

## **Revista Eletrônica de Comunicação, Informação & Inovação em Saúde**

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Technological advance

## Toward a methodology for the study of good practices in international health cooperation

DOI: 10.3395/reciis.v4i1.356en

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### Abstract

In 2008, the Office of the Pan American Health Organization's (PAHO) in Brazil, also PAHO's American Regional Office (AMRO), began to plan a methodology for the study of good practices in its international cooperation in the country. A team of consultants was hired to help with this plan. It is a pioneer initiative considering the fact that PAHO is a specialized regional organization and, as a natural consequence, its studies have traditionally dealt with health-related matters. And despite a history of important initiatives of dialogue with international relations specialists from the early 1990s, PAHO does not possess systematized methodologies that allow it to review and improve its international cooperation practices on a regular basis. This article's objective is to report the process of constructing this methodology, as well as to present it as it has been conceived up to the present moment. Considerations prior to its construction are presented, followed by a bibliographical review of good practices and international cooperation. The core of the text presents the proposed methodology for the study. Finally, next steps for the actual implementation of the methodology are indicated.

### Keywords

international cooperation; good practices in international health care cooperation; methodology; Pan American Health Organization

The Brazilian Office of the Pan American Health Organization (PAHO) decided, in 2008, to begin constructing a methodology for the study of good practices in its international cooperation in the country. The decision was guided by the awareness of international cooperation's growing role in health care in the contemporary world, as well as the organization's constant interest in reviewing and improving its international cooperation practices.

A team of consultants, the authors of this article, was hired to help with constructing this methodology. PAHO chose the consulting team members for their academic background in international relations and psychology (more specifically, organizational management), as the study's intention was to focus exclusively on international cooperation and, more specifically, on aspects of its management within the organization.

It is a pioneer initiative because, due to PAHO's speciality, its studies traditionally deal with health-related matters

but, despite a history of important dialogue initiatives in international relations since the early 1990s, PAHO does not possess systematized methodologies that allow it to review and improve its international cooperation practices.

Thus, this article's objective is to report the process of constructing this methodology, as well as to present it as it is conceived today. For this purpose, the article is divided into four parts. In the first part, considerations prior to the construction of this methodology are reported. In the second part, the results of a bibliographical review that sought in the literature definitions of good practices, international cooperation and, combining the two, good practices in international cooperation. It is worth highlighting that it is based on this bibliographical review that an operational definition for each of these terms and expressions is proposed, so as to plan an adequate methodology. In the third part, the methodology proposed for identifying good practices in international cooperation is proposed. Finally, the last part discusses what is expected from its application.

## Considerations prior to the methodology construction process

The consulting team's first consideration in the methodology construction process was about the good international relations practices accumulated by PAHO. The absence of a methodology for identifying these practices does not mean the Organization does not have, or does not know about, such good practices. After all, the Organization's more than 100 years of history have certainly given it an institutional practice supported by a solid accumulation and application of knowledge in various types of initiatives. Thus, the methodology proposed here aims to demonstrate good practices already in use by the Organization, in the hope that the institution may make good use of this rich accumulation of knowledge.

The second consideration refers to PAHO's role in the diverse initiatives for cooperation with the Brazilian government. Considering the Pan American Sanitary Bureau's official view, which is that the institution will be the *great catalyzing agent to make sure that all inhabitants of the Americas enjoy excellent health and to contribute to the well-being of their families and communities* (PAN AMERICAN SANITARY BUREAU, 2009, p.1), it was understood that the methodology would not try to equate the role of PAHO with the role of the Brazilian government in a given initiative or set of initiatives. On the contrary, it was assumed from the start that the lead role in the initiatives belonged and would always belong to the Brazilian government, with PAHO being a catalyzing agency for these initiatives.

The third consideration deals with PAHO's focus on good practices in international cooperation. It must be remembered that this is not a study focused on health care. It is a study of international cooperation in health care, with an innovative focus on the management of international cooperation and its results for the human resources, organizations and institutions involved. However, there is no focus on the impacts of health care cooperation actions on the populations benefited by them. Obviously, health care questions should and will be described as part of the study's context, but they will not be the central object of this analysis.

