

Recent dissertations on health, culture and society

This new section will inform you about PhD dissertations in the broad field of medical anthropology, recently defended at Dutch and Belgian universities and about dissertations by Dutch or Belgian authors abroad. If you want to be included in this section, contact Erica van der Sijpt: e.vanderSijpt@uva.nl.

Vera Nierkens

Smoking in a multicultural society: implications for prevention. Smoking behaviour and its correlates among Turkish, Moroccan and Surinamese people aged 35-60 in the Netherlands (174 pp.)

Defended at 11-04-2006
University of Amsterdam

Summary — Smoking is a major cause of cardiovascular diseases and several types of cancer. Interventions to promote quitting have appeared to contribute to a considerable decrease in smoking prevalence. However, less is known about smoking behaviour and its determinants among ethnic populations. The aim of this study was to gather information about smoking behaviour and its socio-economic, cultural and motivational determinants that is necessary to develop smoking prevention interventions for Turkish, Moroccan and Surinamese people aged 35-60 in the Netherlands.

Data were collected in structured face-to-face interviews among 385 Turkish, 1072 Surinamese and 316 Moroccan people. Our results showed that the smoking rates vary between 63% among Turkish men, followed by Surinamese 53.5% to virtually zero percent among Moroccan women. We also found indications that the immigrant populations were in earlier stages of the 'Worldwide tobacco epidemic' than the ethnic Dutch: many men smoke and among women especially higher educated women smoke. This pattern may change by acculturation processes. Further, we found that the same motivational factors explained smoking cessation, but the specific beliefs differed partly. On the basis of these results we conclude that interventions to promote a non-smoking behaviour culturally targeted to ethnic populations are needed.

Full-text is not yet available online, but a reference to the dissertation can be found on <http://dare.uva.nl/record/188167>

The dissertation can be ordered for free by sending an e-mail to Vera Nierkens (v.nierkens@amc.uva.nl).

Mariet Paes

Wijkgezondheidswerk: een studie naar 25 jaar wijkgericht werken aan gezondheid in Den Bosch-Oost (357 pp.)

Defended at 11-04-2008
University of Amsterdam

Summary — The purpose of this qualitative case study is to unravel a more than 25 years existing practice of health community work in Den Bosch-Oost. This empirical study reveals that the workers (= professionals and volunteers) share a variety of knowledge about the community and about the approach of social economic health differences. By knowing what is needed the workers can set up new services for the neighbourhood. Working together in those activities they provide a lot of networks in the neighbourhood. In some cases it is explored how social networks in the community contribute to the health of people. We see that social contact makes people stronger and influences their mental and physical health. Long lasting relationships between professionals, volunteers and the community are important to gain trust and confidence from the inhabitants. Another important element is the double actorship. People in the community are not passive objects, but active persons who are able to improve their health themselves. The inspiration and commitment of the workers in Den Bosch-Oost is driven by their values and that is why they continuously devote themselves to the community based health work for many years. The case study of Den Bosch-Oost does not provide us a blueprint of the community based health approach. The way this practise is studied arouses curiosity about the way other neighbourhoods deal with the complexity of community based health work.

Full-text can be found on <http://dare.uva.nl/record/270817> or http://www.prvMZ.nl/index.php?id=161&backPID=161&productID=122&pid_product=161&detail

The dissertation (15 €) can be ordered at the PRVMZ website (see link above).

Pauline Oosterhoff

Pressure to bear. Gender, fertility and prevention of mother to child transmission of HIV in Vietnam (196 pp.)

Defended at 13-11-2008
University of Amsterdam

Summary — Vietnamese cultural notions concerning motherhood are a double-edged sword that can both circumscribe and empower HIV+ women in their ability to make choices at different moments in their lives and in relation to the state-provided PMTCT program. The HIV epidemic in Vietnam is still concentrated among male intravenous drug users, but the epidemic is spreading to women and their children. Young women are under

pressure to get married and have (male) children within the first year of marriage, leaving them with limited options to protect their bodies during heterosexual contact. The action-research reported in the thesis followed HIV+ women and their families over a period of time, during a wide variety of occasions. In addition to weekly program observations hard economic, social and medical data were collected at a minimum of 6-month intervals. This method allowed for a detailed examination of the process of (dis)empowerment of these women as individuals and as a group. While women are at risk of contracting HIV when trying for a child, being a mother also provides women with status and power in the family. The dual effects of HIV as a disease and the new reproductive medical technologies both reinforce gendered inequities and provide opportunities for women to resist and transform traditional gender roles. Once women are aware of their HIV status they take direct action to change and improve their lot.

