**Guidelines for Equitable International Partnerships
at the Saw Swee Hock School of Public Health**

Introduction
Efforts to decolonize global health partnerships are needed to address the unequal power structures that hinder substantive improvements in low- and middle-income country health systems.[1] The lack of accountability of high-income country partners and the imbalance in partnerships have been highlighted as key challenges to overcome to foster more respectful, honest, and equitable collaborations.[2] Although the bulk of attention in academic settings has been on research, there are also ethical issues associated with education and service initiatives in global health programs, resulting in calls for comprehensive ethical guidelines for all such academic activities.[3]

If we are to bridge the gap between existing global health partnerships and the equitable partnerships we desire, there are things we need to do better. We need to share a strategic vision, be transparent, and communicate clearly with the organisations we partner with overseas, and intentionally monitor and evaluate our role in those partnerships.[4] At SSHSPH, we should always value fairness and the dignity of our overseas partners. Encouraging inclusive and just partnerships increase the possibility of meaningful, respectful and sustainable collaborations important for improving health outcomes and shared learning for all.[5]

The following principles are meant to guide the design and implementation of global health research, education, and service initiatives (hereafter referred as "activities") undertaken by staff and students of the school.

Guiding principles for staff and students
SSHSPH expects our staff and students to adhere to the following principles:

Principle 1: Build an equitable and inclusive partnership environment
When considering or establishing international partnerships, NUS staff and students should:
1.1   Prioritize partnerships with leadership from the countries and communities directly engaged in the partnership and/or research, rather than leadership predominantly representing the entities providing the funding
1.2   Recognize and value the knowledge, expertise, and perspectives of all partners.
1.3   Ensure that partnership management and decision-making are conducted jointly, with equal participation from all partners and stakeholders to the fullest extent possible.
1.4   Cultivate trust with all partners and stakeholders, respecting their perspectives and ensuring that all voices are heard and respected.
1.5   Develop both formal and informal communication channels between partners to facilitate routine information exchange on project development, challenges, impact, and outcomes, to ensure that all partners are engaged, well-informed and aligned.

Principle 2: Jointly develop a common vision for a sustainable future

When developing the international partnership framework, NUS staff and students should:

2.1 Co-create agendas and strategies, reaching mutual understanding and establishing common goals that benefit all partners and stakeholders.

2.2 Be clear and transparent about partnership aims, objectives, expectations, deliverables, and outcomes early, with mutually agreed division of roles and responsibilities within the partnership that appropriately reflect where partnership activities will take place.

2.3 Allocate resources within the partnership according to roles and responsibilities, ensuring shared ownership of the partnership from conceptualisation to implementation and dissemination.

2.4 Cultivate an ecosystem for shared and continuous growth via bi-directional learning, knowledge exchange and skills development, and by promoting practices that share data and networks.

Principle 3: Establish ethical and accountable practices

When conducting activities overseas, NUS staff and students should:

3.1 Commit to the ethical standard of 'do no harm', not just to the partners and stakeholders of the partnership, but also to the communities and individuals involved in or affected by the activities of the partnership.

3.2 Ensure that all research conducted by the partnership adhere to ethical guidelines in the countries or regions where the work is conducted, seeking local ethical approval where appropriate.

3.3 Facilitate a learning exchange process before the start of any major activity to enhance all partners' understanding and respect for the cultures, values, dignity and rights of individuals and communities where the activity will take place.

3.4 Implement regular internal reflection sessions, encouraging partners to recognize their own biases and to approach the partnership with humility as well as a learning and listening attitude.

3.5 Implement mechanisms within the partnership for routine review, regular monitoring, evaluation, and feedback on partnership progress – both in terms of the partnership objectives and framework – allowing for adjustments and improvements to be made in a timely manner.

Institutional commitment

SSHSPH will undertake to progressively implement the following:

Training

- Develop and incorporate cultural competency training for staff and students to enhance their understanding and respect for the cultures, values, dignity and rights of individuals and communities within the contexts in which they work.

- Implement training for all relevant executives and staff covering topics such as the extractive role of HIC institutions, power dynamics, decolonial approaches, understanding and navigating power dynamics and strategies for equitable public health practice.

Monitoring & Evaluation
- To review and monitor adherence to guiding principles by setting a list of indicators to track such as on diversity of leadership and staff in projects, and equitable representation across all countries and regions of operation.

Resources
1. [Addressing power asymmetries in global health: Imperatives in the wake of the COVID-19 pandemic.](#)
2. [Considering equity in global health collaborations: A qualitative study on experiences of equity.](#)
3. [Epistemic injustice in academic global health.](#)
4. [How to ensure equitable research partnerships in global health.](#)
5. [What should equity in global health research look like?](#)

Acknowledgments
This document was prepared by Ms Joyce Chee and Ms Afifah Rahman-Shepherd. It was edited after a review process in which SSHSPH faculty members provided comments.

References
1. Shamasunder, S., Holmes, S. M., Goronga, T., Carrasco, H., Katz, E., Frankfurter, R., … & Keshavjee, S. (2020). Covid-19 reveals weak health systems by design: why we must re-make global health in this historic moment. Global Public Health, 15(7), 1083-1089. https://doi.org/10.1080/17441692.2020.1760915
2. Binagwaho, A., Allotey, P., Sangano, E., Ekström, A. M., & Martin, K. (2021). A call to action to reform academic global health partnerships. BMJ, n2658. https://doi.org/10.1136/bmj.n2658
3. Crump, J. A. and Sugarman, J. (2010). Ethics and best practice guidelines for training experiences in global health. The American Journal of Tropical Medicine and Hygiene, 83(6), 1178-1182. https://doi.org/10.4269/ajtmh.2010.10-0527
4. Nakanjako, D., Kendall, D. L., Sewankambo, N. K., Razak, M. H., Oduor, B., Odero, T., … & Farquhar, C. (2021). Building and sustaining effective partnerships for training the next generation of global health leaders. Annals of Global Health, 87(1), 66. https://doi.org/10.5334/aogh.3214
5. Amisi, J. A., Cuba-Fuentes, M. S., Johnston, E. M., Makwero, M., Prasad, S., Ras, T., … & Pressentin, K. B. v. (2023). A pragmatic approach to equitable global health partnerships in academic health sciences. BMJ Global Health, 8(5), e011522. https://doi.org/10.1136/bmjgh-2022-011522