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HEALTH SERVICES RESEARCH IN COLOMBIA

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HEALTH SERVICE RESEARCH IN COLOMBIA^{1/}

Health Service Research is a subject that regularly stirs debate over its conceptual framework, goals and objectives, implementation, scope, types and applications, and its very definition. In view of this, the present report is based on the WHO definition of health services research as "the systematic study of the means by which basic medical and related knowledge is applied to the health of individuals and communities in a given set of existing conditions". (Reports ACMR/HSR.2/79 p.5).

Health research in Colombia is divided into two main periods clearly separated by the "Study of Human Resources for Health and Medical Education", begun in 1964 as a joint effort of the health and education sectors. This study established the first point of reference for a number of parameters, notably: Identification of the country's most relevant problems at the time, and of measures of the utilization of services, in relation to the existing human, as well as material and financial, resources. Before the study was completed in 1968 the Colombian government realized the importance of research, for the rationalization of decision-making and approved the formation of a special group in the Ministry of Health.

In 1974 the national government established the Department of Research in the Ministry of Health to perform all those functions.

The establishment of a body to guide and regulate health research on the national level made it possible to decide on policies, goals and strategies, and to promote machinery for coordination and advisory services and the dissemination of research findings, and, perhaps more important, implied an acknowledgement of the utility and importance of research in a Health Ministry.

This experience, the first in Latin America, prompted other countries to move in the same direction, and Mexico and Cuba set up similar units in the structures of their health sectors.

Between 1950 and 1965 there were a number of developments in the training and service sectors that were to have a powerful impact on research.

The most basic of these developments was the beginning of a lasting concern to make progressive adjustments and changes in medical education in responses to the needs of the country and particularly to those of each community, which eventuated around 1960 in the establishment of the Departments of Preventive Medicine and the extension of combined teaching and care activities into the Government's health facilities, primarily the health centers.

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All these developments paved the way for the "Study on Human Resources for Health and Medical Education in Colombia", which sprang from a conviction that, despite appreciable progress in the use of a broad approach to health problems, a better basis was needed for diagnosis of the health and education situations so that firmer steps could be taken toward the solution of problems.

That study will not be described here. Suffice it to say that for the first time in a Latin American country a comprehensive vision was achieved of the diagnosis of a community and its dynamics (birth, death, and growth rates), of morbidities and the use of services to treat them, of medical, nursing and dental manpower and their training processes, of the institutional resources and their financial problems, of public expenditures for health, etc.

The panorama of health research in the country was changed. A fundamental reference point had been established which has had a definite impact on each of the major partners in this research.

The first national meeting on health research programs took place in Cartagena in April 1977. It was centered on seven projects, all characterized as studies of alternative models for the delivery of services. However, they were actually research programs that not only analyzed the information in order to identify the characteristics of each case, but went on to interpret the phenomena and propose solutions that could be implemented with the means on hand. In other words, they had passed beyond description to analysis, and the emphasis was now on research-for-action.

Perhaps the first specific study worth mentioning is the "Experimental Study of Health Services in Colombia" that set out to define the content and orientation of training programs for professional and auxiliary personnel best suited to implement the policy and plans in the health field. Hence the study sought to determine how to translate that health policy into a training curriculum and technical manuals, and how to evaluate those curricula and manuals in terms of that policy.

The immediate aim here was to determine the changes in the coverage of health services that might result from a combination of:

- a. The delegation of specific functions of professional to auxiliary personnel.
- b. The concomitant definition and development of the referral, inspection, and evaluation functions of the professional staff.

The study was conducted in three different areas of Colombia: At Cásquez, southeast of Bogota with a very scattered rural population; at

Carmen de Bolívar, on the Atlantic Coast, with a semi-rural population; at Restrepo, in a heavily agricultural and tradition-bound area north of Cali.

The study was conducted from 1968 to 1971 as a joint effort of the Ministry of Health and the Colombian Association of Medical Schools and with the sponsorship and cooperation of USAID and PAHO/WHO. It may be said to have been the first formal inquiry into health services based on good integration of teaching and care, and to have demonstrated the merits of delegating functions for the expansion of coverage based on a good patient referral structure. In Colombia, Del Valle University, which had been the forerunner in the development of community teaching programs in Colombia, and had taken the health sciences student out of the university hospital and put him in other less sophisticated medical facilities and in the countryside, drew on that pioneering experience to launch, in 1972, a model for the delivery of maternal and child care services known as PRIMOPS. The great merit of this model lies in that it has included the epidemiological risk approach since its inception, is based on the natural history of the disease and on the regionalized service scheme with a good patient-referral system, and has generated a methodology for health service research.

Thus, PRIMOPS includes operational methodologies developed for the care of mothers and of children under five, with emphasis on primary care and manpower training, and hence is geared to the delivery of health services with the aim of improving the level of health as a component of community well-being. The principles and strategies that provide the conceptual and operating framework for its delivery of health services have been defined by PRIMOPS on the basis of a study of the problem of maternal and child health, the experience obtained in a similar program in the town of Candelaria, analysis of the standards adopted by the national health system, and a review of the literature on the subject.

The impact of PRIMOPS has been very great, not only because of the success of the model itself, whose effectiveness has been demonstrated in serious evaluation, but in that it has prompted the adoption of similar principles, standards, and methodologies elsewhere in Colombia and abroad. A number of projects may be cited that were inspired by PRIMOPS. Suffice it to mention that the patient referral system of Cali was adopted following a careful analysis of what could be accomplished at each level of medical care, done with care and professionalism by the team of clinicians in each of the specialties.

The Program of Research in Simplified Surgery (SICSIM) should also be cited as fundamental to this determination. The purposes of this program are to make surgical care more productive and less expensive by making more use of the resources, whose availability is a determinant of coverage; to enable it to respond to the demand for it promptly while maintaining and improving its quality; to shorten the hospital stay by

having post-operative care provided in the home; and to increase the productivity of the operating room by having two or more surgical operations performed in it simultaneously.

The Center for Multidisciplinary Development Research (CIMDER) best exemplifies the transition from the health sector to total community development. Obviously, the transition has been from one single government agency to the intersectoral coordination of many agencies. From the health standpoint this has involved the experience of finding methodologies for the rural area, where appropriate instruments are available to deal with these problems, such as the master file, with which a system of records can be implemented for the health care provided by the rural health worker. This group is concerned with well-being, and that was the origin of the methodological difficulties in defining that community well-being in an operational way.

The "Study of the Use of the Ambulatory Services in Cali" (USAC) should be well noted. for the first time in Colombia it determined the morbidity that had to be treated at every level of care, and thereby provided a basis for the changes made in the utilization of the services of the Del Valle University Hospital and the health centers in Cali in implementation of the national policy on regionalization and levels of care.

There is a long list of projects that have been or are being carried out in Colombia. Again the inventory of research projects kept by the Ministry (INRIS) answers the question of what else is being done.

Colombia's experience in health research has been good. Proof of this is the many groups already in the universities, the health services, and the government agencies, all of whom with ever less independence and more organization are addressing the problem of providing more and better health. Perhaps most important of all is the close relationship that has developed between the education sector (the Ministry of Education) and the care sector (the Ministry of Health), which has been of important benefit to both sectors.