Efforts to translate research into action among migrants in Goa: An autoethnographic reflection

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This paper is an autoethnographic reflection on my efforts to share the findings of my doctoral research with the non-governmental organisations in Goa, India. It is not meant as an example of how to translate research into action but is a window through which one can identify the challenges that arise for the researcher and the 'beneficiaries' of the research. It is essential in a reflexive account to realise what one's positionality is and how this positionality is enacted during the process of sharing the results. I list the steps taken in preparing to present the results and give an account of the proceedings of the workshop where the results were discussed. Research results can be varyingly interpreted by different stakeholders.

[autoethnography, positionality, research-to-action, non-governmental organisations, Goa, India]

Introduction

What can we do with this information? (NGO staff member)

I present in this paper a reflexive account of how I went about sharing the findings from my doctoral research and translating them into action. I take a step outside of what I have done and reflect whether this was the right way to go about it. The auto-ethnographic approach (Ellis 1999) is useful as it provides the tools through which one can examine and re-examine the actions one has taken and the subsequent reactions received. In the process of moving 'from research to action' we are confronted with several questions such as how to bring the research to the 'beneficiaries'?, who are the beneficiaries?, who should bring this information?, and in what form should the results be presented? This autoethnographic account does not answer all these questions but provides a window through which one can identify the challenges that arise in the process of sharing the results with different stakeholders. I first present a background to the project, then some notes on positionality, followed by a reflexive

account on the process of sharing and translating results and finally a discussion on what was gained from this process.

Background to the project

India has an estimated 2.31 million people living with HIV, which translates into a prevalence rate of 0.34 per cent (NACO 2009). HIV infection is no longer limited to a particular 'risk group'; the general population is at risk as is evident through the increasing cases of HIV among women attending antenatal clinics. Furthermore, married men are, knowingly or unknowingly, transferring the virus from high-risk groups such as sex workers to their wives (PRB and PFI 2003). HIV/AIDS and migration do not have a linear, cause-effect link but they are known to be linked laterally (UNDP 2004). Being a migrant is not a risk factor in itself, but the process of migration and integration into local communities can expose the migrant to the risk of acquiring infectious diseases such as HIV and AIDS. The present study was conducted in the Indian city of Goa among migrants from the neighbouring state of Karnataka. According to the Goa State AIDS Control Society (GSACS), the predominant route of HIV transmission in Goa is through sexual contact (GSACS 2002-03:10). Most of the prevention programmes of the GSACS focus on migrants.

Fieldwork for this doctoral project was conducted in two stages. An initial exploratory study was carried out in 2003. This involved 14 in-depth interviews, pile sorting, key informant interviews and community mapping. A second, larger study was conducted in 2004-2005 and included 25 in-depth interviews, 16 focus group discussions and a survey involving 1259 men (migrant population N=752; mobile population N=507, comprising 260 truckers and 247 fishermen). Respondents in both qualitative and the quantitative studies were ever married men, aged between 20-45 years, born in Karnataka and who migrated to Goa. Mobile populations comprised truckers and fishermen who travel between Karnataka and Goa. The study was conducted in Kannada and Hindi languages.

The key findings from the research are that migrant and mobile men in Goa perceived economic consequences of being infected with the HIV virus as more severe than its social and health consequences. Men applied cultural heuristics of gender roles, vigilance, trust and the use of visual cues as guides to their risk assessment and decision making in the face of partial or uncertain information about the sexual partner. The Health Belief Model (HBM) was a guiding tool to understand both risk assessment and behaviour. The likelihood that men used protection (condoms) depended on additional contextual factors other than the HBM factors. The knowledge about HIV and AIDS was locally produced and shared through the cultural narratives. The link between culture and space/place is depicted in the manner in which migrants make places and experience discrimination (see Bailey 2008a).

Positionality and collaborations

In any reflective account one should first ascertain one's positionality in the group. Positionality is extensively discussed by critical geographers (Hopkins 2007; 2009; Rose 1997; Sheppard 2002) who emphasise the existence of unequal power relations between the researcher and the researched and the need to be attentive to the manner in which knowledge is produced. Many researchers use the term dissemination of results; closer examination reveals that the word 'disseminate' includes the aspect of power. The researcher is in a higher position and has the power to disseminate the information. Thus in this paper I do not use the term 'disseminate' and prefer to use the terms 'sharing' or 'discussing' research results. So basically being aware of one's positionality is being reflexive about knowledge, power and context. To start this auto-ethnographic account I first look at my positionality both among the migrants groups and the Non-Governmental Organisations (NGOs).