Finally, the planning and proposal of the methodology here presented are supported by a pioneer study about PAHO's good practices in international cooperation, carried out with the Brazilian government in the National Vaccination Campaign for the Elimination of Rubella in Brazil, in 2008. The initiative of identifying the parameters of the Organization's good practices in international cooperation in this campaign

revealed a series of conceptual and methodological traps that the methodology here presented attempts to overcome.

## Good practices in international cooperation: a bibliographical review

Definitions of good or best practices are rare, both in the various publications by international agencies and organisms and in the academic literature (BEAUMONT, 2005; PIRES DE CAMPOS, 2008). A survey carried out on the websites of the main organisms and bilateral and multilateral agencies identified scarce and isolated initiatives for the analysis of good practices in international cooperation, done without adequate conceptual support, such as a WHO initiative launched in 1999, in partnership with USAID, known as Implementing Best Practices (IBP). Restricted to the field of reproductive health, the expression "best practices", within this initiative, is partially defined as:

*...a range of tools based on evidence, materials and practices, including directives, norms, standards, experiences and abilities, among others, which have proved their value in the field of reproductive health* (WHO, 1999, p.2).

The World Health Organization's Regional Office for Africa published, in 2008, a Guide for the Documentation and Sharing of "Best Practices" in Health Care Programs. In this guide, the term "Best Practice" is defined as "a technique or methodology which, through experience and investigations, has a proven reliability to lead to a given result" (p.2). The document states that, within health care programs and services, a more instrumental definition for "Best Practices" would be "knowledge about what works in specific situations and contexts, without immoderate use of resources to reach the desired results and that can be used to develop and implement solutions for similar health care problems in other situations or contexts" (p.2).

WHO News (2006) contributed to the discussion by presenting reports from three WHO experts about their experiences and notions of good practices in the coordination of programs supported by the institution in different parts of the world. Although they did not find an operational definition of good practices, the experts found some directives based on their experiences.

- Focus on adequate technologies for developing countries.
- Begin with pilot activities performed well and then expand.
- Ensure the engagement of partners so that they appropriate the programs.

- Validate and use scientific evidence as a base for health care policies.
- Establish strong mechanisms for vigilance, performance monitoring and effective planning.
- Define partnerships well so as to strengthen complementary forces.
- Empower health care workers (providers) and educate parents (clients).
- Prepare all programmatic tools before implementation.
- Optimize the presentation of positive results in order to continue the program's advocacy.

In a broader search, within the scope of the United Nations, clear definitions of good practices in international cooperation were also not found. The United Nations Food and Agriculture Organization (FAO, 2009, p.1), for example, defines good practices as *any collection of specific methods that produce results which are in harmony with the values and proponents of those practices*.

### Definitions of good practices

In the attempt to find a clearer and more precise definition of "good practices", it is important to analyze the everyday use of the term "practice". According to the Merriam-Webster online dictionary, the word "practice" has several definitions.

1. Actual performance or application.
2. A repeated or customary action.
3. The form, manner, and order of conducting legal suits and prosecutions.
4. Systematic exercise for proficiency: *practice makes perfect*.
5. The condition of being proficient through systematic exercise: *get in practice*.
6. The continuous exercise of a profession.
7. A professional business, *especially*: one constituting an incorporeal property.

When we analyze the term "practice", we can see it has a continuous character, as it refers to a repeated performance or a systematic exercise of a given action. The term "good practices" is also found in the literature as being a synonym of "best practices".

In the academic literature there are few definitions available, with most of them coming from knowledge fields other than administration, such as information technology and software engineering, among others. Table 1 presents the good practices definitions identified by Beaumont (2005).

Wagner et al. (2006), in a study about good or best

practices, point out the paradox evident in the widespread use of the term "best practices" among organizations of the most diverse natures, especially in the area of software engineering, with no well-structured investigation of these practices. Thus, the expression normally refers to a broad variety of phenomena. In this study, the authors seek to contextualize the term "good practice" based on examples of its use (Table 2).

