify the effectiveness of the referral to the formal system for care during the pre-peri and postnatal period.

- To identify certain socio-economic characteristics of the mothers who utilize the formal and informal health services systems, respectively.

Starting from a representative sample of the homes in a department of the country, the study proposes to identify the households in which there was a woman who gave birth to a child in 1979. It will then seek to ascertain certain socio-economic characteristics of those women, the pre-, peri- and postnatal care they received and how they were referred to an institution, health worker or other source of assistance.

GUATEMALA

The study is designed to investigate the factors associated with the low utilization of the health services.

The purpose of the study is to "contribute toward the goal of extending the coverage of the health services of the Sacatepequez Area", through better understanding of the community and of the factors that bear on the low demand.

The aims are:

- To ascertain the behavior of the population of the area upon perceiving a health need.

- To identify certain factors connected with the persons which influence the utilization of the health services once a health need is perceived.

- To pinpoint certain factors concerning the services which, as perceived by the local population, affect their behavior once they are aware that there is a health need.

The study will be based on a sample of the dwellings in the area, will be of the descriptive type and will take the family as observation unit.
HONDURAS

The purpose of this country's project is to study the "performance of nursing auxiliaries at primary level.

The aims of the study are as follows:

General purpose

To identify certain factors which determine the unsatisfactory performance of rural nursing auxiliaries in primary health care.

Specific Goals

1. To identify critical areas in the performance of the rural nursing auxiliary, as regards:

   - The people's expectations
   - The health service's expectations.

2. To identify how the rural nursing auxiliary perceives the expectations of the population and of the health service, with regard to her performance.

3. To identify factors that determine the differences between the desired and the actual performance of the rural nursing in primary health care.

The Honduran research group was unable to complete the design of the study during the workshop.

NICARAGUA

The Nicaraguan study proposes to:

"Determine the real demand of the population of the study in order, in the light of the human resources currently available, to program the better utilization of those resources and also the training of new resources that will make it possible to achieve the goal of satisfying the population's demand for service".

Its purposes are:

(a) To determine the demand for health services in accordance with the characteristics of the population groups of the study area (geographic concentration, structure, demography, education, work, income level, basic services, sanitation conditions, environmental pollution) and the degree of the development of the bodies representing the people.

(b) To determine the manner in which the population groups are meeting their health requirements.
It will be a descriptive study using as observation units the families, the work centers and the grassroots organizations of the North region of Nicaragua.

COSTA RICA

The purpose of the project is to study the referral system within the coverage extension process, focusing on the system of pre-, peri- and postnatal care and care of the newborn.

The goals of the study are as follows:

General purpose

To make a qualitative and quantitative evaluation of the system of referrals and counter-referrals under the coverage extension program in comparative areas of Costa Rica.

Specific Goals

(1) To establish quantitatively the proportion of cases referred from the community level to health posts and centers and to regional hospitals through the follow up of pregnancies, births and postnatal care and checkups of newborns during the year previous to the date of the study and for each type of personnel.

(2) To establish the proportion of counter-referrals in the above levels by type of personnel.

(3) To evaluate qualitatively at all levels the characteristics of the referrals produced, by type of personnel, with regard to:

- their justification
- their appropriateness
- their reception and processing at the higher level.

(4) To identify certain socio-economic and cultural factors connected with the families and also their ease of access to the hospital services of the Caja Costarricense de Seguro Social, which might be determining for acceptance, access to the services and performance of the referrals.

(5) To analyze the conduct of the health assistant in relation to certain factors that might influence his diligence in promoting referral to services.

This descriptive study of a process will use as observation units:

- women who have given birth in the year preceding the start of the study;
- all children born in that year, from birth up to age one month;
- the rural and community health assistants and the nursing auxiliaries
- the records at all levels of care (health posts, health centers, regional hospitals and specialized hospitals).

In selecting the areas to be studied it was considered that, as the study would not cover the entire country, samples could be taken from two areas: one where only the community health program was functioning, and one where both the rural and the community health programs were operating. Two different areas were taken because if the study had been limited to one only, this would have provided a fragmented and incomplete picture of the characteristics of the referral system.

The areas selected were Hatillo, which has a health center and 21 health areas served by as many community health assistants, and the canton of Ciudad Colón with a health center, a community health area and two rural health areas.

PANAMA

The study is intended to evaluate the impact of a training-(supervision) support program for community health personnel in three areas of the country.

The purposes and goals of the study are as follows:

Purposes

1. To standardize a system of supervision for health assistants by means of a health technical team.

2. To standardize the activities of the health assistants, setting goals and objectives in each of the communities served, on the basis of their needs.

3. To devise evaluation techniques for the health assistants, with a view to making such adjustments and corrections as are required (training-type support).

4. To improve the quality of the information regarding the health status of the community.

Aims

1. To detect the impact that the new system of supervision and training support has on the routine activities performed by the health assistants.

2. To detect changes of attitude that occur at the level of the health technical team and the health assistants, and in the communities where the new system is applied.
3. To improve the quality of the information regarding the health status of the community.

The study will be of the experimental type, the intention being to compare, in three areas of the country, a community where the new system of supervision and support is applied with another in which it is not.

In each of the three areas, the communities to be compared must be broadly similar (as regards health activities, human resources, location, population, production, etc), and differ solely in that the new system will be applied in one of them but not in the other.

3. THE REGIONAL RESEARCH PROJECT

The aim of extending the coverage of the health services, with as its main strategies primary care, community participation and regionalization of the services, has been interpreted in differing ways in the different countries.

The interpretation given by each government is related to the particular country's program of coverage extension, its purposes, goals and manner of implementing this program. This means that analysis of the documents prepared by each government regarding its programs enables one to identify the chief concepts involved in those programs and also the relationships between those concepts, i.e. the conceptual and theoretic framework of the country's coverage extension program, as interpreted and implemented by the country at the time of drafting the document under study.

This conceptual and theoretical framework of the countries' coverage extension programs is not always explicitly stated and consequently the concepts are often not clearly identified by all the personnel working in the programs.

By their very nature and as a result of their main strategied, the coverage extension programs affect all the levels of the countries' health systems in one way or another and in varying degrees. Accordingly, if the health personnel and the communities know what the key concepts behind their particular country's program are, they can function actively and purposefully in that program.

If all the health personnel and the communities involved are not aware of the concepts in question and how they tie in one with another, this can make it difficult for the health personnel to work efficiently and effectively with the authorities concerned while also making it impossible for the communities to participate consciously in all phases of the process, although this is a fundamental strategy component in the programs.
Being aware of the foregoing, PASCCAP proposes to initiate its regional research project with the following aims:

- To explain the main concepts involved in the coverage extension processes in accordance with the chief operating mode adopted by each country at the time in question.

- To explain the relationships between these concepts.

- To utilize a health problem recognized by all the countries as inherent in the extending of primary care, and in which the community participation component can be determined, as a "tracer" through the system in order to identify the impediments encountered by the countries in their efforts to extend to their entire populations the actions called for to solve that problem.

- To identify the discrepancies between the concepts as explained and the reality empirically observed.

This project should be carried out in three distinct phases:

(1) Explanation of the conceptual framework of coverage for the Central American countries.

(2) Study of the problems and difficulties encountered by the countries in bringing poliomyelitis vaccine to the entire population.

(3) Subsequent identifications of possible discrepancies between the programs and concepts adopted, on the one hand, and the difficulties found in putting them into practice, as brought out by the study referred to in (2), on the other.

For the first phase, the national research groups have already identified and obtained for PASCCAP certain of the basic documents.