

The Importance of Arts-Based Methods in HIV/AIDS Research

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Editorial

The arts have always been essential to the HIV/AIDS movement as a tool of self-expression, social activism, and identity politics and arts-based methods within research, therapeutic practice, and community settings are on the rise. This is due to the special ways that the arts can elicit human experience and infuse our understanding of various aspects of life with uniquely powerful meaning and purpose. Another reason for the increased use of approaches like photovoice, story-creation, film-making, and dramatic productions is that they can challenge hegemonic systems of knowledge production that rely on standard methods of data collection, evaluation, and dissemination. Within the realm of HIV/AIDS research the achievements of immunologists, epidemiologists, and physicians are undeniable, however, their dominance within the publishing world, granting agencies, and knowledge translation has often occurred at the expense of qualitative researchers, activists, and artists, who have been documenting the movement and people's lived experiences within that movement since the beginning of the pandemic.

Since 2001, I have undertaken community-based projects with marginalized populations like women in sex work, gay men, and Indigenous populations and have also been involved with international HIV/AIDS prevention projects. These studies have been deeply meaningful, however, my arts-based work with HIV-positive women and men is truly unique in terms of the radical potential for transformation it generated for myself as well as the research participants. As part of an ethnographic study designed to illicit more nuanced understandings of the medication practices regarding HAART among poly-substance users, I employed the arts-based approach of body mapping. Body mapping is a complex approach that combines visual arts and therapeutic practice to guide participants in the artful communication about their embodied life experiences in ways that are safe and supportive. First developed as part of health promotion campaigns in the global south to document and support women's reproductive health knowledge [1,2], body mapping was adapted to the HIV-related field in the early 1990s in Uganda and later in South Africa [3-6]. It was my first time using an arts-based approach and I encountered numerous challenges as I sought to probe the depth, range, and kinds of data featured on the body maps (i.e., textual, symbolic, temporal), which measure 6 feet by 4 feet and are created by participants during intensive,

trauma-informed multi-day workshops. I also grappled with how to make sense of the transformative research experience and the issue of cultural appropriation. How and why is this project so powerful? What are the implications of using body mapping in Canada with women and men whose lives and gendered identities differed substantially from the original participants among whom the method was first created? The ways in which I examined these subjects of analysis, lived research experience, and cultural appropriation are the focus of *Remembering the Body: Ethical Issues in Body Mapping Research*, which was published earlier this year [7]. It stands as a unique contribution to the arts-based research literature, particularly that which pertains to HIV/AIDS and medication adherence. It also sheds unique light on the power of the arts more generally to create powerful and productive relationships that have deeply meaningful implications for those involved and which extend far beyond the realm of research and can be life-sustaining. My work also highlights important ethical tensions related to body mapping that may be useful to other researchers or community groups interested in refining or tailoring their own artful praxis.

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References

1. Cornwall A (1992) Body mapping in RPA/PRA. RPA Notes 16: 69-76.
2. MacCormack C, Draper A (1987) Social and Cognitive aspects of Female Sexuality in Jamaica. In: Caplan P (ed.). The Cultural Construction of Sexuality. Routledge, London. pp: 143-165.
3. MacGregor H (2009) Mapping the body: Tracing the personal and political dimensions of HIV/AIDS in Khayelitsha, South Africa. *Anthropol Med* 16: 85-95.
4. Morgan J, The Bambanani Women's Group (2003) Long Life: Positive HIV Stories. Double Story Books, Sydney, AU.
5. Solomon J (2007) Living with X: A body mapping journey in the time of AIDS. REPSSI, Johannesburg.
6. Ward N, Nabwire J, Magero J, Biryetega A (2006) Memory work. Learning from the Ugandan Experience.
7. Orchard T (2017) Remembering the body: Ethical issues in body mapping research. Springer Press, New York.

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