

7th Annual Students Meeting ‘Linking Students, Policy and Practice’ 2018 – Selected Abstracts

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Agency against the odds: exploring decision making and social norms

Tes Schmeink

Title: 'We are born to get married' A case study exploring young men and women's understanding and agency around (child) marriage in Iganga, Uganda.

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Abstract:

The dominant discourse on child marriage, where in the practice is understood as a violation of human rights, receives criticism for being too universal and neglecting local contexts, tradition, norms and values. Critics argue that the dominant discourse decontextualizes women's lives and portray young men and (especially) women as helpless victims. Following the critiques on the human rights-based discourse around child marriage, this thesis aims to give an more in-depth insight into what marriage and child marriage means to young women and men, and how young people see their own control of marriage decisions. The study is based on three methods of data collection: in-depth interviews, photo-voice and participants observations. Within the photo-voice method I gave 14 young people¹ a digital camera and asked them to make photos of marriage in their community and get the stories of the person(s) in the pictures through a short interview. The study found that young people consider marriage as part of their life: there is no option of not getting married. Moreover, it identifies that the most common reason for early marriage relate to girls being forced by their parents to get married when they fall pregnant. Remarkable is how young people emphasize that a seemingly increasing proportion of child marriages results from the own choice of minors, mostly because they wanted to get out of difficulties in their parental homes or hope to have a better future. Happy marriages – either of young or older couples - are when the man has just one wife and the couple has sufficient income and children. The study concludes that young people should have an active role in research and development and calls for more in-depth research with local participation to enhance the understanding of child marriages.

Francesca Patan

Title: 'Cervical mucus? I'm digging it!' Contraceptive decision-making and natural family planning in times of the hormonal imperative

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Abstract:

The objective of my research project was to illuminate the contraceptive decision-making process of women in Germany, who have discontinued hormonal contraception and transitioned to the natural family planning method: sensiplan. Sensiplan is a patented method based on symptothermal knowledge. I conducted in-depth interviews with twelve women, of which six also engaged in a photovoice project.

I have developed an approach that investigates how the meanings of contraceptive methods are constructed, drawing from the experiences of my informants. Contraceptive knowledge and bodily experience were key elements in their decision-making. Thus, from a theoretical perspective I looked at knowledge production in relation to the contraceptive discourse which produced and reproduced one ideal way of contraception: hormonal contraception. Thus, hormonal contraception is the dominating ideal, to the point where it is even normalized; the hormonal imperative. I used the conceptualization of authoritative knowledge and logic as a framework to look at the contraceptive discourse. I show how the hormonal imperative is reproduced through society, health care systems, gynecologists and insurance policies. As a result, many women who challenged this norm felt discouraged to share their experiences, which in turn reproduces the silence around alternative methods such as sensiplan.

How can we break this silence? Firstly, the educational and health care system need to provide a broader range of knowledge about the reproductive body. Secondly, we need to re-learn how to value the bodily experiences outside of - but also very much within - the biomedical realm.

Brittany Haga

Title: "It has come to destroy me." An exploratory study to understand the well-being of married girls in Eastern Region, Ghana

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Abstract:

Creating child marriage-free communities is now a common goal of the development agendas of international organizations and nations. Given the variety of negative physical health consequences that are linked to child marriage, previous research has primarily focused on that area of girls' well-being and neglected other areas, including mental and social well-being. It is critical to gain this missing information and this study does so in the Boti and Akpo-Akpamu communities of Eastern Ghana. Hence, this study aimed to fill a knowledge gap around the perspectives child brides in this area have on their overall well-being and the ways in which they navigate the structures that impact their ability to exercise agency to better their own well-being.

Data was gathered using in-depth interviews, focus group discussions, and participant observation, and the findings problematize assumptions that underlie much of the development community's actions for intervening in the practice of child marriage. Results show that most girls found their general well-being to worsen after being married. However, the extent to which this suffered had more to do with the economic standing of a girl than anything else. Moreover, girls made clear that the main driver of early marriage was adolescent pregnancy, rather than the marriage leading them to become pregnant. Finally, the research finds that girls' exercising of agency related to marriage takes place in restrictive contexts. Given these findings, recommendations for policy and practice include prioritizing mental health treatment services, promoting education and employment opportunities for girls, and improving sexual and reproductive health education.