Wagner et al. (2006) state that "good practice" refers to a variety of phenomena. While some use the term "good practices" to refer to models and designs that lead to projects or protocols for optimizing technical, procedural and organizational structures, others use the same term to refer to the promotion of a risk management perspective for legal and regulatory submission. Therefore, there are multiple interpretations of the term and there is the risk of adopting a "good" or "best" practice without listening to all those involved in the process.

The field work developed by Wagner et al. (2006) was designed to follow actions that were discussed during interviews. After exploratory interviews were conducted with the most successful project and its team, the researcher transcribed each interview and analyzed the content to identify the key players and actors linked to controversial questions involved in the project. The data showed multiple interpretations of the same events, as well as the formation of alliances and negotiations. After that, the researcher met with the individuals mentioned in the transcribed exploratory interviews. Put together, the data helped the researchers with new perspectives and a diagram of power relations in the workplace. Finally, when there was a reference to technical components such as, for example, a "good practice" proposal, the researcher interviewed the person who represented a given interest.

Loo (2000) carried out a study in order to examine "good practices" in Canadian organizations with project management. The research was performed with questionnaires based on a critical review of the literature of "good practices" in management and qualitative interviews which aimed to identify "good practices" in the organizations. In this study, the author defined "good practices" as optimal performance paths in the work process to reach high performance. According to Loo (2000), a key element for the emergence of good practices is the existence of competencies, which are seen as a set of knowledge and skills to reach given results.

Rocha de Paula and Cianconi (2007) performed research that aimed to map the knowledge management initiatives found on Fiocruz portal websites, in order to identify the

Table 1 – Good practices definitions

| Authorship              | Definition   | Approach   |
|-------------------------|--|--|
| AMC (1994)              | Good practice is the cooperative path where employees are in charge of business activities throughout the process: leadership, planning, clients, suppliers, community relations, production and supply of products and services, and use of benchmarking. These practices, when effectively inter-linked, can lead to sustainable results that are far superior in quality and in client service, flexibility, opportunity, innovation, price and competitiveness | Foco em efeitos, tautologicamente assumindo a garantia de que a implementação de boas práticas necessariamente trará melhoria sobre o desempenho |
| Camp (1989)             | Good practice will lead to a company's superior performance  |  |
| Heibeler et al., (1988) | Good practice is the best path for business performance  |  |
| Voss (1995)             | Good practices are seen as a strategic paradigm, a fact which has become prominent in production strategy.   | Foco em boas práticas visando a estratégia da organização  |
| Golovin (1996)          | Good Practice is a tool to ensure client satisfaction  | Foco em boas práticas que assegurem a satisfação do cliente  |

Source: Beaumont (2005, p.1292-3).

Table 2 – Use of the term good practices

| Good practices refer to                         | Good practices are displayed in   | Primary user group        |
|---|---|---------------------------|
| Reference models                                | Protocols<br>Projects<br>Optimized structures                                     | Planners/suppliers        |
| Guide for risk management                       | Legal and regulatory submission<br>Standardized practice                          | Regulators                |
| Perceived level of service and safe performance | Tested/demonstrated report<br>State of the art<br>Effective/modernized experience | Consumers                 |
| Identification of competitive market conditions | Desired objective<br><i>Benchmarking</i>  | Product/service providers |

Source: Wagner et al. (2006, p. 254).

resources and the “best practices”, that is, the identification and dissemination of successful cases. In this study, the researchers defined “best practices” as a procedure validated for the performance of a task or the solution of a problem. This validated procedure includes the context where it can be applied and the practices are documented via a database, manual or directives.

Dinur et al. (2009) report that “best practices” are not merely subsets of organizational knowledge, but rather subsets which demonstrate the importance of organizational knowledge for the company’s success.

According to Visitask (2009, p.1) good practice should be understood as a superior method or an innovative practice that contributes to the organization’s improved performance, which is usually recognized as “better” by other organizations. This implies the accumulation and application of knowledge about what works and does not work in different situations and contexts, including lessons learned and the continuous process of learning, feedback, reflection and analysis.