Among the migrants groups during the fieldwork we (the research team) faced both challenges and opportunities due to our positionality. We realised the significance of our cultural background in giving us access, rapport and trust among the migrant groups. Language and, oddly enough, the licence plate of our motorbike which showed the registration number from Karnataka enabled initial access to the communities. Migrants recognised that the vehicle was from Karnataka and were curious to know about its owner. Speaking Kannada (my mother tongue) and the dialect of Northern Karnataka was useful to build rapport as the migrants could immediately relate to the researcher and research team. We were always asked if we were from the government and whether we had come on behalf of the police. Some of the migrant settlements were built on illegal land, and hence many migrants were afraid of being evicted and having their houses demolished. During the entire fieldwork we had to position ourselves interchangeably in the categories of 'us', 'them' and 'everyone'. Coming from Dharwad, Karnataka we had our own definition of who 'us' were and through the process of rapport building we tried to include ourselves in the 'us' (nama jana = our people) category of the migrants. Realisation of the positionality of the researcher is crucial in providing an inter-subjective account of the study population. The accompanying discussion on the positionality between the researcher and the researched is that of rights and reciprocity in terms of cash or kind. In general throughout the project we interviewed people only when they came back from work or were available to speak to us. There was no monetary benefit involved. We avoided this, as it would create the wrong climate in the neighbourhood. None of the other research studies in the area paid participants for the interviews or focus group discussions. During the research I introduced myself as a student researcher. This lowered my status because the migrant men assumed that I was not earning an income as I was still studying; in India a doctoral research is still considered as part of tertiary education.

We contacted NGOs in Goa engaged in HIV prevention such as FXB-Goa (François-Xavier Bagnoud), Lifeline Foundation, Jan Ughai, and Population Services International. These NGOs were also working with GSACS on projects relating to migrant and mobile populations. Collaboration with the NGOs aided the identification

of the migrant settlements, truck stops and fishing docks, where suitable respondents could be found. The NGOs saw me as a researcher from a 'foreign' university and the rest of the research team as members of a research organisation in Karnataka. In the beginning whenever I sent a mail or gave a visiting card which read A. Bailey, University of Groningen, the Netherlands, people expected to meet a white European person and were confused when they saw an Indian. As time passed they saw me in different roles as researcher, migrant from Karnataka and someone who speaks the language of the migrant groups. The NGOs also had their own share of politics because of mutual competition for projects from the GSACS. During the workshop where research findings where discussed, it was apparent that being associated with GSACS meant a wider audience. The local hosts also wanted to profile themselves as collaborators in the research project. This was one of the ways of enhancing their current status among their peer NGOs. The disadvantage of associating with GSACS was that we could not do away with the hierarchy and the need for protocol. On reflection, the NGOs appeared to perceive the workshop as one of GSACS's information giving sessions.

Preparing to present the results

In 2008, I received my doctorate and the academic output included four articles compiled in a thesis (Bailey, 2008a) and a book chapter (Bailey, 2008b). When the project in 2004 was conceptualised one of the objectives was to include an action component. Unfortunately, this could not be achieved within the time frame of the doctoral project as conducting the research and publishing required number of articles took up most of my time. As I received an offer to continue as a post-doctoral fellow I took up the issue of bringing the results back to the NGOs and the migrants groups. During the process of the fieldwork four NGOs in Goa were involved. But in a follow-up meeting in September 2008 I found that due to changes in the policy of some NGOs, they were no longer working on issues related to HIV/AIDS, which left only one NGO Lifeline Foundation who was still active in HIV prevention among migrant groups. So a dilemma arose as to whom I should bring back the information. Lifeline Foundation offered to co-host the workshop in Goa. Thus in close collaboration we planned a workshop for November 2008 where we decided to invite other NGOs presently working among migrant groups and on HIV prevention. It was also agreed that my book (thesis) would be launched by the project director of GSACS. This was seen as a strategic move to gauge whether GSACS would be interested in using the results from the research.

