

## Middle Eastern Boundaries Crossed: The Organizational Legitimacy of International Research Partnerships

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### Abstract

There is a higher risk of increasing instability, guilt-related worries, and insufficient support when international scholars work together in an unstable environment. Involving stakeholders at various levels, both domestically and internationally, is crucial for these alliances to be politically and financially sustainable. This is relevant regardless of how big the coalitions are. This research looks at how peace efforts in the Middle East have been affected by the intricate stakeholder arrangements in a global academic health science network. To better meet the intellectual, structural, and political demands of different worldwide support organizations, the organizational structures within this cooperation are currently undergoing revisions. Nothing, however, has cast doubt on the veracity of international research or its value in promoting peace. In order to reduce organizational instability, deal with resource differences, and methodically build and repair links among stakeholder groups, this study examines the reconciliation strategies used by cooperative health researchers.

Keywords: International cooperation in research Boundary management and organizational authority The Academic Health Science Center

### Introduction

Within the context of international research, the reliance on stakeholders who monitor resources at many levels of financial and intellectual exchanges (local, national, regional, and worldwide) is growing in importance. These levels include local, national, regional, and worldwide. According to Gulati and Singh (1998), Reich (2002), and Anderson and Steneck (2011), multi-stakeholder collaborations are frequently the only option that may effectively handle complex societal problems that cannot be properly resolved through unilateral means. However, it is essential to keep in mind that different countries' configurations of their resources in a way that makes them conducive to global research are rather diverse from one another. These differences include variations in the availability of intangible resources, which can include governmental backing, a cooperative atmosphere, and the durability of commitments (Stein et al., 2001; Reich, 2002). Cognitive dissonance can be experienced by both internal and external stakeholders in relation to a number of factors including the identification of problem origins, stakeholder responsibilities, project responsibility, and desired outcomes (Reich, 2002; McCoy et al. 2008).

This can pose a threat to research collaborations, which run the risk of falling apart as a result of this cognitive dissonance (Reich, 2002). Academic health science institutes located in nations where violence is a concern have actively participated in international research collaborations, which has shed light on the severity of the issue. According to Stein et al. (2001) and Skinner et al. (2005), the construction of links between the professional and social worlds increases the pace at which problems are

resolved and supports the integration of knowledge acquisition among the numerous individuals involved. Interdisciplinary research is encouraged in several ways, such as the one exemplified here by the multifaceted character of these centers. Healthcare practitioners not only have the ability to provide rapid interventions that save lives, but they also have the ability to participate in global discussions. It is established that socio-ethnic and political tensions contribute to armed conflicts and increase serious public health hazards (Pedersen, 2002; Noyeketal, 2005). Certain conversations have the ability to greatly decrease these tensions, which could be a benefit to public health. The ability of academic mediation to assist individuals in reevaluating the nature of tensions, adopting a more rational approach in ongoing discussions, and gaining an understanding of normalcy amidst violent events is one of the primary reasons for its value in the emotional processing of traumatic events (Gangrade and Misra, 1990; Oweini, 1998; Abu-Saba, 1999; Gluncic et al., 2001; Skinner et al., 2005).

Evangelista (1999) and Dechaine (2002) found that the long-lasting effects of global programs such as Pugwash and Doctors Without Borders demonstrated the enormous advantages that result from the integration of scientific, humanitarian, and peace-building efforts in resolving global crises. However, academic institutions that are located in areas that are characterized by peace and stability have legitimate concerns regarding the authenticity of their engagement in sites where there is a true risk of hostage situations, bodily injury, or fatalities among their employees. These concerns relate to the authenticity of their engagement in locations where there is a genuine risk. In a similar vein, governmental organizations, educational institutions, and academic families may have some reservations about the wisdom of the altruistic goals they have set for themselves. In addition, it is essential to keep in mind that numerous stakeholder groups operating within the domestic context, in addition to factions affected by conflict in partner countries (Dajani and Carel, 2002; Ghani and Lockhart, 2008), may voice opposition to the concept of intervention. This is especially likely to occur in circumstances in which clear and immediate solutions or responses are not readily apparent (Zwi, 2004). The possibility of a misalignment between the prioritizing of health, education, and peace by the general public and the competing interests and assertions of private entities can have negative repercussions for the distribution of resources and the maintenance of equilibrium within a partnership. In addition, this misalignment may impair the legitimacy and longevity of collaborative ventures that are initially founded with noble objectives (Kaul, Grunin, and Stern, 1999; Kirk, 2007). These studies were conducted by Kaul, Grunin, and Stern. There is a situation that occurs within the setting of academic health science institutions in which contrasting points of view regarding the responsibilities and tasks of internal gatekeepers have the ability to make the difficulties that are brought about by the involvement of external parties in the institution even more difficult. (2005).