Isabel Koopmanschap

Title: The influence of experiential knowledge on prenatal testing decisions

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Abstract:

The prenatal screening landscape for fetal anomalies such as Down syndrome is changing radically due to new technologies such as non-invasive prenatal testing (NIPT). Women are offered counseling to support them in making an informed choice for screening. However, little is known about how women actually come to understand expert knowledge and how they incorporate such knowledge in their considerations regarding prenatal testing. More insight into how pregnant women conceptualize their choice of using prenatal screening tests may clarify the impact of different types of knowledge and perceptions in the decision-making process. With this aim, qualitative research was conducted using semi-structured interviews with 17 women who were offered prenatal screening in 2017 in the Netherlands. The analysis showed that whilst pregnant women conceptualized their risk as 'low' or 'high' through the interpretive frame provided by biomedical knowledge, such knowledge generally offered little information about what particular outcomes of prenatal testing might be like in practice.

Women tended to draw mostly on experiential knowledge, both empathetic and embodied forms, in order to think through their decision and to imagine the concrete implications of a particular outcome for themselves, their future child and other family members. We conclude that prenatal counseling could benefit considerably from an exploration of pregnant women's experiential knowledge in order to support them to make a well-considered informed decision.

Getting it done: why good ideas don't always work in practice

Andrea Willems

Title: Facilitators and barriers of family planning policy implementation in Uganda

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Abstract:

This descriptive and analytical study aimed to discover the barriers and facilitators of family planning policy implementation, as well as policy implementation patterns. A questionnaire, titled the Policy Implementation Barometer (PIB), was used to interview 85 family planning policy experts and service providers in Uganda about the Family Planning Costed Implementation Plan (FP-CIP). This study used the PIB data for several analyses to evaluate family planning policy implementation in Uganda. Barriers and facilitators of policy implementation were found through frequency tables and central tendency estimations.

Two-step cluster analyses were conducted to group the respondents based on their answer patterns. Then cluster membership was used as dependent variable in the logistic regression analyses to find patterns in family planning policy implementation.

The barriers of family planning policy implementation were mostly related to the program's resources, such as inadequate financing and workforce shortage. Some examples of policy facilitators were clear policy outcome targets and effective advocacy at community level for FP-CIP. Policy implementation patterns were found based on the respondent's years of work experience, the level of the health facility and the region where the facility was situated. Policy recommendations are; the Ugandan government should create sustainable and stable budgets for the FP-CIP for recruitment and training of human resources, leadership is needed at the community level, and a clear framework is needed for collaboration between stakeholders. Additionally, the PIB proved to be a useful tool to evaluate policy implementation, but can be improved for future use in Uganda and other countries.

Mellysa Kowara

Title: Access to Cervical Cancer Screening In Indonesia; Application of Three Delays Model

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Abstract:

Introduction: Cervical cancer is the most leading cancer that affects women in Indonesia with case rate 267,000/100,000 women in 2013. The Case Fatality Rate is 45.3% and estimated 9,498 women die annually. Cervical cancer is a preventable disease and screening three times between ages 30 to 45 years can reduce the risk up to 60%. Free cervical cancer screening covered by National Health Insurance has been offered since 2014. Despite the good effort, screening coverage only reached 5.2% and still far from the national target (50%). There is a need of finding the factors that contributing delays in accessing cervical cancer screening in Indonesia.

Methodology: Descriptive statistical analysis and literature review was used to identify the underlying problems. Analysis was done using Three Delays Model. Map and scatter plot were used to present the data.

Results: This study suggested that demand side contributes to delay in accessing cervical cancer screening and it was compounded by supply side issue. The free service was provided sporadically in Community Health Center due to low availability of screening provider and lack of medical supply. This problem raises the issue of affordability if women seek screening in private health facilities. The quality of cervical cancer screening program is also low due to unavailability of organized program.

Conclusion: Free cervical cancer screening program was not followed by the effort to make public health facilities capable to perform the service. Strengthen the role of them by train more screening providers and adequate medical supply are urgently needed.

Key words: Cervical cancer, screening, delay, access, Indonesia

Mitchell Windsma

Title: Emergency obstetric care provision in Southern Ethiopia: a facility-based survey

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Abstract:

Objectives To assess the provision of basic emergency obstetric and newborn care (BEmONC), knowledge of high-risk pregnancies and referral capacity at health centres in Southern Ethiopia.

Design A facility-based survey, using an abbreviated version of the Averting Maternal Death and Disability needs assessment tool for emergency obstetric and newborn care. Modules included infrastructure, staffing, number of deliveries, maternal and perinatal mortality, BEmONC signal functions, referral capacity and knowledge of risk factors in pregnancy.

Setting Primary healthcare centres providing delivery services in the Eastern Gurage Zone, a predominantly rural area in Southern Ethiopia.

Participants All 20 health centres in the study area were selected for the assessment. One was excluded, as no delivery services had been provided in the 12 months prior to the study.