Full-text can be found on <http://dare.uva.nl/record/284914>

The dissertation (15 €) can be ordered at MCNV, by sending an e-mail to Karin Vlug (kv@mcnv.nl).

Trudie Gerrits

Clinical encounters. Dynamics of patient-centred practices in a Dutch fertility clinic (390 pp.)

Defended at 10-12-2008

University of Amsterdam

Summary — What makes many people with fertility problems so persistent in their use of fertility treatment (and IVF in particular) once they have visited a fertility clinic? What makes it so difficult to jump off the roller coaster of treatment? And in particular, in what way does visiting a fertility clinic – and the experience of clinical encounters – affect people in terms of the (further) medicalization of their fertility problems? These were the questions that formed the starting point for the study presented in this thesis, in which I portray the daily practices of a Dutch fertility clinic (constituting hospital ethnography) and provide insight into the situated accounts of couples visiting this clinic. Further, this thesis examined – inspired by Foucauldian notions on the workings of disciplinary power – how these clinical encounters affect the experiences and views of people with fertility problems and their (further) use of fertility services and technologies. By looking in such detail at the complex and dynamic relationship between clinical practice and people's experiences, this thesis intends to contribute to an understanding of the complexity of women's and men's responses to reproductive technology, and more broadly, seeks to advance the theoretical understanding of processes of medicalization in clinical practice.

Full-text can be found on <http://dare.uva.nl/record/290312>

The dissertation (15 €, student-fee: 10 €) can be ordered by sending an e-mail to Trudie Gerrits (g.j.e.gerrits@uva.nl) or by phoning +31 20 525 7375.

Grace Akello

Wartime children's suffering and quests for therapy in northern Uganda (356 pp.)

Defended at 20-05-2009
Leiden University

Summary — This book is based on an ethnographic study during an ongoing civil war in northern Uganda. It examines children's suffering as well as their attempts to restore normality. Data shows that there is a high burden of illnesses among the children. Although infectious diseases constitute the highest proportion of this illness burden, complaints related to emotional distress were also mentioned. This study describes children's short-term curative approaches to these illnesses, and the ensuing misuse of, and dependencies on, pharmaceuticals. It further raises important epistemological and methodological discussions regarding the topic, and works out a theoretical framework which combines perspectives on child agency with political, economic and gender issues. Although children are approached as social actors and their perspectives are privileged, their quests for therapy are shown to be influenced by many other factors as well. The focus therefore lies on children's vulnerability within existing healthcare structures and life conditions. Through this focus, this book critiques the narrow policies regarding healthcare interventions for children above five years, and underscores the importance of addressing wider socio-economic factors in preventive approaches to infectious diseases and emotional suffering.

The dissertation (15 €) will be published in the African Studies Collection of the African Studies Centre (ASC) in Leiden, in June 2010. From then onwards, the full-text of the book will also be available on the website of the African Studies Centre (www.ascleiden.nl/Publications/).

John Kinsman

Pragmatic choices: research, politics and AIDS control in Uganda (252pp.)

Defended at 04-09-2009
University of Amsterdam

Summary — Uganda is Africa's best known AIDS success story. In *AIDS Policy in Uganda*, John Kinsman presents a comprehensive and accessible history of the country's epidemic. The book explains how the success story has unfolded, and critically examines the influences and processes that have stood behind it. Using an extensive review of the literature

and a wide range of interview material – from the UN in Geneva, to the Ministry of Health in Kampala, all the way to volunteer field workers in rural Masaka district – the book shows how the key strategic AIDS policy decisions have been shaped. Officially, Uganda has followed the global trend and pursued an ‘evidence-based’ AIDS control policy. However, the book shows that, aside from a handful of specific cases, evidence has played only a limited role in policy and programmatic development over the course of the epidemic. Rather, decisions have been driven by the prevailing national and international ideological context of the day, and by a pragmatism based on what is likely to be feasible to implement, as well as what will attract money and/or political capital from abroad.

Full-text can be found on <http://dare.uva.nl/document/110229>

An elaborated version of this dissertation, entitled ‘AIDS Policy in Uganda: Evidence, Ideology, and the Making of an African Success Story’ (288 pp.), will be published in August 2010 by Palgrave Macmillan (New York) and can be ordered at a cost of \$85. However, the book is also currently available for pre-order on different Amazon websites (www.amazon.com) for less than \$60 (US-website: 53\$, Canadian-website: 48\$).

Marian Tankink

Keeping silent: A medical anthropology study on how refugee women in the Netherlands, originating from Afghanistan Bosnia Herzegovina and Southern Sudan, deal with experiences of war-related sexual violence (255 pp.)

