This chapter describes how by adopting a cultural theory of learning, members of a community-based research team deepened their understanding of the nature, pervasiveness, and contribution of everyday learning processes of people affected by HIV/AIDS in Nova Scotia, Canada.

Grassroots Response to HIV/AIDS in Nova Scotia

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Why is it that the things and events that are most ordinary and everyday are often those we least understand or value? We rarely attend to the simple processes that link us together, moment to moment, to generate the order of our daily lives—the little personal routines to negotiate and maintain our world (we wash and tidy, we walk and drive, we cook and eat); the multitude of conversations with others that link up our actions, build bonds of trust, shape our identities, and harmonize understandings; our continuous handling of material artifacts (gestures, words, objects, rules) that shape the space and time of our world. These everyday processes, so ubiquitous and part of the rhythm of life, form a hazy backdrop that many of us rarely ponder.

For the most part, the complex processes of everyday learning remain shrouded as part of this backdrop. In the Western world at least, our commonsense understanding of human learning has not come through investigating the day-to-day learning processes of people “in the wild” (to use Edwin Hutchins’s provocative phrase [1995]). Rather, longstanding and predominant “educational” theories have shaped our understanding of how humans learn.

By and large, these theories were developed by social scientists and educators dedicated to improving the administrative machineries of the school system and other bureaucratic social ordering processes. They developed their theories in relation to studies, not of the unformed, unruly, emergent learning processes of everyday life, but of the learning that is formed in contexts that tightly regulate the rhythm and flow of human interactions: experimental laboratories, clinics, factories, schools, military units, and training departments. As a consequence, these theories are in accord with education’s
top-down purpose of cultural control, but they offer insufficient insight into the bottom-up learning processes of humans “in the wild.”

The inadequacies of contemporary learning theory in accounting for everyday learning processes became particularly salient for me and community-based researchers from the AIDS Coalition of Nova Scotia (based in the city of Halifax) and Sharp Advice Needle Exchange (based in Sydney, Nova Scotia) as we struggled to understand the ways adult learning had contributed to the response of people in our province to HIV/AIDS.

Learning About HIV/AIDS

Twenty years ago, people in Nova Scotia were just beginning to experience the presence of HIV/AIDS in their midst. Rumblings in the media about a new and inexplicable “gay plague,” and disturbing rumors of people close by getting sick left many people feeling that “something very bad was just around the corner.” At this stage, the response to the disease was not coherent. People did not really understand what AIDS was or fathom how this rather threatening “media event” and its associated rumors could actually touch them. There were no community-based HIV/AIDS organizations, the medical system was unprepared and unresponsive, and people who were beginning to be directly affected did not yet know each other.

A decade later, the situation was dramatically different. The notion of HIV/AIDS (both for good and for bad) was all around. People in Nova Scotia knew much about the disease and, for far too many people, it was no longer a vague or distant media threat. Those who had contracted HIV or who were in commune with those who had, knew it deeply from close-in fighting with the disease. Moreover, somehow, from the bottom up, they had forged an ordered social response. People developed partnerships, alliances, communities, and institutions that effectively coordinated their actions to meet the host of challenges that HIV/AIDS brought into their lives. In the wild land of HIV/AIDS, the proliferation of grassroots ordering was so great that in ten short years, ordinary Nova Scotians had woven a rich ecosystem or “meshwork” of culture, relationships, personalities, and social organizations. Many had acquired a fantastic technical understanding of HIV/AIDS that in several instances equaled or bettered the understanding of the medical experts to whom they turned for diagnosis and treatment. They developed a nuanced understanding of the ways homophobia became intertwined with HIV/AIDS, with dehumanizing consequences. They built relationships of solidarity that enabled many to experience care, fellowship, and sustenance in times of desperate need. They forged personalities capable of asserting demands for better support and of maintaining hope in contexts of withering loss.

How in the world had this happened, we wondered? It certainly seemed that a lot of learning had transpired to generate the sophisticated HIV/AIDS meshwork that now abounds in our province. Interestingly, one of the things we soon discovered as we gathered (as academics and
community activists) to try to understand this better was that we shared a common set of “hunches” about everyday learning that would prove seminal in the formation of a long-term research project. These included the following:

Whereas deliberate educational initiatives played a minor role in fostering this learning, the primary processes that generated this emergent meshwork were not planned, controlled, or centrally organized. The meshwork appeared to be more the result of spontaneous, organic, everyday learning processes than the outcome of any large or coordinated educational initiative.

Community-based HIV/AIDS organizations in Nova Scotia have been deeply implicated in the everyday learning processes of people most directly affected by HIV/AIDS. The ways community-based HIV/AIDS organizations are linked to larger, more hierarchical or bureaucratic institutions shape their capacity to support everyday learning processes.