In face of the diversity of definitions found in the literature for the term “good practices”, it was decided to create a definition for a methodology under construction. Thus, good PAHO practices are here understood as those procedures which are systematically exercised, involve goal-oriented decisions and actions, are the fruit of accumulated experience, are defined based on the judgment and interpretations of the multiple actors involved in the process and lead to a positive repercussion in the project’s results.

As this study’s analysis of good practices refers to a context of international cooperation in health care, it is also necessary to define the expression international cooperation.

### Definitions of international cooperation

According to the Getúlio Vargas Foundation (1986), cooperation *denotes common action that aims to meet goals shared by all interested parties, whether organizational or distributive* (p.341). Therefore, cooperative action presupposes a partnership, where all interested parties may attain results through interaction.

It can be seen that the idea of “group work” is included in the concept of cooperation. Thus, cooperation is close to the group work, or work group, concept, which can be considered to be *a set of two or more people who, to reach given objectives, need some kind of interaction, over a relatively long period of time, without which it would be more difficult or impossible to obtain the desired success* (ALBUQUERQUE & PUENTE-PALACIOS, 2004).

Although the term cooperation is explicitly considered a

basic social relation in the sociology field, its interpretation can generate great confusion because of its polysemy, a consequence of its broad and random adoption by actors in the international system, each one defining it based on an internal balance between their own interests, global expectations and existing political discourse.

The term international, for its turn, derives etymologically from two Latin terms, *inter* and *nation-onis*, which mean “between nations”. Thus, international cooperation, in its most basic form, refers to joint action, where commonly-agreed results are obtained, with actors representing two or more countries in the form of international organisms, states or organizations.

The term international cooperation, for its turn, has been considered in the literature from various points of view and in diverse contexts. The theme is sometimes seen as a new form of action by states and international organisms and other times as a strategic alternative for reaching so-called development. In any case, there seems to be a consensus among authors who deal with the subject that the definition of international cooperation is both recent and conflicted.

The Brazilian Cooperation Agency (ABC, 2009) defines international technical cooperation as an important development tool, which helps a country to promote structural changes in its productive systems as a way of overcoming restrictions that stifle its natural growth. According to this agency’s website, international cooperation programs *allow the transfer of knowledge, success experiences and sophisticated equipment, thus contributing to qualify human resources and strengthen institutions in the receptor country, allowing it to make a qualitative leap of a lasting character* (p.1).

Within the health sector, the Oswaldo Cruz Foundation (Fiocruz), part of Brazil’s Ministry of Health, defines technical cooperation on its website as *“the exchange of experiences and knowledge, research support, technological development and human resources qualification”* (FIOCRUZ, 2009); for the National Sanitary Vigilance Agency (Anvisa), part of the same ministry, international cooperation is a *mechanism through which a country or an institution promotes the interchange of successful experiences and technical, scientific, technological and cultural knowledge, through the implementation of programs and projects with other countries or international organisms* (ANVISA, 2009).

It must be stressed that these definitions emphasize the instrumental and practical character of international cooperation, encompassing the idea of “cooperation for development” and suggesting positive consequences for

its implementation. According to the ABC (2009), technical cooperation projects in Brazil *have been producing benefits in important sectors such as transportation, energy, mining, the environment, agriculture, education and health, allowing more solid institutions to be built, which are capable of performing their functions on a level of excellence.*

The Pan American Health Organization (PAHO, 2009, p.3) highlights that:

*Technicians and scientists from several countries in the world are linked to PAHO. They are the ones who transfer technology and disseminate the knowledge accumulated via experiences produced in PAHO member states. PAHO cooperates, through these technicians and scientists, with governments in order to improve health care policies and public services, stimulating group work with countries, to reach common goals such as multilateral sanitary initiatives, according to the decisions of governments which are part of the organization's direction.*

Ramos (2006), despite considering international cooperation to be beneficial, points out that this phenomena is generally described as rare or even nonexistent in the reality of international politics. Based on the propositions of Keohane (1984), this author considers international cooperation to be a political coordination process, through which actors adjust their behavior and sector policies to the real or expected preferences of other actors. This definition clarifies that, as it is a process, international cooperation is not an end in itself and presupposes the existence of interests shared among actors, as well as the presence of an active political connection effort.

