

# Integration of work against HIV into the socio-cultural context in sub-Saharan Africa

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# Terms

- **Culture (descriptive):** Reference framework for the interpretation of reality which permits to understand phenomena and to attribute meaning to events and experiences.
- **Tradition:** Part of the culture which comes upon us from the past; collective memory.
- **Paradigms of health and disease:** autochthonous medicine – „Western“ or biomedicine

# History shapes culture

- Culture under threat → rigidity, lack of dynamism
- Socio-cultural fragmentation
- Unreliability of reference framework for interpretation of reality
- Remarkable durability/sustainability of cultural essentials

# Dialogue between persons and communities being part of different cultural contexts

- requires recognition that each party's interpretation of reality is culturally specific;
- does not imply the adoption of the other party's view, but requires mutual respect as a basis for negotiation on topics which are considered important by both, e.g. how to prevent the spread of HIV?

# What is our starting point in the dialogue?

- We believe that a disease is a disturbance of individual body functions, caused by dysfunctions within the body, by pathogenic agents entering the body or by accidents/violence (the concept of psychosomatics has been developed only recently in bio-medicine)
- We believe that AIDS is a disease caused by a virus;
- We know that at present we are not able to heal the infection with that virus;
- We know the ways of transmission;
- We know ways of prevention of transmission

# What can we assume to be the starting point in the dialogue for a member of a Bantu society?

- She believes that a disease is a disturbance of relationships in the family or in the community or with the spirits of the ancestors;
- She knows the symptoms of what nowadays is called AIDS since a long time and has other names for it;
- She knows that there can be different etiologies for this set of symptoms: It can be a punishment (originating from an evil spirit, from an angry ancestor, from „God“) or it can be sent by somebody else by way of witchcraft;
- She knows ways of healing in some cases, but not in all.
- She knows ways to prevent the disease.

# What needs to be learned for the dialogue

- the terms, metaphores, symbols... used to indicate what we call HIV and AIDS;
- the way how the phenomenon we call HIV or AIDS is dealt with in the community;
- attitudes and practices which represent a risk of transmission of the HIV;
- attitudes and practices which support prevention of the spread of HIV

# Possible topics of the dialogue

- **Diagnosis and referral;**
- **Complementarity of treatments;**
- **Incompatibilities of treatments;**



# Gender

- In sub-Saharan Africa more women than men are infected with HIV:
  - biological reasons
  - social reasons
- Challenges:
  - Is the distinction between „sex“ and „gender“ misleading?
  - Cultural rules which are subordinating women, may protect them from HIV-infection.