Each of these hunches seemed fairly obvious to all members of our research group. The difficulty was that none of us could provide much systematic evidence to substantiate them. We didn’t possess an explicit understanding of the nature, pervasiveness, or contributions of everyday learning processes. We didn’t understand the specific ways small community-based organizations or institutions enabled or constrained everyday learning processes. And we didn’t know much about the specific ways that the relations between community-based organizations and larger, hierarchical institutions enable or constrain everyday learning processes.

Moreover, as we would soon come to learn (in the broader literature of adult education and of the HIV/AIDS movement), very little has been written about everyday learning processes or about the sort of conditions that enable or constrain these learning processes. Everyday learning, it turned out, was a woefully “undertheorized” notion. As a result, we didn’t initially possess a learning theory that was adequate to help us understand the ways everyday learning generated the structures that had so miraculously emerged over two decades. Undaunted, we commenced our research in an exploratory, open-ended fashion using a community-based research process. We conducted interviews, held focus groups, and gathered archival data to learn more about the ways people in communities of practice learn about HIV/AIDS.

As our research unfolded, the gap widened between, on the one hand, what we heard, discussed, read, and witnessed about the learning processes that transpired as people struggled with the onslaught of HIV/AIDS and, on the other, the learning theories that were supposed to explain these processes. At a crucial watershed moment, with tensions growing in our research group and frustrations rising about our inability to offer a recognizable account of the ways adult learning had contributed to the response
of Nova Scotians to HIV/AIDS, we finally began to scrutinize some taken-for-granted assumptions about adult learning that we were presupposing in our analysis. Then, in a flurry, we happened upon a rich vein of exciting theoretical perspectives, mostly hailing from sociocultural psychology, that enabled us to understand more deeply the nature of everyday learning processes and the ways these processes generate social order.

**Individualistic and Cultural Theories of Learning**

One of the principal insights we gleaned as we explored theories of sociocultural psychology is that the adult education literature says little about everyday learning because of the predominance in our field of individualistic theories of learning (Hutchins, 1995; Wenger, 1999). Such theories typically characterize knowledge as bits of information that are carried in individual brains, with learning understood to be the process by which knowledge is transferred from person to person (often from a teacher or curriculum developer—an expert possessor of knowledge—to a learner, someone who is a novice and who does not possess knowledge). Individualistic theories of learning also characterize “successful” people (those who are productive, healthy, adjusted) to be diligent implementers of “positive” individual and organizational processes. Thus, through learning, individuals can integrate the knowledge that enables them to employ these positive processes—identified, of course, by expert holders of the most valid and valuable elements of knowledge.

Individualistic theories of learning restrict the breadth of adult education theory in many ways. Most adult educators identify the individual person as the “thing that learns” and devote great energies to understanding the nature (learner characteristics) of this learning thing, as a way to maximize their capacity to help adult learners absorb more information to become more knowledgeable, skilled, or productive. A great deal of effort has been expended in adult education to identify the factors that enable or constrain the information transfer process, including learner motivation (Wlodkowski, 1999), access to learning (Centre for Research in Lifelong Learning, 2002), and learning styles (Delahoussaye, 2002). Techniques developed to manage these factors include self-directed learning (Knowles, 1970), competency-based education (Blank, 1982), and program design (Nadler, 1982).

Working within this theoretical frame, educators barely acknowledge “noninstitutional” learning processes. When adult educators refer to the broad backdrop of learning processes (for example, as formal, nonformal, and informal), it is not based on any empirical study of the ways adult learning transpires in everyday life. It is for this reason that the individualized theories of learning afford limited insight into the ways people have learned about HIV/AIDS.

Luckily, as members of our research team struggled to gain a clearer sense of everyday learning processes, we happened into other areas of
thought that were not nearly so barren. Sociocultural psychology, we discovered, proved very helpful in our quest to understand HIV/AIDS learning. Drawing on contributions in these new and exciting areas of research, we began to frame a cultural theory of adult learning that opened exciting vistas of insight into the ways people have learned about HIV/AIDS in Nova Scotia. This new theory of learning provided a richer understanding of the way everyday learning simultaneously forms identities and reproduces culture. It helped us understand the ways adult learning processes are situated within broader social and cultural processes (social structures) that they energize and by which they are constrained. Also important, this new theory provided a basis for understanding and criticizing educational initiatives founded on theories of learning that consistently undervalue and undermine everyday adult learning processes.