Defended at 09-09-2009
Leiden University

Summary — It is now well known that sexual violence is part of war and in many wars even a major strategy of combat. Less is known about its long term consequences. This thesis stresses the long-term consequences for sexually violated women and their families. Sexual violence is not only a dramatic experience – both physically and psychologically – for individual women, but also an attack on their social groups. Since women are identified with the reproduction of new life and are seen as the guardians of the survival of the group, sexual violence inflicted upon their bodies is also inflicted upon their husbands, children, extended families and the social group they are part of. This infliction has long term consequences, which the women themselves try to tone down. Since they fear that their own subjection to rape might destroy their family ties, they keep silent. Their silencing thus prevents not only their own stigmatization and social exclusion, but also the stigmatization of their families. In settings where public prosecutions can cause new forms of violence, lawyers and health workers should therefore take into account the situation of these women and their reasons for keeping silent.

Full-text will be made available for public only later.

This dissertation has been published in Dutch by Pharos (Utrecht, the Netherlands) in 2009. It can be ordered (28,50 €) by sending an e-mail to Pharos (www.pharos.nl or bestel@pharos.nl) or by phoning +31 30 234 9800.

René Gerrets

Globalizing international health: the cultural politics of 'partnership' in Tanzanian malaria control (505 pp.)

Defended at 10-09-2009
New York University

Summary — This thesis investigates the recent rise to dominance in international health of 'partnership', an organizational form that has become prominent in infectious disease research and control efforts in low-income countries around the world. Fuelled by substantially increased donor funding for reducing the burden of communicable diseases in poor countries, the spread of partnership – a notion connoting mutuality and equity – occurs in contexts characterized by profound disparities in power and resources. These contrasts are particularly pronounced in international health. This historically-grounded ethnographic examination of the partnership phenomenon poses two interrelated questions: How does partnership happen? How do we study the processes through which partnerships form and function?

I address these questions by examining a partnership engaged in malaria research and control in Tanzania. By tracking knowledge practices of different parties, I trace shifting contours and dynamic interactional structures of a partnership. I show how the term vanishes from the discursive plane yet appears to remain operative at the level of practice. Especially at the lower echelons, it becomes enmeshed into patron-client dynamics. Finally, I examine how sociocultural conventions and language practices during data collection shape, even 'distort,' expert knowledge about malaria.

Full-text and hard copy will be made available for public only later.

Christine Dedding

Delen in macht en onmacht: kindparticipatie in de (alledaagse) diabeteszorg (293 pp.)

Defended at 30-09-2009
University of Amsterdam

Summary (in Dutch) — Delen in macht en onmacht biedt inzicht in het alledaagse leven van kinderen met diabetes en in de machts- en afhankelijkheidsrelaties tussen kinderen, ouders en behandelaars. Het kernargument is dat kinderen deel uitmaken van praktijken,

ook van die praktijken waarin hun perspectieven, kennis en ervaring niet actief worden verwelkomd en (h)erkend. Mede door kinderen met diabetes in het onderzoek zelf te betrekken is diepgaand inzicht verkregen in: de leefwereld en competenties van kinderen, de mate waarin kinderen en volwassenen met elkaar kunnen samenwerken en wat een goede samenwerking in de diabeteszorg in de weg staat. Bovendien heeft het participatieve traject de meerwaarde van kindparticipatie zichtbaar gemaakt voor de diabeteszorg en voor gezondheidsvoorlichting aan kinderen.

Full-text can be found on <http://dare.uva.nl/record/315586>

An elaborated version of this dissertation, entitled 'De mondigheid van kinderen uit zich vaak in stilte; kindparticipatie in de diabeteszorg' will be published later this year by Bohn Stafleu van Loghum (Houten, the Netherlands).

The dissertation (15 €) can be ordered by sending an e-mail to Christine Dedding (c.w.m.dedding@uva.nl)

Jolanda Habraken

Palliative care needs of patients with advanced COPD. An exploration of illness experiences (143 pp.)

Defended at 18-11-2009

AMC, University of Amsterdam

Summary — Chronic Obstructive Pulmonary Disease (COPD) is a chronic, potentially fatal progressive condition of the lungs. Little is known about the problems and demands for care in patients with end-stage COPD. The central aim of this study was therefore to explore and better understand the problems, needs and preferences of patients with end-stage COPD. Health-related quality of life (HRQOL) questionnaires were used to answer the research question, together with in-depth semi-structured interviews with end-stage COPD patients. We found that end-stage COPD patients experience poor HRQOL comparable to or worse than that of advanced lung cancer patients. These HRQOL scores deteriorate steadily over time when measured longitudinally. During the interviews it became clear that patients were reluctant to express a wish for help, despite the severe problems they encountered in their daily lives. We found that in order to express a wish for help, patients should regard their limitations as abnormal and should realise that there are possibilities to improve their situation. However, this was not the case with the patients interviewed. These results suggest that care in this stage should focus on improving daily life instead of just aiming to improve the functioning of the lungs. Living with end-stage COPD may be compared to athletes improving their achievements. Likewise, health care professionals involved in caring for COPD patients may be compared to coaches. We therefore recommend a supportive coaching approach in end-stage COPD.