Complementing this argument, Amorim (1994), states that one of the first presuppositions of international cooperation is the idea of "otherness" or "alterity", or one state's respect for the existence of other states, which can and must decide upon their own objectives.

Many sectors have benefited from international cooperation for overcoming obstacles, such as the presence of gaps in knowledge and technology, lack of resources, among others. However, Amorim (1994), points out the fact that cooperation will only really bear fruit when there is real complementarity of interests among the parties. Besides, cooperative activities generally involve different levels of investment for each "partner" and different levels of return (MCPHEE & WHITE, 2007).

Amorim (1994) also states that, for there to be cooperation, countries must first possess their own (endogenous) scientific and technological base, because to appeal to cooperation as

the exclusive or main source of development is to consign oneself to dependency and submission.

It is in this perspective that Almeida et al. (2009) define international South-South cooperation in health care, more recently developed by Fiocruz in African and Latin American countries as a form of "capacity development", breaking with the traditional model of passive and unidirectional transference of knowledge and technologies and proposing the exploration of the endogenous and potential capacities existing in every country. For this purpose, the idea is to integrate human resources (individuals) development with the development of organizations and institutions, forming partnerships between the two countries.

The concept of international cooperation as a practice of strengthening partnerships in order to attain results through interaction between parties is often linked to the search for development, whether this is social, scientific or technological. Practices or modes of cooperation have been described in the specialized literature from this point of view.

Fischer (1998), quoted by Ramos (2006), defines four types of cooperation, each requiring different levels of political commitment.

- The exchange of information, to facilitate political coordination.
- Negotiation of specific agreements.
- Establishment of a set of rules that will guide and restrict political choices.
- Abdication of policy instruments in favor of forming a common policy, generally inserted in a political community.

In the scientific field, McPhee and White (2007), discuss some forms of international cooperation such as, for example, agreements for the exchange of formal data, joint tactical and strategic planning and construction of international teams with total data sharing, among others.

Matos (2001) states that many international agencies have begun to value the sharing of ideas, based on the argument that cooperation efficacy results more from political counseling than from loans or donations. This way, one of the most visible forms of sharing is the preparation and dissemination of documents.

In this study, international cooperation is considered to be continuous process of political, technical and administrative coordination and connection between two or more actors from distinct nationalities and institutions, involving: (i) the transference or interchange of technologies under development, or which have already been applied and

assessed as effective by their institutions of origin; (ii) the donation or sharing of financial resources for programs and projects of a distinct nature and in distinct sectors; (iii) the definition, adjustment and alignment of sector policies about a given issue that is in the common interest, with a view to solving common challenges in economic and social development. Thus, a definition of international cooperation that tries to cover the concept's breadth and complexity was adopted.

### Good practices in international cooperation: an operational definition

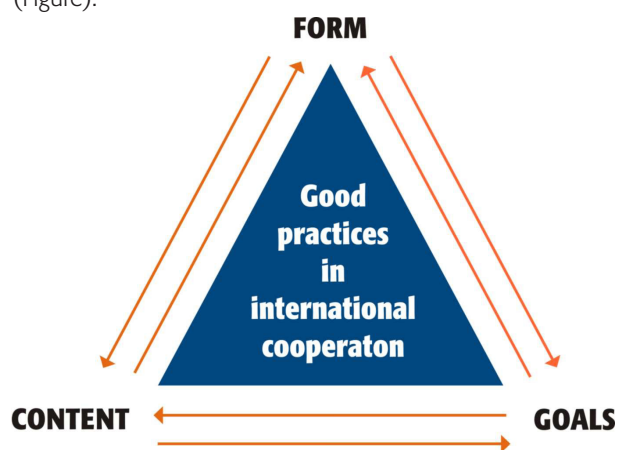
How to define, then, the combination of both, that is, good practices in international cooperation, the central concern of this study?

