Résumé

Recherche concertée internationale comme relation sociale : un exemple canado-éthiopien

Amy Bender, Sepali Guruge, Fekadu Aga, Damen Hailemariam, Ilene Hyman, Melesse Tamiru

Une collaboration internationale en soins infirmiers et dans les autres disciplines de la santé s’avère indispensable pour remédier aux problèmes de santé mondiaux. Alors que les résultats et les processus produits par de telles collaborations font l’objet de rapports, peu de publications se sont intéressées à leurs fondements philosophiques ou théoriques, particulièrement en ce qui concerne la collaboration entre les pays pauvres et riches. La notion de Piaget qui concerne les relations sociales régies par la coopération et la contrainte, et la notion du « monde de la vie » de Habermas ont permis de jeter un regard théorique sur la collaboration internationale en vue d’en faire l’étude en tant que construction de la connaissance. Cet article analyse ces idées comme en témoigne l’expérience collective de Canadiens et d’Éthiopiens lors de l’organisation d’un forum interdisciplinaire portant sur la violence exercée par un partenaire intime en Éthiopie. Le projet est présenté comme une étude de cas en vue de réfléchir sur la collaboration internationale en tant que manifestation des relations sociales. Une nouvelle vision de la collaboration internationale pourrait s’avérer utile à l’amélioration des processus concertés et de leurs résultats.
International collaboration in nursing and other health disciplines is vital for addressing global health issues. While the results and processes of such collaborations have been reported, few publications have addressed their philosophical or theoretical underpinnings, particularly with respect to collaboration between those in low- and high-income countries. Piaget’s notion of social relations of cooperation and constraint and Habermas’s notion of “lifeworld” provide a theoretical lens through which to examine international collaboration as a construction of knowledge. This article is an exploration of these ideas as seen in the collective experience of Canadians and Ethiopians organizing an interdisciplinary forum on intimate partner violence in Ethiopia. The project is presented as a case study for reflecting on international collaboration as a manifestation of social relations. Such re-visioning of international collaboration may be useful for improving collaborative processes and their outcomes.

Keywords: collaborative research methods, domestic violence and women’s health, international nursing, philosophy/theory

Introduction

In our current globalized world, international collaboration is vital for research on global health. According to Jairath (2007), nursing research involving interdisciplinary teams across countries holds potential for advancing the global health-care agenda. There is a growing body of literature on international collaboration in nursing and other disciplines such as public health, and, specifically, between low- and high-income countries, spanning a range of research topics and projects. However, few publications explicate the philosophical or theoretical underpinnings of such collaborations. It is imperative that we pay attention to the collaborative process itself, because working across geographical distances, cultures, and academic and health-care systems involves complexities that are often not present in projects within the same country. These complexities are magnified in international work that crosses under-resourced and resource-rich settings around the world. As global health research initiatives between low- and high-income countries continue to evolve, a
deeper awareness of the collaborative process serves to ensure that practice is reflective and ethical and that international collaborations are in fact collaborative.

This article is an exploration of the authors’ shared experiences of international collaboration in organizing an interdisciplinary forum on intimate partner violence (IPV) in Ethiopia in November 2009. Our purpose is to present the project, with its rewards and challenges, as a case study for reflecting on international collaboration at its roots, as a manifestation of social relations. Theoretically, the article draws on the work of Psaltis (2007), which brings together Piaget’s notion of social relations of cooperation and constraint and Habermas’s notion of “lifeworld” in seeing collaboration as a construction of knowledge.

To begin, we provide background on international research collaborations and an outline of the theoretical perspective taken. After a brief description of the IPV-Ethiopia project, examples from its planning, implementation, and outcomes are discussed through the lens of social relations of cooperation (the lifeworld of team members) and social relations of constraint (the system’s external influences on that lifeworld). We hope that thinking about international collaboration in this way will inform similar collaborations across countries.