According to Kirchet al The academic medical enterprise is a type of organization that places equal importance on the care of patients and the pursuit of research. The epistemic norms, organizational cultures, and accountability frameworks that exist within the medical profession all have an impact on the strategies that are

utilized by the various departments, research centers, and laboratories that make up the field. According to Cooper et al. (2007) and Macfarlane et al. (2008), the effects at play here might be distinct from those seen in professions outside of the medical field. Academic health research institutes are required to create links with public health care entities, with the intention of addressing the requirements of local patients and taxpayers. This is in contrast to the previous emphasis, which was placed solely on the attempts to address global concerns. The increasing geopolitical aspects of academic outreach and the complex governance of research internationalization are two factors that compound the difficulties associated with achieving institutional coherence and maintaining harmonious stakeholder relationships (Marginson and Rhoades 2002; Beerkens and Ende 2007; Jongbloed, Enders, and Salerno 2008; Jones and Oleksiyyenko 2011). These factors make it more difficult to achieve and maintain institutional coherence. Even while the academic literature recognizes the growing engagement of stakeholders in academic businesses, there is a lack of study on the legitimization of international cooperation in challenging multi-stakeholder situations.

This is despite the fact that there is a dearth of research on the legitimization of international cooperation. When various stakeholders offer varying degrees of support for a cross-border research project, the researchers face a unique set of obstacles. Academics struggle with the issue of legitimacy when cooperative ventures develop as vital research tools within their individual fields, but may not bear the same significance for the larger institution, its constituents, or the entire enterprise. This dichotomy creates a difficult situation for those working in academia. In the world of academia, one of the topics of scholarly analysis is the investigation of questions of legitimacy within inter-organizational contexts during times of rising political unrest or crises. In circumstances when a number of risks are present, the question of how concerns from a number of different stakeholders can be addressed in an efficient manner arises. In spite of the significant amount of study that has been carried out on the subject of organizational legitimacy, these concerns have not been satisfactorily answered, and there is a growing demand for universities to fulfill both domestic and international expectations for their level of social participation. Tierney (2010), Khan et al. (2011), and Khan et al. (2009) are some of the sources that were cited in the article. This study aims to address current knowledge deficits by conducting an analysis of the strategies utilized in the process of multi-stakeholder legitimization within the context of an international partnership (Noyek et al., 2005; also referred to as Isralowitz et al., 2001; Moore and Aweiss, 2008). This will be accomplished by examining the tactics implemented in the process of multi-stakeholder legitimization.

The purpose of this research is to fill in the knowledge gaps about the interaction of Canadian medical scholars with the Middle East, specifically in regard to negotiating the political, cultural, and religious disparities that exist between the two regions. This study uses an analytical approach that is based on earlier research on organizational legitimacy. That research underlines the expanding spread of university mandates across multiple global, national, and local commitments (Marginson and Rhoades, 2002; Jones and Oleksiyyenko, 2011). That research was the inspiration for the

analytical technique that was used in this study. In the following section, the concept will be presented, and then there will be a brief summary of the primary findings, followed by a discussion of how the research was designed. In the end of the paper, the important significance of the findings for global cooperation are emphasized, particularly in regard to the overarching strategic goal of the legitimization process.

### **The Organizational Legitimacy of a "Glonacal" Agency**

People, goods, and ideas have moved across boundaries increasingly in recent decades. It has assisted scientific research and produced issues and opportunities. More opportunities for national governments to collaborate on faster, more rational, and cheaper solutions, together with better epidemiology and surveillance systems, decrease the spread and viral complexity of mobility-related infectious diseases (Cooper et al., 2007). Academic scientific governance has altered, making project planning and execution easier for stakeholders and increasing accountability (Jones and Oleksiyenko 2011). More stakeholders—direct consumers, supporting organizations, disciplinary networks, and global agencies—decide if academic health science institutions' collaborative actions are valid. Medical schools, research centers, projects, and initiatives aim to get recognition in their "social worlds" and among powerful people (Moses, Theien, and Matheson, 2005). Frost, Reich, Fujisaki (2004). To address new scientific topics and cross-boundary actions, many groups must collaborate (Oleksiyenko and Sa'2010). These organizations set rules, finances, and responsibilities (Ryan and Walsh 2004; Jongbloed, Enders, and Salerno 2008).

Previous research has identified legitimacy indices as financial, informational, and intellectual resource exchange (Terreberry, 1968), organizational survival (Zald and Denton, 1963; Pfeffer and Salancik, 1978/2003), and value congruency. However, stakeholders' agreement that ideas and behaviors are "desirable, proper, or appropriate within some socially constructed system of norms, values, beliefs, and definitions" increasingly affects organizations' legitimacy (Suchman 1995:574). Legitimation is difficult since parties may dispute what is good or acceptable. An organization's maturity, complexity, and connection affect its ability to spot and address legitimacy threats. Things change quickly and local, national, and international interests and obligations conflict, making it harder to maintain power. The wants of all three partner planes at once are called "glonacal agency" (Marginson and Rhodes, 2002). This multilayered touch is tested, but it can get worse between people. Professionals, the government, and citizens make US and international decisions. Most decisions are supported by adjacent social groups, or "social worlds," whose values and rules match those of the decision-makers. Regional "social worlds" adopt political and cultural trends from other areas as people, objects, abilities, and technology travel more freely.

