

## ***Recent dissertations on health, culture and society***

This section informs 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](mailto:e.vanderSijpt@uva.nl).

### **Marjolein Muys**

*Substance use among migrants. The case of Iranians in Belgium (192 pp.)*

Defended at 06-05-2008  
Ghent University

*Summary* — Research on substance use among newcomers in Western countries has long been dominated by the medical paradigm. Their drug consumption has been generally conceptualised as a means of self-medicating migration-related problems. However, this qualitative study among the Iranian community in Belgium shows that migrant substance use is more complex. Changing (social) circumstances after migration create new contexts of use. Through mechanisms of social exchange, people may get acquainted with new substances, new routes of ingestion or new motives for substance use. This book is based on participant observations and open interviews with 129 Iranian migrants in Belgium. It provides information on both pre- and postmigration patterns of use among this population, emphasising the importance of their own perspective (the insider's view). Covering a wide range of substances, focusing on opium, tobacco and alcohol, as consumed by Iranians from pre-Islamic times to present day, this book illustrates how different cultures have defined drugs across the ages.

Full-text is not available online.

The dissertation (21,95 euro) has been published by ASP VUBPress in Brussels and can be ordered on their website:

([http://www.aspeditions.be/article.aspx?article\\_id= SUBSTA540Z](http://www.aspeditions.be/article.aspx?article_id= SUBSTA540Z))

**Miranda van Reeuwijk**

*Because of temptations: children, sex and HIV/AIDS in Tanzania (225 pp.)*

Defended at 22-06-2009

University of Amsterdam

*Summary* — Children's sexual behaviour is a controversial issue. Stories of sugar daddies, survival sex, abuse, and teenage pregnancies have provoked much moral debate in both developed and developing countries. Yet due to the sensitive nature of the topic, little research has been done that actually provides insight into how children themselves perceive and experience sexuality and sexual relationships. In this provocative book, the author explores the reasons why children in Northwest Tanzania engage in sex or abstain from it and what sex and relationships mean to them. She innovatively involves children as co-researchers and reaches an in-depth understanding of what is at stake for children in the area of sexual behaviour. The author critically reflects on why so many prevention programmes and interventions fail to change sexual behaviour and what is needed to encourage the well-being of children and adolescents.

Full-text can be found on <http://dare.uva.nl/record/305838>.

A slightly revised version of the dissertation (35 euro) has been published by AMB Publishers in Diemen and can be ordered on their website:

([www.amb-press.nl/Webwinkel-Product-3465393/Miranda-van-Reeuwijk--Because-of-temptations](http://www.amb-press.nl/Webwinkel-Product-3465393/Miranda-van-Reeuwijk--Because-of-temptations)).

**Carine Plancke**

*"J'irai avec toi": Désirs et dynamiques du maternel dans les chants et les danses punu (Congo-Brazzaville) (600 pp.)*

Defended at 12-05-2010

KU Leuven

*Summary* — This PhD-thesis, bordering anthropology, gender- and performance studies, approaches the singing and dancing of the Punu people as bodily shared, affect-loaden and auto-propulsing events that through a collective performance give way to a regeneration of self and life-world. A multiple approach, phenomenological, praxiological and matrixial, sheds light on these practices from different angles. According to the phenomenological perspective of Merleau-Ponty, the song- and dance-events are put to the fore as they are very concretely and bodily lived through. The encountering with the co-dancer, the emergence of movements and sounds in this encountering and the sensing of it as well as the undulating movement of inspiration and its affective modulations

are explored. The praxiological, bodily centred approach of Devisch further enables us, through a socio-cultural contextualisation of the different song- and dance-practices, to highlight their regenerative power as they weave body, group and cosmos. It also points out where this resourcing strength comes from, i.e. from the link with the waterspirit-universe. This maternal world and the already explored dynamics of the song- and dance-events, in touch with this universe, are finally reconsidered by means of the matrixial vision of Ettinger. Indeed, in her theory the intra-uterine experience is a model to work out a very specific borderlinking transsubjectivity.

Full-text can be found on <https://lirias.kuleuven.be/handle/123456789/266698>.