Despite the definitions proposed for each of these key words, it is understood that an operational definition of good practices in international cooperation cannot be constructed on a mere textual combination of these two definitions. There is an implicit redundancy in the idea of good practices in international cooperation, as the very notion of international cooperation is strongly linked to good practices. After all, cooperation exists in a context of exchanging technologies that have been proved useful, or connections without which two or more actors cannot meet their desired objectives, or efforts for the alignment of sector policies based on standards which all actors accept and desire. In any of these cases, good practice is implicit in the international cooperation process and there is an expectation that this good practice be shared or taken on by all those involved.

Therefore, it is understood that the definition of international cooperation proposed in this study, based on the bibliographical review, mirrors a process where the notion of good practices is firmly rooted. On the other hand, it is also true that merely stating this inseparability is not enough to respond to the challenge put forward in this study; that of identifying good practices in international cooperation. In other words, to conceive of international cooperation as a synonym of good practices leads to nothing for this study's purposes, as it makes it impossible to identify good practices in international cooperation with greater clarity and consistency.

In this line of reasoning and for the purposes of this work, the proposal is to define good practices in international cooperation around three basic constitutive dimensions: (i) content, (ii) objectives and (iii) strategies. By *content* we understand the objects of international cooperation, which can be identified with the question "what?", that is, they refer to technologies, knowledge, sector policies, joint research or

other products or processes that international cooperation deals with. By *objectives* we understand the purposes of international cooperation, which can be identified with the question "what for?", that is, the explicit objectives officially pointed out by the parties involved, independently of other implicit objectives. Finally, by *strategies* we understand the "how?", that is, the behaviors, attitudes and action strategies adopted by the people involved in the daily international cooperation process in relation to others who also take part in it. Thus, good practices in international cooperation are made up of these three dimensions, which interact dynamically (Figure).



**Figure** - Conception of the three dimensions of good practice in international cooperation: content, objectives, strategies.

Source: Authors' own creation.

Thus, whether good practices in international cooperation occur or not will be determined by judging whether the countless actions in international cooperation processes are best, good, average or bad, based on how they fit into the parameters placed by each of the three dimensions: content, objective and strategy.

An additional consideration is the importance of each dimension in relation to the others. We will assume the strategy dimension to be the one which most determines good practices. This assumption comes from the consideration that content and objectives, in an international cooperation process, are latitudinal events, that is, they take place at isolated moments of the process. On the other hand, the strategies adopted so that content and objectives take over the course of the international cooperation process extend over time, taking on a more longitudinal perspective and, consequently, a more important role in this process. Thus, the decision to place it at the top of the Figure.



Basically, the assumption is that good practices in international cooperation depend less on their content and objectives and more on the strategy in which they are carried out. That does not mean, however, that the strategy dimension is prioritized to the detriment of the other two dimensions. The three dimensions will be considered and assessed in this study. What changes is the weight given to the three dimensions. While the strategy dimension will have a greater weight than the other two, for the reasons given above, the others will have equal weight. The weight given to each dimension will be defined when this study's data is analyzed.

In a pioneering study about PAHO good practices in international cooperation, in the biggest vaccination campaign ever held in the world to that day, Pires de Campos (2009) proposes a set of 12 (twelve) parameters for good practices in international cooperation in health care (Table 3).

Without taking away the merit of the significant advance these parameters represent, it can be seen, from the model proposed in this study (Figure), that this set of parameters refers more to PAHO's international cooperation in health care objectives than to its content and strategy. Thus, this study has advanced in relation to the previous one, as it proposes more elaborate definitions and analytical structures to analyze an admittedly complex reality. The strategy dimension, therefore, will be valued and prioritized in this work's exploration of good practices in international cooperation.

## The proposed methodology

The methodology will focus on two main objectives: (i) identification of the actions/activities/procedures carried out in cooperation projects and (ii) classification of these actions/activities/procedures based on the parameters for good practices in international cooperation. It will involve the analysis of documents produced by the projects, the performance of semi-structured interviews, the application of questionnaires and analysis by "judges"/specialists. Therefore, it will be performed in four stages:

- a) survey, description and revalidation of the parameters for good practices in international cooperation based on the international literature and the parameters constructed in the study of German measles;
- b) detailed description and categorization of the actions/activities/procedures carried out in the cooperation projects;
- c) crossing the actions/activities/procedures carried out in the cooperation projects with the parameters for classification of good practices;
- d) comparison, in qualitative and quantitative terms, of the ranking by specialists and by the actors of international cooperation projects with the definition of rates of best practices, good practices, average practices and bad practices, based on the assessment of the practice's reach and importance.