Presenting results to NGO

With financial support from the Population Research Centre, Groningen, we organised a workshop on 29th and 30th November 2009. It was held at the International Centre Goa. Among the organisers were Prof. Inge Hutter and I from Groningen. Prof.

Hutter had recently concluded a major research-to-action initiative called *Spandana* (Hutter et al. 2006) in Karnataka which focussed on child spacing and reproductive health. The other organisers, all experienced in their own field included Mr Channakki from the Population Research Centre, Dharwad, a research assistant during my doctoral study; Ms Sujatha Annishettar, a research officer with the *Spandana* research-to-action programme in Karnataka; and Mr Ashpak Shaikh, project co-ordinator of Lifeline Foundation.

Prof. Hutter could not attend the workshop because of the terrorist attacks in Mumbai on 26th November 2008 which caused all flights to be cancelled or delayed. In Goa at that time there was no apparent disruption but the atmosphere was very tense. We decided to go ahead with the workshop. It was for me an uphill task as I was an amateur in translating research to action. So I decided to present the results in a very simplified way and work with the NGOs on possible ways of translating the results into action. Pitched against this background, we started the workshop. There were 17 people from different NGOs in Goa. The workshop was officially opened by the project director of the GSACS. The rituals surrounding the official opening, presenting flowers to the guest of honour, holding formal speeches and having a VIP as a guest of honour are seen as essential elements that confer recognition to the workshop. Having been away from India for a while I needed to get back into this tradition and recognise the social necessity of the rituals. The enactment of the rituals also sets the stage for the events that follow and determines the hierarchy among the people present: in the manner of who is honoured and who is honouring through the rituals. The expression of hierarchy then is the played out positionality of those present at the workshop.

Day 1

We started by registering the participants and giving them badges and bags from the University of Groningen, which carried connotations that it is an international event, even though all present were Indians. One would also question the need to highlight the association with a 'Western' university. Reflexively does this mean, for the NGO personnel, that information that comes from such a university is more scientific or authentic? Or it could also be that information that comes from outside the NGO network is seen as less biased. The NGO participants perceived research results to be important but they never questioned how these results were arrived at. This raises the question of whether the various stakeholders to whom we bring research results ever question the research process and our analysis of their situation.

Then the guests were introduced and the project director of GSACS launched the book and spoke of the necessity of conducting research and how the NGOs can use this information. There was a clear sense of hierarchy and power relations in the manner in which he spoke and emphasised his authority. This was very evident when the project director of GSACS asked the NGO personnel to listen carefully to what the researchers said.

We asked the NGOs to introduce themselves and to talk about their work with migrant groups. The presentation was a useful means to know about their work among

migrant groups and was a way by which they could actively participate in the workshop. Following this, I presented a brief description of the project and a few results after which we held a discussion on the first impressions of the NGOs about the results. We then took a break for lunch during which the NGO personnel could informally interact. During this process I observed that the NGOs differed in their experience of working on HIV and migration. There were some who had been involved in prevention work for nearly six or seven years and some who had just started the year before. This observation helped me to assign participants into different groups.

A detailed presentation of the results was given after lunch and some of the themes discussed are shown in Table 1. This presentation had to be done very slowly and I repeatedly enquired whether they were able to understand the results. It was not an easy task to explain the results in a manner that was less theoretical and academic. The use of quotes from interviews and focus groups was useful to get the message across. Following the presentation we divided the NGO participants into four groups and asked them to discuss which results they would choose to use in their migrant communities or work sites. We made sure that the NGO members who were new to HIV prevention were coupled with more experienced personnel. The latter were initially hesitant to discuss but slowly opened up. At a later discussion among the organisers we realised that many of the NGO personnel were never asked by their coordinators about their opinion or how they could design a programme. They were mostly told what to do and how many people to reach. The position of the NGO personnel within their own NGOs added another layer of complexity to this situation. As many were either project coordinators or fieldworkers they were not in a position to take a decision or firmly say that some of the results would be relevant to them. They needed approval from their seniors even though the workshop was organised to provide a common ground for NGOs to discuss the possibilities. Marshall and Reason (2008) stress that participation is essentially political as it determines whether the people have the right and ability to have a say and thus involve themselves in the construction of knowledge. However, there are dominant frameworks which guide the work of NGO personnel, which was reflected in most of the discussions where participants always asked me the required target number to be reached and the number of men to be counselled for a HIV test. This is still one of the main stumbling blocks to overcome. However one should also acknowledge the global change in the definition of prevention which is moving away from information campaigns to testing and treating. The latter is increasingly included under the banner of prevention efforts. We closed for the day and asked the participants to come back with new ideas or suggestions for the next day. Each participant was given a copy of the thesis as a reference and a document where some of the results were presented in a simplified form.

