

Advanced International Colloquium on Building the Scientific Mind

## Report of the Special Panel on HIV/AIDS and the Scientific Mind



### The Challenge

In the context of the Advanced International Colloquium on Building the Scientific Mind, a group of researchers and practitioners representing three continents and seven countries came together to consider what, if anything, the scientific mind has to do with HIV/AIDS. The Advanced International Colloquium on Building the Scientific Mind took place in The Hague from 17 to 20 May 2005. It was organized by the Learning Development Institute (www.learndev.org) in collaboration with the Institute of Social Studies (ISS) under the patronage of UNESCO.

This paper summarizes the outcomes of the three consecutive working sessions by the above group during the Colloquium. In addition to papers produced by members of the group (see box Page 4), which are available on the <u>Web page of the Colloquium</u>, the collective reflection resulted in:

- A mapping exercise of potentially successful HIV/AIDS interventions which places the scientific mind in context.
- Enhanced reflective awareness regarding the scientific mind and its importance in HIV/AIDS prevention and mitigation.
- Suggestions for policy and practice which will promote a better understanding of HIV/AIDS and the scientific mind.
- A list of pointers for further research and reflection.

#### Placing the scientific mind in context

As a starting point for the analysis on HIV/AIDS and the scientific mind, the group decided to conduct a concept mapping exercise. The purpose of this exercise was to develop a common understanding of the potential importance of the scientific mind in the context of HIV/AIDS.

The mapping exercise focused on identifying core components of potentially successful HIV and AIDS

interventions. The elements of the map were then used as a springboard for analyzing how the scientific mind relates to and interacts with such an 'ideal world.'

The following issues were identified as key elements of successful interventions:

 HIV and AIDS present a complex reality due to the social components of the infection and the disease. As a result it was felt that successful interventions were more likely to be on multiple levels, multi-facetted and systemic (i.e. addressing the whole system that includes the individual, community and wider societal issues such as poverty) rather than short interventions focusing on only one level/component. Scientific thinking – at least in such an ideal world – would therefore encourage a holistic approach to generating understanding. Long term engagements would be a key part of such an approach.

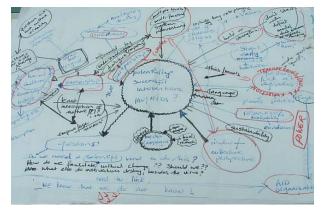


Figure 1 - Mapping successful HIV/AIDS interventions

• There was broad consensus that successful interventions would be based on true partnerships between 'interveners' and 'recipients' (although not all members of the group felt comfortable with these terms because of their often negative or demeaning connotations) and be informed by understanding, dialogue and empathy. From the perspective of the scientific mind this would mean promoting shared agendas and ensuring that processes, initiatives, and interventions are collectively owned (rather than imposed). The discussion highlighted that in the "real" world this is often not the case. For example, research in HIV & AIDS is not necessarily guided by the explicit interests of the target group but rather by those that have the funding.



Figure 2 - Detail of the plenary discussions on the scientific mind

- In order to have successful interventions, the group considered that 'interveners' need to become much more transparent about and critically aware of their own agendas, reflecting particularly on the power and politics underpinning funding and decision-making. In this context it was strongly felt that interventions need to be grounded in a common ethics and in morals that are agreed upon by both interveners and recipients. As is the case with scientific research, interventions need to be able to stand up to scrutiny by others.
- The discussion in the group reiterated the importance of ensuring that interventions not be based on a deficit model - i.e. the notion that there is something 'wrong' with a community. There is often a false assumption that there is no 'scientific thinking' in poorer and more rural or traditional Third World communities. As a result the strengths that are present in such environments, on which interventions could capitalize, are not used. Local knowledge and approaches to disease prevention and mitigation were cited as but one example of this. In this context there was a strong call for ensuring that 'interveners' develop profound knowledge and understanding of what local culture, knowledge and beliefs consist of and that this be done in partnership with 'insiders'.
- The group concluded that the best starting point for any intervention is probably uncertainty rather than given facts which may be tainted by outside perceptions and ideas. Scientific thinking and action would thus need to depart from an understanding and acceptance of the fact that there are multiple truths and that our perception of reality depends on our

vantage point. The notion of seeking to 'understand the world through the eyes of others' – normally only part of the social science approach - was considered essential in this respect. In other words, the starting point for research and action would not be one truth relating to HIV and AIDS, but rather multiple truths all of which should inform research agendas and action.