Full-text can be found on <http://dare.uva.nl/record/321552>

A few free copies of the dissertation are still available and can be ordered by sending an e-mail to Jolanda Habraken (j.habraken@uvt.nl).

Maria Fernanda Olarte Sierra

Achieving the desirable nation. Antenatal testing and abortion in Colombia. The case of amniocentesis (247 pp.)

Defended at 19-01-2010
University of Amsterdam

Summary — Through a medical anthropological, and STS approach I look at how antenatal genetic testing, specifically amniocentesis, relates to, informs, shapes and is shaped by abortion de-penalisation and practice, due to foetal malformation in Colombia. It is an ethnographic study, based on Bogotá, Colombia, in which I conducted 7 months of hospital ethnography in a clinic's department of maternal-foetal medicine. And an extensive archival research on the history of eugenics and public health in Colombia, in order to find the roots of specific forms of discrimination against particular groups of people (in this case people with cognitive differences). It is a research about discrimination based on genetic information. The fact that specific genetic conditions are considered as undesirable by prospective parents, clinicians, geneticists, and the civil society speaks eloquently about a social imaginary held about the desirable Colombian nation.

Full-text can be found on <http://dare.uva.nl/en/record/328134>

The dissertation (22 €) can be ordered by sending an e-mail to Maria Fernanda Olarte Sierra (olartesierra@gmail.com).

Benson Mulemi

Coping with cancer and adversity. Hospital ethnography in Kenya (262 pp.)

Defended at 02-03-2010
University of Amsterdam

Summary — Many people associate hospital treatment with 'getting better', the restoration to health and normal life. The onset of a lifethreatening disease such as cancer, however, can transform the hospital into a place of constant struggle and suffering. Hospitalisation in this sense coincides with the deterioration of patients' and their families' overall well-being. Drawing on twelve months of ethnographic research in a cancer ward in Kenya, this monograph shows that patients' suffering should be viewed within the context of a wider spectrum of adversity. The book demonstrates the ambiguity of a hospital stay and treatment, showing how a hospital can both alleviate as well as increase human suffer-

ing. The author advocates patient-centred hospital ethnography as a way to improve the understanding of cancer patients' needs, both medical and nonmedical, as they struggle to restore their wellbeing.

Full-text can be found on <http://dare.uva.nl/record/328472> or <https://openaccess.leidenuniv.nl/dspace/handle/1887/15029>

The dissertation has been published in 2010 in the African Studies Collection by the African Studies Centre (ASC) in Leiden. It can be ordered (15 €) by sending an e-mail to the African Studies Centre (asc@ascleiden.nl) or at the website <http://www.ascleiden.nl/GetPage.aspx?url=/shop/item4790>.

Christine Böhmig

Ghanaian nurses at a crossroads. Managing expectations on a medical ward (289 pp.)

Defended at 02-03-2010
University of Amsterdam

Summary — Nursing as a profession is practiced worldwide in hospitals, clinics, health centres, and individual homes. While there are universal definitions of nursing and universal criteria for training student nurses, the working reality that nurses face differs widely. This ethnography provides insights into the daily routine of nurses on a medical ward in a teaching hospital in Ghana. Next to a description of historical developments of nursing, it analyses nurses' motives, the nature of their work, and power relations on the ward. The study also looks at perceptions of nursing in Ghanaian society. Having been trained in western concepts of care, the nurses on the ward are confronted with demands and challenges not covered in their educational training such as personnel shortage, limited equipment and financial restrictions. In addition, tradition, religion and the notion of respect influence the work of nurses. By reflecting on this profession and its position in the health care setting, the author shows how notions of health, care and death are shaped by the surrounding culture.

Full-text can be found on <http://dare.uva.nl/record/330309> or <https://openaccess.leidenuniv.nl/dspace/handle/1887/15028>

The dissertation has been published in 2010 in the African Studies Collection by the African Studies Centre (ASC) in Leiden. It can be ordered (15 €) by sending an e-mail to the African Studies Centre (asc@ascleiden.nl) or at the website <http://www.ascleiden.nl/GetPage.aspx?url=/shop/item4789>.