**The Benefits and Challenges of International Collaboration**

The recent increase in international collaborations in nursing and other health-related research, education, and practice is considered to be an inherently positive development. Suhonen, Saarikoski, and Leino-Kilpi (2009) argue that international cross-cultural comparative research is a useful tool for advancing nursing knowledge and furthering nursing interventions in global terms. They suggest that international collaboration benefits both the practice of science and social processes. The concepts identified as most relevant for understanding the context of international collaboration are globalization, internationalization, and cultural diversity (see Allen & Ogilvie, 2004; Bagshaw, Lepp, & Zorn, 2007; Callister, 2006; Freshwater, Sherwood, & Drury, 2006; McAuliffe & Cohen, 2005; Ogden & Porter, 2000).

The challenges of international research collaborations in general and how to manage them are well described in the literature. For nursing research these challenges include geographical distance (involving time zones, travel, communication); cultural and linguistic differences; and assumptions about day-to-day functioning (infrastructure issues, communication, Internet access, workloads) (Freshwater et al., 2006). Foremost among these challenges are differences in available resources and access to funding (funding source, requirements/protocols).
In addition to the challenges, the literature addressing international research collaboration has focused on the underlying social forces and the strategies or ingredients necessary for successful collaboration. For example, Bammer (2008) details a framework to address four key management challenges in research collaborations: deciding on what the collaboration includes, managing the differences that can destroy partnerships, accommodating the forces that may distort the collaboration’s outcomes, and engaging supports while preserving autonomy. In describing the process of their collaboration, Bagshaw et al. (2007) call attention to the notion of team and teamwork as a solution to the practical concern of managing conflicts. In their description of the four “effective strategies” of team-building in international collaborative work, Bagshaw et al. emphasize explicit acknowledgement of diversities in the team, a reflexive stance on the part of individuals, and the development of trust.

The literature also describes benefits of collaborations outside of research. For example, Garner, Metcalfe, and Hallyburton (2009) cite the development of leadership skills and transcultural learning for students in international collaborations, leading to a concept model for international nursing education that emphasizes advocacy and ethical accountability extending to the global community. Similarly, Ogilvie, Allen, Lareya, and Opare (2003), using their Ghanian-Canadian master’s program in nursing as an example, present a theoretical perspective on one of the central aims of partnership, namely capacity-building. Specifically, they describe capacity-building in terms of capital — physical, human, organizational, social, and cultural. In highlighting human, social, and cultural capital, they point to the significance of establishing relationships, without minimizing the importance of physical and organizational capital — those material and structural conditions that make the project possible.

The literature alludes to the intrapersonal, interpersonal, and social dimensions of international collaborations as well as the centrality of good communication in establishing trust. Notably, while any collaborative project entails challenges, international work presents unique dilemmas and obstacles that can be avoided or minimized when reflexively examined both individually and as a team of collaborators. In the next sections, we describe and draw from a theoretical perspective offered by Psaltis (2007) and our own experience to highlight a way of understanding such reflexivity.

**Social Relations and the Lifeworld**

Psaltis (2007) draws on the work of Piaget (1965) and Habermas (1987) to suggest a relation of cooperation — or the more personal, relational aspects of collaboration — as the underpinning for tending to the struc-
tural-organizational realities of collaborating so that a relation of constraint does not become the dominant dynamic of the process. Well known for his theory of child development, Piaget believed that society is first “the sum of social relations between people” (Psaltis, 2007, p. 188). More specifically, as part of his interest in social psychology and morality, Piaget (1965) distinguishes social relations of cooperation and of constraint as aspects of moral development. In relations of cooperation, there is a “levelling up” of power (Piaget, 1965, p. 336). The power is evenly distributed among people so that a more symmetrical relationship results, and each person is free to express ideas, to defend those ideas, and to consider others’ points of view. By contrast, in social relations of constraint one person/group holds more power than the others, and the relationship tends to be asymmetrical (Psaltis, 2007). With the person who holds more power exercising a dominating influence in terms of beliefs, assumptions, and patterns of behaviour, the knowledge that is acquired by those in the less powerful positions tends to be fixed and inflexible. In contrast, the knowledge derived from relations of cooperation comes through more open forms of exchange and therefore can be more constructive, generative, and novel (Psaltis, 2007).