Multi-level stakeholder involvement makes firms more exposed to environmental instability due to local and global processes. This volatility is exacerbated by organizational differences and the necessity for groups to adjust to their supporters' shifting ideals and goals, who are likewise trapped in "glonacal" interests and commitments. Clark (1983) describes higher education's understructure, structure, and superstructure. These levels show how internal and external parties

negotiate policies, initiatives, funding, and responsibilities. Cooperative attitudes and readings increase while structural levels decrease due to incoherence. Partner support layers stop working and supporting each other without lyde (Jones and Oleksiyenko 2011). Academic departments and academics dispute cross-border acts since "academic tribes and territories" (Becher and Trowler 2001) have different aims. Diverse organizational behaviors, knowledge, and resources facilitate collaboration. Divisions of academia with diverse networks and stakeholders. Bunton and Mallon (2007) and Ramsey and Miller (2009) discuss professors' roles and dedication using distinct performance and tenure models.

Competition for limited internal resources stresses research organizations, according to Mallon (2006). Implementation is likely to produce resistance and controversy since people must sacrifice their own interests to benefit everyone (Finet 1993). Research collaborations varied by researchers' universities and stakeholder support networks. These distinctions create internal and external hierarchies. University executive offices may choose faculty members based on geography, institution, or personal interests. They may also seek political and financial aid. Institutional leaders emphasize local, national, and global interests, which limits their influence due to epistemic conflicts and uneven donor support (Oleksiyenko and Sa' 2010). Academic health sciences centers provide local and global knowledge. Medical researchers need global networks for discovery and innovation. Local clients' needs affect health facilities, and they may not realize how global and local interdependencies effect their health. The center's resources are managed by local clients and taxpayers, but health scientists can't shift the study plan elsewhere, even if some academics wish to.

Academic health partners may struggle to bridge social boundaries due to globalization. Even while social and technological talents in the health sciences are becoming increasingly globally recognized, Sa' and Oleksiyenko (2011) argue academic leaders can't push for global projects without outside support. Different national aims, public-private sector discrepancies, new players, and accountability norm interpretations hinder superstructure-level international cooperation. We need support from many stakeholders across disciplines, departments, and cultures to break down barriers and improve understanding to make meaningful, relevant, and legal scientific breakthroughs at home and abroad. For political and financial support at many levels of decision-making, researchers must meet with stakeholders inside and beyond academia. As economic concerns grow, organizational approaches that involve computations and calibrations of data become more damaging to academic partnerships. Joungbloed, Enders, and Salerno wrote it. Partnership planners aim to minimize disparities across businesses' missions and cultures so professional and government stakeholders can see shared goals and execution plans more constructively.

## Conclusion

The vast range of structural, intellectual, and cultural resources that are available at different levels of the partnering agency are largely responsible for the organizational legitimacy that has been attained by CISEPO's worldwide collaborations. This legitimacy was attained by the organization. CISEPO was able to accomplish its primary goals, despite the fact that it is a very small organization and plays just a supporting role in the larger international effort to resolve the situation in the Middle East. These aims included reducing levels of antagonism, disagreement, and resentment between the many professional sectors that make up the medical profession in the Middle East, in addition to increasing possibilities for constructive communication and collaboration. The research uncovered numerous components that cut over jurisdictional lines within the governance matrix (refer to Table 1), as well as methods for bridging the gap between regional, national, and international organizations. Because of this, a better understanding of the links between the medical community's efforts to solve challenges, recognize common aims, cultivate trust, and uphold their dedication to creating peace in the conflict-affected area was made possible.

When it comes to recognizing the relationships among different levels of government and establishing the legitimacy of international collaboration in fostering health and peace in the Middle East, the employment of analytical matrices can be of great benefit. This study elucidates the method in which a collaborative agency integrates social, political, and cultural variables, while also stressing the critical function of boundary spanners as essential mediators in traversing the hurdles that develop during the process of conflict resolution. Specifically, this research focuses on the way in which a collaborative agency integrates social, political, and cultural factors. In addition, the quadrants contained within the matrix serve the purpose of elucidating the connection that exists between organizational norms and institutional standards. In addition to this, it makes it easier to find inconsistencies and intersections at several levels, which in turn makes it simpler to create components that cross boundaries and have the potential to increase stakeholder involvement in key areas. According to Marginson and Rhoades (2002), CISEPO views itself as an example of a "global agency," which transcends the limits of nation-states, markets, and academic professions. Specifically, they suggest that CISEPO views itself as an exemplar of a "glonacal agency." If they continue to operate in isolation, these entities will be unable to adequately handle ongoing issues due to the limitations that this places on their capabilities.

The method that CISEPO uses to establish a multilayered organizational legitimacy is intimately related with the research goals of the academic health science institutions that serve as its hosts. This connection is made possible by the fact that CISEPO is hosted by these institutions. Smaller units, with their networks and spin-offs, emerge as intermediaries to guarantee sustained academic involvement and dedication when the academic community experiences heightened apprehensions regarding liability risks or when an entire medical faculty faces challenges in promoting the internationalization of its disciplines (Jones and Oleksiyenko,

2011). CISEPO's research unit, knowledge network, and its status as a non-profit organization all play important roles in the organization's construction of a multi-stakeholder approach. CISEPO made use of one of the numerous available sources of information.

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