The dissertation (20 euro) can be ordered by sending an e-mail to Carine Plancke: ([carine.plancke@gmail.com](mailto:carine.plancke@gmail.com))

### **Kathleen Mortier**

*Creating supports for children with disabilities in general education classrooms: from and expert model to a partnership model (233 pp.)*

Defended at 07-10-2010  
Ghent University

*Summary* — This dissertation examines how students with an intellectual disability can engage, interact, and learn in meaningful ways in a general education classroom in Flanders, and what kind of supports are needed to facilitate this academic and social participation. It shows that this question is a complex one, because it is embedded in a diverse society with a particular history, which influences the way disability-identity is construed and equal opportunities are realized. Central to this study are the lived experiences and meaning-constructions of students, parents, teachers, and other stakeholders in inclusive education in Flanders. Building upon social learning theory and a theoretical framework focusing on ‘the democratization of knowledge/expertise’, the author concludes that good education for children with an intellectual disability *is* possible within general education classrooms. Different forms of support do, however, improve inclusion and have a positive effect on participation, involvement, and learning processes of children with intellectual disabilities. Support should be developed, implemented, and evaluated through collaboration between parents, teachers, and children in ‘communities of practice’. It is of major importance to give parents and children a voice in this process.

Full-text can be found on <https://biblio.ugent.be/person/801001676238>.

The dissertation can be ordered for free by sending an e-mail to Kathleen Mortier: ([kathleen.mortier@ugent.be](mailto:kathleen.mortier@ugent.be)).

## **Murat Can**

*Wel thuis! De beleving van migrant zijn, psychische gezondheid en kwaliteit van leven bij Turken in Nederland (324 pp.)*

Defended at 19-11-2010  
University of Tilburg

*Summary (in Dutch)* — De psychische gezondheid van Turken in Nederland is slechter dan van autochtone Nederlanders en van Turken in Turkije. Bovendien hebben Turkse vrouwen vanwege hun kwetsbare positie in de patriarchale Turkse gemeenschap te maken met een slechtere gezondheid en kwaliteit van leven dan mannen. De auteur toont aan dat deze precare gezondheidssituaties samenhangen met het gevoel van 'migrant zijn' en het proces van ontworteling en aanpassing. Turken in Nederland hebben vaak het gevoel alleen als migrant gezien te worden, nergens thuis te horen en krijgen te maken met negatieve gevoelens van verlies en verarming. De auteur wijst erop dat beleidsmakers en beleidsuitvoerders maatregelen zouden moeten nemen om de resulterende achterstand, achterstelling en afstand op te heffen. Hij pleit daarbij voor 'herworteling': Turkse Nederlanders kunnen dat zelf in gang zetten door het proces van bi-culturaliteit: het hechten aan en thuis voelen in twee culturen. Beleidsmakers zouden meer aandacht moeten richten op het uitvlakken van de achterstand en migranten meer betrekken bij de samenleving. Geestelijke gezondheidsorganisaties als de GGZ zouden meer aandacht moeten hebben voor interculturalisatie in de zorg: zich meer bewust moeten zijn van cultuurverschillen in hun omgang met mensen van allochtone afkomst.

Full-text is not available online.

## **Maurits Sloots**

*Drop-out from rehabilitation in non-native patients with chronic non-specific low back pain (165 pp.)*

Defended at 3-12-2010  
VU University

*Summary* — The last decades the Dutch rehabilitation sector has been confronted with growing numbers of non-native patients. The aim of this thesis was to explore barriers in the process of rehabilitation care for non-native patients in The Netherlands and potential solutions to improve the process of care for these patients. This thesis focussed on research into reasons for drop-out from rehabilitation treatment in patients with chronic non-specific low back pain. Furthermore, it has been studied which solutions and strategies to improve the care for this patient group have been implemented in clinical practice. Drop-out among patients of non-Dutch origin (28.1%) was twice as high as among native

Dutch patients (13.7%). Patients having different expectations regarding the aim of treatment than their health providers was the major reason for drop-out from a rehabilitation programme. Moreover, often no relationship based on mutual trust was reached and communication problems were not solved adequately, which disturbed the treatment process. Other factors that led to drop-out were: lack of acknowledgement of the patient's complaints by the physician and the treatment team and contradicting views of the physician from the patients' country of origin with regard to the cause and treatment of pain. Less than half of the institutes implemented one or more programme adaptations for non-native patients. Institutes with a high percentage of non-native patients were more likely to have adapted their rehabilitation programmes for patients with chronic non-specific pain of non-native origin, than institutes with a low percentage of non-native patients.

Full-text can be found on <http://dare.ubvu.vu.nl/handle/1871/16328>.

The dissertation can be ordered for free by sending an e-mail to Maurits Sloots: ([m.sloots@reade.nl](mailto:m.sloots@reade.nl)).