- The group discussed at length the need to accept that cultures can and do change and the importance of facilitating processes that allow for questioning of cultural practices that lead to the spread of the HIV virus. It was concluded that the methods and attributes that underlie scientific thinking – outlined in the box below - provide a useful basis for doing so. However, the group also concluded that in cultures that have been constantly threatened by colonialism and apartheid, it will be necessary to understand and build into any 'intervention' the fact that individuals and communities will be more resistant and therefore perhaps less amenable to change.
- The discussion emphasized that environments affected by HIV and AIDS are characterized by complexity and it is this complexity that research and practice - in science and other areas - needs to recognize. The

#### Key attributes of the scientific mind identified in the course of the discussion: Openness

- Questioning
- ≻ Experimentation
- $\triangleright$ ≻ Feedback
  - Skepticism
- ≻  $\geq$ Contextualization
- ≻ Ethical and moral practice
- ≻ Systemic approach
- Cultural specificity 5

consequence is that for interventions to be successful, media and education campaigns will need to be less simplistic and much more closely built on what has been learnt through research and prior experience. In addition, the discussion emphasized that much more effort would also need to be spent on message design to combat AIDS fatigue and on addressing myths and misconceptions.

• The question of 'language' and openness in communication was considered crucially important. As research is translated into practice and as results are evaluated it is critical that processes through which (scientific) knowledge is constructed be conducted and shared in a 'language' that can be understood by all.

### The scientific mind & HIV/AIDS – broadening our understanding ...

The mapping exercise made it possible for the group to begin to develop a better understanding of the multiple ways in which the 'scientific mind' can inform and strengthen HIV and AIDS prevention and mitigation. In this context the group concluded that the promotion of

the 'scientific mind' should certainly not be seen as a panacea for the current difficulties in effectively addressing HIV and AIDS. Rather, by bringing the scientific mind - and by extension other mindsets - into the discussion and analysis of the complex reality of HIV and AIDS, a unique and important opportunity is generated to both broaden and deepen our discussion and therefore understanding and to critically assess assumptions on which research and action are based. On the other hand, for those who live with the reality of HIV and AIDS, promoting the scientific mind may offer a possibility for an enhanced understanding and improved managing of the reality and impact of the disease. However, such efforts at promoting the scientific mind would have to be, as was highlighted above, informed by the context and reality, which includes the existence of multiple knowledge systems and a strong influence of (and often dissonance with) local beliefs and understanding.



Figure 3 - Discussing HIV/AIDS and the scientific mind

At a more specific level, the group concluded that:

- There are common key defining characteristics (or attributes) of the scientific mind (see box Page 2) – something which the Colloquium as a whole had devoted some time to. In the context of HIV/AIDS it was agreed that the characteristic of "openness" is a particularly important one. Openness allows those present to question and begin to understand different realities, to map and consider various interpretations and to be respectful of multiple realities and therefore multiple truths.
- Such attributes of the scientific mind are important in guiding understanding of contexts and making sense of the huge complexity and ambiguity that exists in an environment that is affected by HIV/AIDS. Promoting such attributes through research, education and communication initiatives could therefore be of critical importance.

- The scientific mind is of potential importance at multiple levels, such as at the level of policy makers, researchers, communities, religious structures, among others.
- This multiplicity of levels and interpretations is something that practitioners need to be keenly aware of. While the group felt comfortable talking with some certainty about their perspective regarding the group they belong to (i.e. that of practitioners), it was hesitant to do so for other groups. In order to do so, more insight into the nature of scientific thinking (and other modes of thinking) was considered essential. This was identified as an area where research would be important.
- There are key conditions for the existence and promotion of the scientific mind. They include:
  - Clarity with regard to political, religious, and other structures.
  - Openness of society and transparency of research agendas.
  - Access to and interaction with means of communication.
  - A commitment to bringing ideas into the public domain.
  - Availability, accessibility and sharing of data and information.
- Scientific thinking and action when situated within confined communities and within rigidly interpreted boundaries with strict rules can also be a real threat to progress and development. Promoting the scientific mind should thus also focus on ensuring that the premises on which scientific thinking and action are based are actively clarified, questioned and put to the test.