Day 2

On day 2 we started with a presentation by Ms Sujatha Annishettar on *Spandana*. This research-to-action programme had been conducted by Inge Hutter and her Indian counterparts and the action programme had been carried out in the villages in Kar-

nataka. The aim of the presentation was to provide an example of how research can be converted to practice. The discussion that followed the presentation made it clear to the NGOs how research results can be presented in the form of flash cards and in group sessions. Prior to this presentation the participants were unsure and uncertain about whether the research results could be translated into intervention material.

We then asked the four groups that had been formed the previous day to pick one or two results and show us where they would use the results and among which group of migrants and how they would convey the results. The translation of results into either flash cards or other educational forms was for the group to decide. Each group was given a board and a large sheet of paper to write about their projects. The discussion that followed was an eye-opener for me as researcher. For one thing, I could see how other people interpreted the research results. The second was the difference between the language of academia and the language of practice, which had to be bridged. For example, in Table 1 the first point is the economic consequences of HIV/AIDS. Migrant men in Goa thought that if they get infected with the HIV virus, they will become even poorer and that there will be no one left to take care of the family. One of the NGOs took up this point and started discussing about income generating activities such as candle making as an economic solution. Whereas I thought this information could be used in the prevention material, where instead of saying AIDS has no cure one could also say AIDS can lead to further poverty. It took me some time to see the link between economic consequences and candle making. The migrants themselves do not use candles for decorative or religious practices. However the large Catholic population in Goa do use them in their churches. The schema behind suggesting candle making is that the migrants should produce things which are useful to the host population and not a product which would be useful for themselves. This solution shows the situational disconnection between the migrant population and the NGOs.

Following the group assignment each group presented their results and got feedback from other participants and the organisers. In Table 1 we see some of the issues discussed and the possible ways in which the results can be translated into action. In the discussion I observed that many people took up issues such as trust and visual risk assessment. Migrant men applied cultural heuristics of gender roles, vigilance, trust and the use of visual cues as guides in their risk assessment and decision making in the face of partial or uncertain information about the sexual partner. They discussed many possibilities in which the results could be used. What really surprised me was that though the research results concerned men, the NGOs felt that we should also give this information to women.

In my research I had found that the migrants from Karnataka were ascribed a negative identity by the Goan population and were called *Ghati*. This term was used as a way of Othering the migrants. In the discussion with the NGOs they did not see this as a major problem. As most of the NGO workers were Goans they said it was just the way people talked and should not be taken seriously. In the study, however, migrant men reported various instances of violence and discrimination by Goans. In the discussion around the topic, one of the participants looked at me and said "See, you are from Karnataka but you will not be called a *Ghati*." This also made clear how they

thought about us the organisers who were also from Karnataka just as the migrant men in the study. The discussion surrounding the *Ghati* identity reflected on the social exclusion of the migrants and on the positionality of the 'migrant' researchers. The positionality differed for the researchers because of their social status derived from education, their academic occupation and affiliation with institutions that set them apart from the migrant labourers. Even though the migrant labourers and the researchers shared similar linguistic and geographical origin, they were accorded different levels of acceptance.

Towards the end we drew up a framework (see Table 1) and for each issue presented we talked about the goal we wanted to reach, how to address the issue and what groups we wanted to reach. The discussion surrounding the different ways to address the issues through such means as flash cards, street plays, stories and documentary was from the perspective of the participants. I enquired why they chose these methods and for whom was it targeted. This participatory approach with the NGOs helped in understanding the different kinds of prevention material they needed for their efforts. A large part of the discussion was also on what materials they did not have at that time. The participants were later asked to take these results back to their NGOs and ask their project coordinators if they would be interested in writing a proposal about a possible action programme. Two NGOs came back with a proposal which focussed on behavioural change but from a target-oriented perspective. What I also realised later was that although the NGOs are willing to use the results, they do not have a 'road map' as they are used to writing proposals where they are required to reach a particular target group and counsel them to take an HIV test. In a later development one of the NGOs offered to house a researcher within their organisation so that they could develop their research capacity.