### **Tit Albreht**

*Slovenian health care in transition: Studies on the changes in the Slovenian health care system from 1985 until 2010 (168 pp.)*

Defended at 27-01-2011  
AMC University of Amsterdam

*Summary* — Slovenia's health care has been through various reforms and transformations through the period of the last 20 years. The present thesis deals with these processes through three research questions: 1) What were the developments in Slovenian health care over the period of the last two decades? (the descriptive analyses); 2) What were the relationships between key actors in the system, their interactions and co-operations and their key decisions influencing the health system transformation? (the explorative analysis); 3) What were the consequences of the main developments in health reform and health policy in Slovenia? (the impact evaluation and analyses). While significant improvements could be identified in the field of hospital performance and primary care functioning, health policy makers were slow and undecided in responding to the challenges of privatisation, health workforce shortages and redefinition of the public health organisational structure. Given these challenges, Slovenia's future health policy will have to clearly position its long term strategic goals in order to be able to sustain a continued development of a modern health care system for the advancing and more demanding needs of its population.

Full-text can be found on <http://dare.uva.nl/en/record/364345>.

The dissertation is not for sale.

### **Rianne Hoopman**

*Quality of life assessment among Turkish and Moroccan Cancer patients in the Netherlands. Translation and validation of questionnaires (169 pp.)*

Defended at 28-01-2011  
VU University

*Summary* — This thesis aims to contribute to the participation of Turkish and Moroccan ethnic minority cancer patients in health-related quality of life research in oncology. In this study two generic questionnaires, including the SF-36, and two cancer specific quality of life questionnaires were translated into Turkish, Moroccan-Arabic and Tarifit (Rifberber) and validated among Turkish and Moroccan cancer patients in the Netherlands. The results provide support for the use of questionnaires in research. Furthermore, it was found that family members systematically underestimate patients' pain. On individual level large discrepancies of quality of life estimations were found, indicating that proxy information may not be appropriate for the physician. Finally, methodological challenges and practical barriers that were encountered in this study in relation to the translation of questionnaires, recruitment of patients and ethical issues surrounding interviewing cancer patients were described. As patients were not always aware of their diagnoses of cancer, research assistants were drawn into role-conflict and tempted to tell the patient more about their situation.

Full-text can be found on <http://dare.ubvu.vu.nl/handle/1871/18585>.

The dissertation can be ordered for free by sending an e-mail to Rianne Hoopman: ([r.hoopman@vumc.nl](mailto:r.hoopman@vumc.nl)).

### **Semiha Denктаş**

*Health and health care use of elderly immigrants in the Netherlands. A comparative study (133 pp.)*

Defended at 09-03-2011  
Erasmus University Rotterdam

*Summary* — This thesis compares health and health care use of Turkish, Moroccan, Surinamese, Antillean and native Dutch elderly. It describes ethnic differences in health between these groups of older people. Dutch and Antillean elderly are most healthy while the Moroccan and Turkish are the least healthy of the compared elderly groups. Dutch language proficiency is crucial for adequate use of health care. This finding should be given more attention in health policy and practice than only potential health risks.

Full text can be found on <http://repub.eur.nl/res/pub/22648/>.

The dissertation can be ordered for free by sending an e-mail to Semiha Denктаş:  
(s.denktas@erasmusmc.nl).

### **Huong Nguyen**

*Rape experiences and the limits of women's agency in contemporary post-reform Vietnam*  
(288 pp.)

Defended at 10-03-2011  
University of Amsterdam

*Summary* — This thesis explores how women and girls cope with their experiences of rape and how this is affected by social discourses on gender and sexuality in the Vietnamese context. Conceptually the research is based on contemporary theories about relational autonomy as well as on anthropological visions of embodied experience. As the focus of this study is the “experience” of raped women and girls and their “coping” strategy rather than the nature and incidence of rape, a qualitative approach and a context-specific interpretative analysis are adopted for the main body of the research. Data are collected primarily through an ethnographic study of a limited number of respondents, using open-ended interviews, life histories and participant observation. Supplementary data are retrieved from court files. These sources are used for a discourse analysis of the meaning of rape as a gendered crime. Of additional value is an examination of representations of rape cases in a number of selected newspapers.

Full-text can be found on <http://dare.uva.nl/en/record/368938>.

The dissertation (15 euro) can be ordered by sending an e-mail to Huong Nguyen:  
(huongethno@gmail.com).

### **Marion de Boer**

*Combination antiretroviral therapy among immigrant and indigenous HIV infected patients: quality of life and treatment adherence* (137 pp.)