#### Towards a different approach ...

Understanding sexuality was identified in the group as a key aspect of HIV/AIDS prevention. However, to date most work on HIV prevention has considered sexuality from a narrow and western perspective, often with somewhat moral overtones. A different approach is needed where sexuality is understood in its cultural context and informed by the kind of 'thick description' used by anthropologists. In such a context it becomes crucially important that researchers and others ensure that 'own voices' be heard and listened to before designing HIV and AIDS interventions targeting sexual practices. As much as possible these interventions should be designed from within rather than from outside - a phenomenal challenge but an essential one!

# Building the scientific mind - pointers for further action and research ...

The discussion on HIV/AIDS and the scientific mind started from the premise that the lack of sustainable success in HIV/AIDS prevention and mitigation makes it profoundly necessary to critically question current practice and knowledge. The discussion by this group constitutes a first step in what we hope will be a growing and on-going process.

The discussion also resulted in the identification of a number of areas that the group felt it did not know enough about. These are formulated below as pointers for future research to be followed up by this group, by individuals from the group or by others who are interested in meeting this challenge.

- What types of thinking (problem solving) exist in different societies, particularly as concerns issues of health and behavior? How do such modes of thinking interact and complement/contradict one another and what can be learnt from these for education and communication campaigns?
- What would critical thinking and the scientific mind mean in different cultures and particularly in those that are affected by HIV/AIDS? What can we learn from these for our own practice?
- Does the scientific mind suppose only rational decision making and if so how does this relate to the more irrational decision making which often takes place when sex and sexuality are concerned? Are there areas that scientists define as being beyond their concern? Is the way in which science is being conducted subject to sufficient questioning?
- What else do prevention interventions destroy or threaten besides the virus? What unintended consequences do interventions have? To what extent does our practice take account of these?

## Extracts from papers produced by contributors to the panel:

"Science involves a combination of curiosity and skepticism and a search for understanding. In this way, lay people, like scientist are involved in scientific thinking ... Our understanding of human thought processes can guide our recommendations for intervention strategies with the aim of developing a scientific mind within the community."

Vimla Patel: The Role of Cognition in Changing Behavior: Understanding Safe Sex Practices and HIV Concepts

"A central question ... is how to differentiate between the nature of scientific thought as a way of systematizing our knowledge of the world and the political and economic systems in which it is now embedded"

Eric Ross: AIDS, the Scientific Mind and the Structure of Science

"One of the constituting elements of the 'scientific mind' is the questioning of 'any given truth' ... It is possible that the scientific mind may be helpful to interveners... (A) quality should then be added to the characteristics of the scientific mind: curiosity to know about the context in which is intervened"

Ralf Syring: The Importance of Meaning in Dealing with HIV

"While treatment may be available, the scientific mind must deal with the emotional health to ensure treatment is truly realized ...."

Cheryl Vince-Whitham: HIV/AIDS: The Impact on the Mental Health of Children and Caregivers: In what ways can the scientific mind and new mindsets improve the response to this neglected aspect of the pandemic?

NOTE: All papers are available at: www.learndev.org

- How might reality become different if communities rather than external agents were to decide about the basis for HIV/AIDS interventions?
- How can we facilitate a process of greater transparency and critical reflection among the 'intervenors'/'funders' in particular?

Finally, there was a strong sense that the discussion during the Colloquium on the relevance of the scientific mind for HIV/AIDS practice should be continued. This paper is a first key step in this direction.

#### Who participated:

The group on HIV/AIDS and the scientific mind brought together the following people:

- Laura Durnford, Radio Netherlands, The Netherlands
- Mathew Jukes, Imperial College of Medicine, UK
- > Paula Monjane, Fundação para o Desenvolvimento da Comunidade, Mozambique
- Corina Negrea, Radio Romania, Romania
- > Vimla Patel, Colombia University, USA
- Eric Ross, Institute of Social Studies, The Netherlands
- Jaap Swart, JOTA Foundation, The Netherlands
- Ralf Syring, Terre des Hommes, Mozambique
- > Tania Vergnani, University of the Western Cape, South Africa
- Cheryl Vince Whitman, Education Development Center, USA
- Muriel Visser-Valfrey, Learning Development Institute, France