Sociocultural psychology offers a discourse that challenges deeply held assumptions about humans and their social structures and offers a unique and comprehensive view of human learning processes. For instance, cultural psychologist and primatologist Michael Tomasello (1999) relates that the human capacity for shared attention, which emerged around forty thousand years ago and emerges at around nine months of age for contemporary human beings, enables us to organize ourselves into intersubjective learning entities that Etienne Wenger (1999) identifies as “communities of practice.” According to Tomasello, the historical emergence of our capacity to learn collaboratively made it possible, for the first time, for people to forge identities, communicate shared understandings, and (of critical importance) to weave ever more complex cultural patterns and social structures over time. Tomasello characterizes this uniquely human learning capacity as “the great ratchet effect of culture” (adapted from p. 5).

Sociocultural psychologist Jaan Valsiner (1998) contends that “human personality is a cultural process—first, at the level of the constant construction of personal culture by the developing person, and, second, as a way of reflecting upon one’s self as socially suggested by the collective culture” (p. 40). According to Valsiner, personality emerges as the result of a co-constructive process that transpires between the developing person and his or her constantly emerging culture.

Wenger (1999) further argues that the kind of learning that makes humans unique is not a passive act of knowledge consumption that happens inside the person. He contends that learning is much better characterized as a process of social participation in communities of practice, in which people negotiate and renegotiate the meaning of shared experiences in an ongoing, collaborative, culture-producing cycle. Learning occurs when people in a community of practice draw on a common stock of established meanings to negotiate new understandings that become the basis for coordinated action (practices), senses of self (identities), and senses of belonging (community). All these unfolding attributes of intersubjectivity (meaning, practice, identity, and community) become the basis for subsequent moments of learning.
Human culture can be produced and reproduced only in contexts within which people can participate in negotiating meaning. Communities of practice draw on the meaning-making accomplishments of their forbears with each new act of cultural learning. And with each act of learning, they produce and reproduce some aspect of culture. As James Wertsch (1998) relates, cultural learning is enabled and constrained by the presence and nature of material artifacts produced by evolving webs of communities of practice. All of this enables us to understand how the learning accomplishments of a community of practice at one moment in history establish that community’s subsequent cultural learning conditions.

Important for our research is that the order-producing capacities of cultural learning extend far beyond the boundaries of specific communities of practice. Communities of practice are not impermeable things, but are themselves unfolding processes, in constant exchange with other communities of practice. An important feature of Wenger’s theory (1999) is that simple acts of cultural learning create ever larger and more complex social and cultural structures. As Leslie Brothers (1997) contends, cultural learning in communities of practice is “the humble loom that ceaselessly weaves the fabric of culture” (p. 99).

As communities of practice learn, they produce specific meanings that are not shared by other communities. The boundaries of a community of practice become dynamic points of continuity and discontinuity within a proliferating and differentiated map of meaning. Sharing across boundaries by participating in multiple communities of practice and other forms of boundary contact produces a growing cultural meshwork of interconnected communities of practice, as we had observed so clearly in our empirical investigation of the HIV/AIDS context in Nova Scotia. Meaning can flow in this meshwork only through learning processes that create and recreate common understandings. Knowledge, in this view, is not an object that can be transmitted from one human brain to the next. Rather, knowledge is a state of knowing that is culturally learned in an intersubjective process of negotiating meaning.

Learning About HIV/AIDS in the Nova Scotia Meshwork

Wenger (1999) and others offer important insights that help us understand how people affected by HIV/AIDS in Nova Scotia learned about HIV/AIDS. This insight came at a good time. In the process of conducting our research, we had collected a massive amount of very rich data. The sixty interviews and three focus groups we had conducted yielded fifteen hundred single-spaced pages of transcription. Our research office overflowed with boxes of newspaper clippings, organizational documentation (such as meeting minutes and annual reports), books, reports, training manuals, policy documents, and pamphlets. The view from atop the mountain of data began to clear for us as soon as we began to understand
everyday learning as a cultural process in which people negotiated meaning and constructed their identities in communities of practice. We revisited our transcriptions with a vengeance, using codes such as “communities of practice,” “negotiation of meaning,” “mutual engagement,” “boundaries,” and “brokering.” The result was a rich collection of quotations (over sixteen hundred) telling powerful stories of people’s engagement in the negotiation of their own meaning through the interaction of participation and reification.

A particularly compelling story is found in the accounts of the formation of the Nova Scotia Persons with AIDS Coalition (NSPWAC). The first “AIDS service organization” to emerge from the early days of the HIV/AIDS movement in Nova Scotia was the Metro Area Committee on AIDS (MACAIDS).