Defended at 12-05-2011  
AMC University of Amsterdam

*Summary* — This thesis describes studies on quality of life and treatment adherence among HIV infected patients in the Netherlands. Results showed that HIV infected patients experience many symptoms, have a lower quality of life and more often fail on treatment. Lower quality of life increases the chance of dying and has a negative effect on treatment adherence. Another result was that measuring treatment adherence with pharmacy refill

counts is reliable and predicts treatment outcome. Self-report of treatment adherence is a less reliable method because of social desirable answers. Immigrants have a lower adherence to treatment than autochthonous Dutch patients and that leads to more treatment failures. HIV stigma is related to lower treatment adherence and depression predicts a worse treatment outcome. Research on interventions to decrease HIV stigma and depression and the effect on treatment adherence and outcome is needed.

Full-text can be found on <http://dare.uva.nl/record/377251>.

The dissertation can be ordered for free by sending an e-mail to P. Nieuwkerk: (p.t.nieuwkerk@amc.uva.nl).

### **Cornelia J. du Preez**

*Living and care arrangements of non-urban households in KwaZulu-Natal, South Africa, in the context of HIV and AIDS (199 pp.)*

Defended at 31-05-2011  
Wageningen University

*Summary* — Few households escape the impacts of HIV and AIDS, either direct impacts as a result of illness and death, or indirect impacts through supporting neighbours, friends and acquaintances. This thesis assesses the living and care arrangements and livelihood generation of non-urban households in Mbonambi in KwaZulu-Natal, South Africa, in the context of HIV and AIDS. A dual quantitative and qualitative approach was followed and data were collected by means of a household survey, case studies and focus group discussions. The survey showed that 46 percent of the sampled households experienced direct impacts of HIV and AIDS and that these households are bigger, have more dependents, lower household incomes and fewer assets. Care for people living with AIDS and/or TB and for orphans and vulnerable children are arranged intra or inter household depending on the human, social and financial resources of the household. Women are not only the caregivers, they are also the decision makers when it comes to care. Gender stereotypes where women are seen as 'natural carers' are reinforced by the additional burden of care.

Full-text can be found on <http://edepot.wur.nl/168822>.

The dissertation is not for sale.

### **Jenneken Naaldenberg**

*Healthy ageing in complex environments. Exploring the benefits of systems thinking for health promotion practice (208 pp.)*



Defended at 14-06-2011  
Wageningen University

*Summary* — Many different stakeholders and contextual factors influence the success or failure of health promotion activities. Conventional approaches and evaluation designs underlying health promotion interventions often explicitly take contextual variables out of consideration by controlling them. This thesis aims to appreciate the complex environment in which health promotion takes place by applying a systems thinking perspective to healthy aging in order to contribute to more robust strategies and interventions to support the aging population. Through an investigation of different stakeholders perspectives on healthy ageing, it shows that perceptions about age-related health issues and possible intervention strategies are differ among various involved actors. The definition of health risks, health determinants, and possible intervention effects therefore have to be verified in both scientific research and everyday practice; measurement of successes of health interventions should use multi-method evaluations combining the use of quantitative and qualitative approaches to gain insight in the 'black box' of why an intervention failed or was successful. The thesis concludes that a systems thinking approach strengthens health promotion by 1) including diverse stakeholder perspectives, 2) explicitly addressing contextual factors, and 3) co-creating solutions with all involved.

Full-text is not available online.

The dissertation can be ordered for free by sending an e-mail to Carry Vleeming:  
(carry.vleeming@wur.nl).

### **Thijs Fassaert**

*Ethnic differences and similarities in care for anxiety and depression in the Netherlands (238 pp).*

Defended 15-06-2011  
VU University

*Summary* — Migration and ethnic minority status have been associated with higher occurrence of anxiety and depression. At the same time, mental health care utilisation by non-Western migrants is supposedly lower compared to the general population in Western host countries. In the Netherlands, however, the evidence-base for this is poor. In this thesis, the author shows that ethnic differences regarding access and quality of mental health care for anxiety and depression are quite limited. For example, fifty percent of Amsterdam citizens with anxiety and/or depression received appropriate health care in 2005, regardless of their ethnic backgrounds. Moreover, it was shown that ethnic differences in quality of care in general practice and outpatient mental health care were small or even absent.

Full-text can be found on <http://dare.ubvu.vu.nl/handle/1871/19634>.

The dissertation can be ordered for free by sending an e-mail to Thijs Fassaert: (tfassaert@ggd.amsterdam.nl).