Table 3 - Parameters for PAHO good practices in international cooperation

|                     |   |
|---------------------|---|
| <b>PARAMETER 1</b>  | Ensure political support for actions on the national level, based on their credibility and legitimacy       |
| <b>PARAMETER 2</b>  | Transfer technologies and disseminate useful knowledge adapted to local realities                           |
| <b>PARAMETER 3</b>  | Provide technical-scientific advice to advance the Americas' health care agenda                             |
| <b>PARAMETER 4</b>  | Ensure multi-sector and integral focuses in health care interventions                                       |
| <b>PARAMETER 5</b>  | Ensure equity in health care interventions  |
| <b>PARAMETER 6</b>  | Seek the support of other international sources to raise new health care resources                          |
| <b>PARAMETER 7</b>  | Establish intra-sector and inter-sector links and connections in the country                                |
| <b>PARAMETER 8</b>  | Provide human resource qualification in strategic areas   |
| <b>PARAMETER 9</b>  | Provide administrative-financial support for the acquisition of needed good and services in reasonable time |
| <b>PARAMETER 10</b> | Act as a neutral space for intergovernmental negotiations and connections                                   |
| <b>PARAMETER 11</b> | Ensure that lessons learned are incorporated in new processes supported by the organization                 |
| <b>PARAMETER 12</b> | Support the dissemination of successful member state experiences to the whole world                         |

Source: Pires de Campos (2009, p.21)

Each of these stages will involve different participants and materials, according to the following description.

*First stage – improvement of the criteria or parameters for good practices in international cooperation*

For the German measles study, twelve parameters were created to describe the final objectives that international cooperation actions/practices/procedures must meet. These parameters were derived from the literature and from the indication of actors in international cooperation projects. This research project will refine the definition of these criteria on the basis of the international specialized literature, as well as improving the operationalization of these parameters. Apart from this refined definition, the parameters will be analyzed by specialists in international cooperation for additions and/or alterations.

*Second stage – minute description of the projects (survey of actions, activities, procedures or events) and construction of analysis categories*

All identification of good practices involves a broad set of interested parties, or stakeholders, directly or indirectly involved in the project. The initial interviews will be performed with all the project's stakeholders (considered key informers). The key informers will be identified using two basic strategies: indication and nomination of stakeholders by PAHO project coordinators and survey of project actors, through the projects' own documents. This procedure aims to select the greatest possible number of stakeholders for initial interviews.

To minutely describe all the actions performed in the projects, semi-structured interviews will be performed with the actors/stakeholders involved in the project and identified through the strategy previously adopted. These interviews will aim to:

- describe the stages (actions/activities/procedures) that made up the project;
- chronologically describe these actions;
- describe the social actors, their roles and their importance in the project;
- rank the actions/activities/events/decisions/procedures in order of importance, according to the importance identified from the speeches;
- relate the actions/activities/events/decisions/procedures involved in the project with the actors' intentions when performing these actions and identify what previous knowledge supported the decisions taken and the actions involved.

These interviews will use the terms actions/activities/procedures/decisions, without the researcher inducing the content of possible practices which may be differentiated from everyday, isolated decisions and actions, and without inducing the interviewee to an idea of what the expression good practices may denote.

By relating the actions and decisions that occur in the project to the intentions that motivate these decisions and actions and to the knowledge behind them, we are seeking to differentiate between isolated actions and cooperation practices that stem from a knowledge-construction process.

These semi-structured interviews can be performed more than once with the same program actor in order to further explore the topics. When performed more than once, the subsequent interviews aim to deepen or clarify aspects that were not assessed or covered in the previous interview.