Persons with AIDS (PWAs) had been meeting in a support group created under the auspices of MACAIDS and the Victoria General Hospital in Halifax. Despite MACAIDS’s concern for the needs of those affected by HIV/AIDS, a number of the support group members voiced increasing frustration with the level and types of support they were receiving. Here are the words of one of the original members of this small “community of practice” describing their struggle to maintain their sense of identity: “They used to have discussions about who owned the PWAs. We really didn’t feel like being owned. We were intelligent people, it was a whole new phenomenon, we were an independent group of people. We were thinking, living, intelligent people, not this client group that everybody wanted. We were fairly independent people who had different kinds of lives and that is why we formed our organization.”

In mid-1988, a core group of seven or eight members created the Nova Scotia PWA Coalition (NSPWAC). NSPWAC bore little resemblance to a “formal” organization in its early days. Business was conducted around kitchen tables and with almost nothing in the way of resources. Members were united in their passion to be an effective voice for PWAs. The coalition’s four goals were support, advocacy, education, and empowerment.

When members of the NSPWAC presented a brief to the newly formed Nova Scotia Task Force on AIDS, they had what one community member later described as a defining moment: “Like we were able to organize as a group of PWAs and go and present this brief to these people who want to sit there and think that they’re going to know more about this than we do. Initially there was like, ‘I’m not so sure we can do this’ and then there was the, ‘yes, we can!’ Organizing the brief and presenting it was very invigorating. . . . It was talked about afterwards like this is one of those moments in which, yes, we can do it.”

This active engagement by the NSPWAC members led to the creation of a landmark document: Living with AIDS—the Reality (Nova Scotia PWA Coalition, 1988). It gave voice to the PWAs at the task force hearings; more important, it contributed to the formation of a strong sense of identity that denounced the commonly held view of “AIDS victims.” As the report states,
“We do not choose to see ourselves as victims with that term’s connotations of powerlessness and defeat” (p. 2).

Working from the perspective of a cultural theory of learning, our research team was able to understand the ways that small acts of negotiating meaning in a community of practice like the NSPWAC were able to generate a history of learning of great consequence. The men in the group confronted incredible and devastating circumstances. Together they were able to generate new meanings to help interpret and understand different aspects of their disease. They were able to develop a wide range of meaningful and effective practices, and engendered powerful new identities equal to the challenges of AIDS.

By 1990, members of the NSPWAC began to reach out to groups beyond their own community of gay men. In an October 7, 1990, interview, the newly appointed chair of the NSPWAC, Eric Smith, stated, “I guess the groups we’re looking at first are the black community, the Native community, women and [intravenous] drug users.”

Our data contain stories from communities of practice within all these groups. The Women and AIDS Project is one example. One participant described how she had been asked by a member of the NSPWAC to cofacilitate a support group for women living with HIV. The minutes from the first meeting of the Women and AIDS Advisory Body succinctly capture the ways these women negotiated the establishment of a new organization: “A group of women in the community began to meet to discuss their concerns about the lack of support services, education and resources around women and HIV/AIDS in the community. It was decided that an ad hoc group of women in the community should be formed and a proposal for funding submitted. The funding this new group (the Women and AIDS Project) received enabled them to carry out a provincial needs assessment, develop a manual and training, start a positive women’s network, and carry out a follow-up research study on participation.”

Not unexpectedly, participating in this community of practice became an important context where HIV-positive women could negotiate their own meanings. Here is one woman’s comment after participating in an HIV-positive women’s retreat in 1994: “I’m taking home with me confidence in myself, my husband and my girls that together we can manage knowing there are others out there who know what I’m going through. We are not alone!”

**The Wonder of Everyday Learning**

The great value of a cultural theory of learning is that, in questioning traditional forms of knowledge and of learning (particularly the idea that learning occurs best in formal settings), it opens us to understanding the powerful ways learning transpires in our everyday lives. It helps us see “the humble loom” of cultural learning and to understand its capacities to
produce deep meanings, effective practices, strong identities, and resilient communities. It challenges us as adult educators to rethink our understanding of adult education as a technology for controlling learning and to imagine other ways that we might participate in the weaving of the fabric of our culture.

Perhaps one of the most important things we learned from our study is that the everyday learning of people directly affected by HIV/AIDS has contributed significantly to our collective response to the disease in Nova Scotia. The reason for this, we now realize, is that everyday learning processes are the very engine of cultural, social, and personal reproduction. Without their stunning capacities for everyday learning, people in Nova Scotia would not have been able to make sense of HIV/AIDS; would not have formed relationships with others to sustain them in times of despair; would not have become the wise, caring, competent, and courageous people whom we met in our research; and would not have developed the effective and meaningful practices that have worked so well to address the challenges of HIV/AIDS in our small part of the world.

References


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