The philosopher Jürgen Habermas (1987) theorizes two distinct realms of social life or social action situations: those of the lifeworld and of the system. The lifeworld is that aspect of social life that is mediated by communicative action, while the system is orientated towards success, efficiency, and outcome and is mediated by strategic or instrumental action. “The lifeworld” is an adapted term representing the everyday world that people inhabit and share with others in immediate lived ways, “the informal unmarketized domains of social life” in which people experience and learn (Psaltis, 2007, p. 189). It is the space where everyday interactions are infused with cultural understandings and assumptions (Habermas, 1987). These ordinary, everyday interactions are constituted by such relations as family, friends, and close, familiar colleagues. Open dialogue is emphasized as the foundation of ideal social interaction, which parallels the notion of social relations of cooperation.

The notion of system, on the other hand, rests on the established patterns of instrumental action brought about by sedimented social structures, with money and power being the two critical subsystems (Habermas, 1987; Psaltis, 2007). The system represents a level of differentiation in the lifeworld that drives a “social intercourse that has largely been disconnected from norms and values,” institutionalized in society as “purposive, rational, economic and administrative action” (Habermas, 1987, p. 154). A kind of separate reality unto itself, the system imposes external constraints on people and on their communications and actions. Throughout his work, Habermas refers to this as “the colonization of the
Communicative interactions are diminished by colonization, as they are mediated by money and power; “colonization, then, leads to an erosion of ‘lifeworld resources’ relating to society, personality, and culture” (Edwards, 2008, p. 304). These effects on social relations may manifest in terms of a lack of shared meanings between people, erosion of social bonds, feelings of helplessness, reduced willingness to assume responsibility, or the destabilization of social order (Psaltis, 2007). However, colonization of the lifeworld can be prevented through social movements that are value-oriented (Habermas, 1987). This is possibly accomplished by questioning power structures and examining through open dialogue the constraining influences of money (or lack of it) as part of the system’s colonizing control over knowledge.

Psaltis (2007) argues that an international collaboration, given its particular structural issues of power and money, may appear to be promoting relations of constraint more than relations of cooperation, “thus colonizing the ideal of an unconstrained lifeworld of academic research” (p. 195). He identifies three considerations for assessing the quality of a collaboration as a process of knowledge construction. First, there is transdisciplinarity, or working across disciplines and theories, to create room for communicative action and coordination of various perspectives. Second, an emphasis on the heterogeneity of cultures, or the need to guard against the homogenization of culture, helps to prevent asymmetries of power and status; for example, team members may operate within a seemingly common culture of scientific method or the structure of professional meetings, but the notion of a common culture is a myth. Third, the funder-researcher relationship may be constrained by funding arrangements, and this manifestation of the system (in terms of money) could influence the project’s potential contribution to knowledge construction. Assessing these three points may indicate that international collaboration is a kind of social relation of cooperation in which constraints are accounted for and critically examined. In other words, when international collaboration begins in the lifeworld, the colonizing effects of the system are diminished from the start.

The IPV-Ethiopia Project

This Ethiopian-Canadian collaboration was formed out of mutual and complementary interests in Ethiopia and Canada regarding IPV as a global health research issue and as an education and practice issue for health professionals. The project was funded by the Canadian Institutes of Health Research (CIHR) and the team consisted of three Canadians
The purposes of the collaboration were as follows: to better understand the current situation of IPV in Ethiopia; to deepen the collective understanding of IPV in global health terms; to explore how Ethiopian health professionals incorporate such understandings into their practice as researchers, educators, and care providers; and to explore how a comprehensive program of research might be furthered in Ethiopia and internationally. The main components of the project were a literature review and two forums with Ethiopians working in the area of IPV. The literature review was vital for situating the forum discussions in terms of providing an account of existing knowledge on IPV in Ethiopia. The first forum was a 1-day interdisciplinary meeting and the second, held the following day, was a nursing-specific meeting. The meetings served to examine the issues associated with providing care to women experiencing IPV and generate ideas regarding key research priorities.