To identify and describe the possible practices, there will also be an analysis of documents produced in international cooperation projects. These documents will be analyzed with the aim of:

- describing the stages (actions/activities/procedures) that made up the projects;
- chronologically describing these actions;
- describing the social actors, their roles and their importance in the project on the basis of document content;
- ranking the actions/activities/procedures in order of importance. This order of importance will be decided according to how often the event/action is mentioned in the documents;
- relating the actions/events/decisions and procedures involved in the project with the actors' intentions in performing these actions and identifying what prior knowledge supported these decisions and the actions involved.

The documents and verbalizations of the semi-structured interviews will be analyzed using content analysis software, such as Alceste and Evoc. This software constructs synthesis-categories based on verbalizations or written content. These categories are ranked according to their importance and frequency in the context of the verbalizations and written material.

Once the synthesis-categories have been created, it will be possible to identify actions/activities/procedures performed in the projects, as well as the actors responsible for them, their roles and importance in the project's context. These

categories will also be analyzed by separating the aspects of form, content and objectives in international cooperation.

These categories will serve as a base for constructing questionnaires that will allow the practices performed in the projects to be classified as good or best practices in international cooperation, which will be the main investigation tool in the study's third stage.

*Third stage – Crossing the categories created for describing the projects with the parameters for good practices and comparing the assessment of different key-informers and specialists*

As mentioned above, after the survey of the actions/activities/procedures performed in the context of international cooperation projects, these will be analyzed using the parameters for defining good practices. This analysis will allow them to be classified according to categories. This classification will be done through questionnaires created beforehand on the basis of categories obtained by analyzing the content of the documents and interviews. This crossing between parameters and project actions/procedures will be performed both by specialists (a set of ten specialists in international cooperation in the health care area) and by project actors (key informers, the number of which will be defined in each project, according to its specificity).

Each project actor and each external specialist will receive a questionnaire with a description of the actions/activities/procedures performed within the scope of the project. These actors' role will be to assess each action category according to how much each parameter was met and how important or applicable the parameter is for assessing that particular action category. Each action/procedure/activity/decision, grouped into categories, will be assessed in terms of how it meets the parameters, which translate into final objectives of the practices in terms of degree of importance for the project's good results. This assessment will be performed using a score that will make it possible to rank the opinion of the different assessors.

There will be a quantitative comparison between the data obtained in the ranking done by the specialists and the project actors. This assessment will allow the construction of a best practices and good practices index, based on the quantitative crossing of the degree of meeting objectives and the importance of the practice. This comparison will also make it possible to assess to what extent a socially-constructed practice is equally judged, or not, by different interest groups within the scope of international cooperation.

*Fourth stage – Construction of good practices indexes: comparison, in qualitative and quantitative terms, of the ranking performed by specialists and by project actors and establishment of a good practices and best practices index*

Best, good, average and bad practices will be separated according to how each action meets the parameters and the importance of each action or decision for the project's results. How the parameter is met establishes the link between the action/decision taken and its repercussion in the project results. Each practice identified should meet at least five parameters in total.

This ranking will be performed on the basis of a score to be constructed, which will be the product of the degree of meeting the parameter and the degree of importance. This score will allow the most important practices to be differentiated from those which best met the parameters. The differentiation between the best and good practices will be done by creating intervals that will classify the practices into good and best practices.

Each project will be analyzed separately, in terms of its actions/decisions, aiming to identify the good and best practices specific to its reality. The comparison between the characteristic practices of each project will also allow common aspects and successful practices in different international cooperation contexts to be identified.

## Next steps

the methodology for studying good practices in international health cooperation for PAHO, proposed in this article, is pioneering and will be applied specifically in studies about health international cooperation initiatives that involve the organization in Brazil.

It is hoped that the proposed methodology will be tested through its application, as the benefits and problems found, its limits and perspectives, as well as suggestions for its future improvement or reinvention will be of great use in this process.

Another intention is that, with the result of the studies performed using this methodology, it will be possible to establish some good practices parameters which, besides reflecting how the objectives of cooperation between the Brazilian government and PAHO are being met, in specific projects in the health care area, can also be transformed into procedures, actions, activities and decisions that define the strategy\_this international cooperation is taking and indicate how it can be improved.

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