This is the story so far. The obvious question that most people would ask is why I went to the NGOs and not to the migrants directly. My answer is twofold. First, as I had worked with NGOs during the fieldwork, I had to inform them so that they could bring the results to the migrants. The second reason was that it was too threatening (for me) to approach the migrants directly and inform them about the results. I felt that the NGOs were the best channel to pass this information further. The reason for feeling threatened was the fact that as an academic I was not in touch with the language and conduct of the practitioners. After the workshop we did go to one of migrant communities with the idea of holding a community meeting where we could report back the research that had been done and to show them the printed PhD thesis. However, it turned out that this was not possible as the night before we came to the settlement, the police had arrested around thirty men in the community who did not have the right papers or could not show that they owned or rented a house. On further enquiries we found out that the raid was the initiative of the Goan police after the Mumbai attacks to search for illegal residents. Hence the older residents were busy handing out forms and thinking of ways to get the arrested men freed and back into their homes. Even though I had all the motivation, the information and the means to translate the research, the research was not the only important thing for the migrants from Karnataka.

Discussion

From the account above three key themes emerge: one is the reflection on the commitment of transferring knowledge to different groups; second is the reflection on positionality and how it influences the transfer of knowledge; the third refers to the challenges that one faces both in terms of epistemology and practice when involved in the process of knowledge transfer.

The autoethnographic approach helped document and reflect on each step taken and the possible repercussions. The realisation of one's positionality as discussed throughout the paper gives one clues on how to situate different actors in the process of knowledge transfer. This situating helps contextualizing the knowledge that is produced and interpreted by the different stakeholders, in this case NGOs, government officials and researchers. Though this sharing of results was on a specific issue with a specific group of people, it had many challenges whose solutions were not directly apparent but became clearer as we started to understand each other's viewpoints. Thus any effort to share research with different stakeholders is only possible through a social learning process.

In the beginning of this paper I put forth the following questions: how to bring the research to the 'beneficiaries'?, who are the beneficiaries?, who should bring this information?, and in what form should the results be presented? Through the workshop I was not able to translate the research directly into an action programme that could be used in an intervention but I was able to provide a common ground where the research results could be discussed. So NGOs were one of the beneficiaries and were seen as the channels through which information could be provided to the migrant groups. The participatory approach helped in determining the form in which the research results could be presented.

Boog et al. (2008:15) comment that in social sciences action research should link knowledge production and social change and that this link is possible by creating partnerships between researchers, practitioners (for example NGOs) and other stakeholders. In Goa I tried to build a partnership between the researchers and the NGOs but not with the migrants. This addition could have produced more concrete solutions. However the production of knowledge that takes place in this process is dependent on the common ground that is created. I realised that different kinds of knowledge are produced and validated. One is the knowledge that is created during the research process, second the one created when it is presented and discussed with the stakeholders and third when the NGOs apply it in their own settings. As anthropologists, we sometimes are overambitious when we say we bring about social change from the knowledge that is produced in academia. Many more steps and stages are needed with different stakeholders before we can initiate a change both in the community and within ourselves. Thus our positionality evolves as we move from being a researcher to being one the agents of change.

Table 1 Translating results with the NGOs

Number	Problem / issue / theme	Goal	Way to address it	For Whom (Community)
1	Economic consequences of HIV/AIDS	Point out risk not in health terms but also as loss of wages	Flash cards Street plays Group discussions	Men Unmarried and married Settled as well as mobile Different group solely for women
2	Visual heuristics and narratives of visuality	Looks are deceptive. HIV infection can not be visually ascertained Inform visuals can not guide partner assessment.	Kannada folk dance Flash cards Pamphlets Posters Games	Men Unmarried and married Settled as well as mobile Women also need this information e.g. good-looking men.
3	Lovers (non-commercial sexual partners)	It is unprotected sex and not the partner. Everyone is vulnerable	Role play Stories Documentary (useful)	Men Unmarried and married Settled as well as mobile Women also need this information
4	Ghati identity and implications	Respect culture Difficulties in accessing of treatment	Cultural sensitivity with government health officials Right to health	Community Health care providers Migrant resource centre Difficult to get peer volunteers

Bailey (2008a)

Note

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