IPV has been defined as coercion; arbitrary deprivation of liberty; or threatened and/or actual physical, sexual, psychological, or verbal abuse by a spouse or non-marital partner (United Nations, 1993). It occurs in epidemic proportions comparable on a global scale to rates for cancer, cardiovascular diseases, and HIV/AIDS (Heise, Pitanguy, & Germain, 1994). There have been two landmark research contributions to our understanding of IPV in the Ethiopian context: a study of seven sub-Saharan African countries, including Ethiopia (ManjuRani & Diop-Sidibé, 2004); and the Multi-country Study on Women’s Health and Domestic Violence Against Women conducted by the World Health Organization (WHO) (2006). In the Ethiopian location of the WHO study, the percentages of women reporting IPV (either sexual or physical or both) were approximately 71% for lifetime and 54% for the preceding year. In this regard, Ethiopia ranked as having the highest prevalence among the 10 countries included in the study, and for lifetime physical violence alone it ranked second (Gizaw, 2002). Manjurani and Diop-Sidibé (2004) found that societal norms regarding gender roles and wife-beating tend to change with socio-economic development, increasing urbanization, and higher levels of education. They observe that the inter-generational perpetuation of patriarchal norms partially explains gender-based violence across the life cycle. A traditional patriarchal understanding of women’s roles as wives and mothers in particular also underlies the WHO findings identifying women’s most common reasons for not seeking help: violence seen as “normal,” fear of further violence or losing children, and bringing shame to family. For Ethiopian practitioners and scholars (including co-authors) engaged in health and social services for women, a collaborative effort is vital for addressing this complicated
picture of IPV and its far-reaching consequences for individuals, families, and society. Specific to research collaborations, changes in IPV rates need to be carefully examined in line with changes in sociocultural and economic patterns of populations in the country, to ensure that the issue is understood contextually.

Our collaboration began when the team came together in writing the proposal for CIHR funding. After receiving the funding, we set the agenda for our 10 months of work, hired two project assistants (PAs) (one Ethiopian and one Iranian immigrant living in Canada), agreed on our means of regular communication, and set timelines for the literature review and the forum planning and delivery. The literature review was primarily done by distance and was completed in Addis Ababa prior to the first forum. Forum planning was primarily accomplished across distance and involved a number of tasks, including the travel arrangements for Canadian members of the team. Carrying out the forums was a central part of working together, with Ethiopian team members assuming the leadership role. The forum evaluations and feedback followed, as did team debriefings. Lastly, we needed to decide about publications and future projects and write the final report to the funder. All the while, we got to know each other and grappled with challenges that tested our communication and cooperation skills.

The IPV-Ethiopia Project: Social Relations of Cooperation and Constraint

Psaltis (2007) states that researchers should aim “to promote relations of co-operation, mutual respect, and reciprocity” (p. 195) without fear of exploring conflicts as they arise interpersonally or ideologically in order to diminish the colonizing of the ideal of the academic research lifeworld. This description fits our intentions for the IPV-Ethiopia project, beginning with the fact that the power of the Canadians in the project could not be ignored and was acknowledged openly at the first teleconference meeting of the whole team. The most obvious evidence of this imbalance of power is that two Canadians (Guruge and Bender) were in the co-principal investigator positions, with one (Guruge) holding the funding and both being responsible for submitting the final report to the CIHR. Moreover, the project serves as a case example for exploring Psaltis’s three points regarding international collaborations: the transdisciplinary nature of the team and the project, continual recognition of the heterogeneity of cultures at work in the process, and acknowledgement of our relationship with the funder and the money and power issues that this engendered.
Transdisciplinarity

Our common interest was in IPV as a global health issue, yet this interest was informed by our collective disciplines of public health, nursing, sociology, medicine, and health economics. Furthermore, in the transdisciplinary sense, we assumed that violence against women needed to be understood across a range of theories and perspectives. This assumption carried through in the literature review, as we deliberately sought documents outside of “health” and published academic research. Transdisciplinarity was also reflected in our selection of whom to invite to the forums. One of our explicit objectives was to bring together several disciplines, and this was met, with representation at the forums from nursing, psychiatry, public health, sociology, law, gender studies, and grassroots women’s social service agencies. Comments made throughout the first forum indicated that those disciplines addressing IPV in Ethiopia were quite disconnected from one another, and notably that, as a health-care issue, IPV could be adequately addressed only with clear strategic direction involving work across sectors — the health, justice, and education systems being specifically identified.

