

COLLABORATION IN QUALITATIVE HEALTH RESEARCH IN LATIN AMERICA: ANOTHER UTOPIA?

The field of Qualitative Health Research (QHR) within Latin America has advanced substantially over recent decades. Evidence supporting this statement can be found in the publication of introductory texts, manuals and specialized texts on the designs, strategies and research techniques. Without forgetting the translation of classical texts of Anglo-speakers authors, holding regional conferences, and the publication of research results in the form of articles, books and reports. Analyzing the output generated during the past three decades is the sense of optimism for the achievements and progress made among the field.

Facing that scenario I cannot ask to myself another thing but about the collaboration between researchers and academics in the countries of the region in order to achieve the described results in this field. This matter is far from irrelevant considering the growing scientific and technological cooperation that occurs worldwide and not only favored by different factors but by the advantages. Suffice it to recall the advantages that have been listed as such collaboration, such as higher levels of citation of papers in international co-authorship, increased access to information resources, equipment and funding, as well as the advantages in given the training of researchers.

I am not aware of any work that has explored the scientific cooperation in this specific field in the region. Available information shows that historically Latin American scientists and academic institutions have established partnerships with the U.S. and Europe. For example, recent work on scientific collaboration of Brazilian researchers reported in the most cited shows that nearly 73% of the works have collaboration with American or European authors, but the figure is lower in terms of collaboration with Latin Americans. This little attention given to scientific cooperation with nearby neighbors in the same region catches the attention because Latin-American countries have signed more regional trade agreements than any other developing region, despite their closeness in historical terms, linguistic and cultural.

Facing the collaboration described in the field of research in general, re-appears once again the question, what concrete steps have been taken with regards the cooperation in the field of QHR among scholars of Latin America?

My impression is that there have been advances in this field in multiple areas; such as organizing conferences, publishing books and collections as well as in the development of theoretical works. For example; the exchange of ideas and experiences of researchers has been the pattern of Latin American Congress of Qualitative Health Research to reach its sixth celebration in Medellin in October 2014. On the other hand, we cannot minimize the role played by courses, workshops and graduates students, while most introductory rate has been increasingly more frequent those that aim to deepen certain theoretical and methodological issues. Another mechanism in which collaboration has been demonstrated is through academic institutions, since a growing number of researchers have conducted or offered many spaces to perform researches. Just to mention a few recognized centers that have led to such institutions are the Index Foundation, the Autonomous University of Barcelona, the University of Guadalajara and the University of São Paulo; those institutions have become landmarks in the field.

The advances exposed are undeniable however the question remains: what has been the specifically collaboration in research or in conducting qualitative studies on health in Latin American countries? I am not aware of studies that have explored this topic, not databases, repositories, or some other source that may help understand the nature and mode of experience in this field. Although the available information is scarce and scattered, I have knowledge of some isolated projects, researchers and/or institutions that have begun some collaboration on specific projects.

Another way to evaluate the scientific collaboration is through published works. In reviewing the 10 qualitative research works most cited in health and whose first author is ascribed to an institution in Brazil, Spain, Mexico and Portugal found significant differences in such collaboration. None of the most cited works with Brazilian authors was conducted in collaboration with academics from other country. Nonetheless the three most important works from Spain were made in collaboration with scholars from Brazil, Colombia

and Portugal, while other three Mexicans were also made collaboratively, but with four academics from the U.S. and one of Arabia, Argentina, Cuba, England, Norway, Sweden, Thailand and Uruguay. While two works of the Portuguese were in collaboration with academics from the UK.

Faced with such data, it seems urgent and necessary collaboration among Latin American scholars around the QHR. And that collaboration could enter a stage of development imagining the profits of such collaboration, but also identifying the challenges and obstacles that its implementation must produce. Among them it is worth to highlight the following:

First you should keep in mind the historical challenges. A question to consider is if there any justification for the regional cooperation, since historically the South have shown no "spontaneous" systematic and significant scientific interest of cooperation between them? Because the Southern researchers have offered limited financial intellectually and materials benefits to their Southern counterparts.

It should also important to remember that Southern researchers often prefer working with North, even though that collaboration becomes very often in dependence and subordination. Consequently, the relationships established between the researchers are not without conflict, for example, in relation to the ownership of information. To complicate the matter, we cannot go through something that the dominant model of globalization is not conducive to cooperation among countries of the South.

In this context, and facing an increased sensitivity against colonialism, collaboration in the field of qualitative research in the Latin American region could avoid past practices to the extent that it was able to adopt other paradigms, such as counter-hegemonic or postcolonial. Among other things, it could generate topics and research projects using dialogic models in which to investigate topics they were defined based on the interests and priorities of the various stakeholders.

Consequently, being nonexistent or emerging collaborative tradition in qualitative research in the region, are facing multiple challenges given the diversity of theoretical perspectives, the variety of forms of organization and evaluation systems research practice, the absence regulatory frameworks or support in the region, to which language barriers and distance between countries are added.

Faced with these challenges, I would not finish without expressing some proposals to advance the field. One would be to create systems of organization and retrieval of work at the regional level, such as repositories and databases. Another would boost research networks in embryonic regions or existing groups: for example, in the MERCOSUR, the group of 3, or the countries of the Pacific Rim. Another would be to identify common themes or issues from the local: such would be the processes of exclusion, resistance or equity policies and gender and its effects on the health-disease-care process.

Other strategies to consider as they have proven to be useful in other contexts would be starting the debate on issues such as cultural sensitivity, global ethics, professional standards and accountability. Not forgetting concerning the provision and use of appropriate technologies. The experiences of Brazilian, Spanish and Mexicans scholars could be very useful to advance the issue.

I want to end by mentioning other specific proposals as reciprocal visits to understand the context in which reviewers researchers work, the use of effective communication strategies and discuss issues such as: who produces knowledge, in what context and for whom it is produced. Issues such as the usefulness and knowledge transfer could enrich the qualitative research proposals in the area of health.

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