The forum agenda was planned explicitly to cultivate transdisciplinary connections by building in time for participants to network with each other informally and through small-group work. By the end of the day, many had exchanged contact information so they could continue meeting with regard to identified research priorities. To support this networking, after the forum the Ethiopian PA compiled all presentations at the forum as well as notes from small-group discussions of research priorities and distributed these to participants.

A related point regarding the transdisciplinary nature of our project is that there were pre-existing relationships among team members that served to cultivate relations of cooperation. Professional connections, imbued with personal familiarity, were already well established between individuals in Canada and individuals in Ethiopia as well as among those within each country. Notably, trust and respect for one another in these pre-existing relationships formed a foundation for cooperation in the new relationships built around the project. As a group, we worked towards open forms of exchange, such as by having everyone provide input in e-mails and teleconferences that were part of the planning process. And with the trust and respect established within the team, new relationships formed outside of the team. For example, as a nursing professor the second author made new IPV research connections with Ethiopian researchers who attended the forum and agreed to provide thesis advice for PhD students. Our transdisciplinarity in this sense was an expression of social relations of cooperation between people and was
vital to the quality and outcomes of the project in terms of new learning about IPV, the synergistic development of ideas regarding key research priorities, and future work between those in Canada and those in Ethiopia. This implies that these relationships crossed not only disciplines but also cultures.

**Heterogeneity of Cultures**

The heterogeneity of cultures (Psaltis, 2007) was evident in several collaborative processes of the IPV-Ethiopia project. Even within our shared understandings of research, moments of learning sprang from our various communications across distance. For example, several months after receiving the funding, and with planning underway, the Ethiopian team members submitted the project proposal to the Addis Ababa University research board for approval, which surprised Canadian team members, who assumed that this would have already been addressed when CIHR funding was first granted. The forum planning was suspended until the research board informed us that holding a forum did not require its approval and the proposal was withdrawn. The forums, originally scheduled for September, were held in November as a result. Another example concerns the literature review. Canadian expectations regarding the timeline for writing the review clashed with the practical challenges of accessing documents from several Ethiopian organizations. It was only when the team met face-to-face in Addis Ababa that these difficulties were fully appreciated by the Canadians, since such barriers to accessing information are not typically experienced in Canada. Similarly, the dissemination of forum results, in the form of conference presentations and manuscripts, was discussed in Addis Ababa; though Canadians assumed that the Ethiopian PA who conducted the majority of the literature search would be invited as an author of a poster presentation, for the Ethiopian team members it was not common practice to include assistants as authors, and this required negotiation. In these examples, assumptions about the mythical homogeneity of academic research culture may have been operating. Each situation involved moments of ideological conflict with regard to conducting and disseminating research, and, as Psaltis points out, such conflicts need to be respectfully explored. Our collective acknowledgement of these assumptions was vital for recognizing that asymmetries of power and status may have been at work and that these could be corrected through open dialogue about our cultural differences.

**Relationship With Funder**

At various points in our collaboration we had to navigate the system with its realities of money and power that were part of the project.
Specifically, asymmetries of power had to be acknowledged in terms of the relationship of the project team and the funder. In short, we were implementing an Ethiopian-based project in Canadian funds from a funder that, understandably, expected the project to be relevant and beneficial for Canadians. For example, early in the timeline a money issue arose with respect to ensuring timely payment of our Ethiopian PA within the usual protocols of administering funds — a structural condition that, notably, did not affect payment of the Canadian PA. First, given our short timeline, an Addis Ababa University account for the PA was not arranged for direct university–university payment. Also, the Canadian university could not issue paycheques in Ethiopian currency. Then, during an attempt to send paycheques directly via courier, it was learned that courier companies cannot deliver to a post box address, the usual means of receiving mail in Ethiopia. In the deliberations about these challenges via Internet and telephone, the PA, understandably, grew concerned about ever being paid. In the end, after several months, it was decided that the cheques would be delivered in person when the Canadians arrived in Ethiopia for the forums, and the PA was able to cash them at a central bank in Addis Ababa that accepted Canadian currency. While we questioned the power structure of the Canadian university administering funds, we had to find a way to work within it. Grounded in a relation of cooperation, the team communicated regularly over time about this structural constraint in order to overcome it.

Finally, as Psaltis (2007) explains, the funder–researcher relationship may influence a project’s unique contribution to knowledge construction. Dissemination of our project’s outcomes, a form of knowledge construction, exemplifies the challenge of overcoming this structural constraint. While a condition of funding was to disseminate the outcomes of the forums in terms of implications for immigrant women in Canada, it was also important to share knowledge in Ethiopia and internationally. The project team met after the forums in Addis Ababa to discuss preparation of the manuscripts for publication. In an effort to equalize opportunities for authorship, it was agreed that the Canadian co-principal investigators would assume leadership for one manuscript each and the Ethiopian team members for two other manuscripts. It was further collectively decided to target journals, such as the *Canadian Journal of Nursing Research*, that provide space for Canadian and international nurse researchers to contribute knowledge from interdisciplinary cross-cultural perspectives. Publication itself can be fraught with challenges of access and equity, especially for authors in low-income countries whose first language is not English. Recognition of such challenges is the starting point for critical reflection and dialogue regarding one of the “colonizing” implications of international collaboration in general.
Conclusion

Countering the colonization of the lifeworld — striving to minimize the social relations of constraint — is possible only when attention has been duly paid to the lifeworld, where social relations of cooperation begin and flourish. This implicitly involves valuing diversity, recognizing that the development of trust takes time, and communicating openly and respectfully so that reciprocity and equitable distribution of workload and outcomes are ensured. When international collaboration is seen as a social relation of cooperation, critical ethical questions must be asked. For example, how do researchers in low-income countries safely name the asymmetries of power they experience in international collaborations without fear of reprisal or cuts to foreign funding? Where, how, and by whom are such situations discussed so as to resist the colonizing of the lifeworld of research and practice? These questions are particularly important for nurses, who tend to endure lower professional, social, and economic status the world over. The cross-country structural arrangements described here represent the relations of constraint that were undoubtedly part of our experience in this project. However, relationships between nursing colleagues in Canada and Ethiopia continue as a result of the project and we will carry on the search for funding and publication opportunities in areas of collective research interest. This experience has shown us that social relations of constraint are unavoidable in our globalized world. We also understand that social relations of cooperation are not only possible but necessary in nursing research collaborations, particularly when relatively few nurses in many parts of the world have access to the academic research arena. Social relations of cooperation is a perspective that shifts research away from exclusively outcome-driven initiatives and towards research that is also explicitly value-driven and reflexive. In this project we learned that the best international collaborations may be those that are understood within system realities but are approached first as social relations between people who respect and trust one another and openly question each other’s disciplinary and cultural perspectives and power, regardless of where the collaboration takes place.

References


Acknowledgements

This project was made possible by a Meetings, Planning, and Dissemination Grant from the Canadian Institutes of Health Research.

We gratefully acknowledge the valuable contributions and all the hard work of our project assistants, Andargachew Kassa and Khosro Refaie-Shirpak.

There are no known conflicts of interest.

Amy Bender, RN, PhD, is Assistant Professor, Lawrence S. Bloomberg Faculty of Nursing, University of Toronto, Ontario, Canada. Sepali Guruge, RN, PhD, is Associate Professor, Daphne Cockwell School of Nursing, Ryerson University, Toronto. Fekadu Aga, RN, MSc, is Assistant Lecturer, Centralized School of Nursing and Midwifery, Addis Ababa University, Ethiopia. Damen Hailemariam, PhD, is Professor, School of Public Health, Addis Ababa University. Ilene Hyman, PhD, is Assistant Professor, Dalla Lana School of Public Health, University of Toronto. Melesse Tamiru, MA, is Lecturer and a PhD candidate in Health Sciences, Addis Ababa University.