Results Three out of 19 health centres met the government's staffing norm. In the 12 months prior to the survey, 10 004 deliveries were attended to at the health centres, but none had provided all seven BEmONC signal functions in the three months prior to the survey. Eight maternal and 32 perinatal deaths occurred. Most health centres had performed administration of parenteral uterotonics (17/89.5%), manual removal of placenta (17/89.5%) and neonatal resuscitation (17/89.5%), while few had performed assisted vaginal delivery (3/15.8%) or administration of parenteral anticonvulsants (1/5.3%). Reasons mentioned for non-performance were lack of patients with appropriate indications, lack of training and supply problems. Health workers mentioned on average 3.9 ± 1.4 of 11 risk factors for adverse pregnancy outcomes. Five ambulances were available in the zone.

Conclusion BEmONC provision is not guaranteed to women giving birth in health centres in Southern Ethiopia. Since the government aims to increase facility deliveries, investments in capacity at health centres are urgently needed.

Lea Darvey

Title: Expectation versus Reality: confrontation between science and practice

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Abstract:

Introduction - Research still fails to translate theory into action, as an intervention involves multiple interactions and generates confrontations. Therefore, this paper examines the processes of a new intervention conducted by the South African NGO OUT Wellbeing, that provides HIV-related services to minority groups. The objective of the research is to observe how theoretical knowledge is applied in the field, by presenting and discussing the mechanisms and interactions influencing an intervention. Additionally, the effect of the implemented changes on the HIV-yield of MSM is evaluated.

Methodology - A transdisciplinary approach was applied during the three stages of the intervention: design, implementation and evaluation. A Quality Improvement Intervention was collaboratively designed, monitored and evaluated with adapted tools, such as M&E data, minutes of meetings, informal interviews and focus groups, and field observations.

Results - Interventional and real-life related factors were identified as influencing the implemented outcomes: the effect of the funding approach, production of unexpected results, influence of weather, time, and staff availability, complexity to deal with multiple agendas, comfort of a routine, and motivation and sense of ownership.

Discussion & Conclusions - Essential elements demonstrate the difficulty to avoid those influential factors, however, they can be prevented by several strategies. Awareness of the intervention ecological process and its influence on data, acceptance of failures and unexpected outcomes, and comprehension of hierarchy and decision-making, are crucial facts to embrace to enhance positive and adapted results. Policies, researchers, and organizations must acknowledge these factors in order to implement sustainable interventions.

Sexual and reproductive citizenship: navigating in an oppressive environment

Eimear Sparks

Title: To what extent do Roma women in the UK face barriers to their attainment of reproductive health?

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Abstract:

This study aims to develop understanding of the factors perceived to influence the reproductive health of Roma migrant women in the UK, where data on this subject is lacking. Data was collected via eight semi-structured, face-to-face interviews with Roma women, which explored their reproductive health attitudes and reproductive healthcare experiences. This was complemented by three semi-structured interview with British healthcare providers, and two informal interviews with Roma women carried out using an interpreter.

The study's findings indicate that sociocultural norms relating to gender and social stigma inhibit Roma women's reproductive health in the UK. Attitudes surrounding these norms are changing, although this shift depends on processes of integration and education, as well as family support. The study also provides an understanding of the access barriers to reproductive healthcare faced by Roma women in the UK, which include a combination of psychosocial barriers, cognitive barriers relating to language (among non-English speaking Roma women), and low perceived quality of care in the NHS. Postnatal depression is found to be of particular importance among this group, where Health Visitors may play a significant role in addressing it. Ultimately, the study concludes that there is a need for composite interventions to improve the reproductive health of Roma women and that there is a need for (national) data collection on their reproductive health outcomes.

Zhipeng Sun

Title: Manufacturing consent: How “Public health” constructed an association between HIV/AIDS stigma and gay men in China

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Abstract:

Introduction: This study aims to explore why the stigmatizing association between HIV/AIDS and minority sexual identity, gay men, persist though the Chinese government claims to remove stigma from people living with HIV. This study in particular explores the concepts: manufacturing consent, structural stigma and internalized stigma understand why gay men are thought to have HIV/AIDS.

Method: This qualitative research encompassed 1-year fieldwork in China. Qualitative data were collected through participant observation, which yielded extensive notes of observations, and 25 in-depth interviews. Interviewees were randomly recruited during participant observations and some were referred by key informants.

Results: The study found that the association of HIV/AIDS stigma with gay men is the result of actions by public health experts and NGOs working on HIV/AIDS in the gay community. Also, political authorities often assumed that being a gay man would no doubt also mean they would have HIV/AIDS, which some gay men themselves assumed as well.

Conclusion: In the context of sociocultural and political concern regarding HIV/AIDS and structural stigma regarding homosexuality, the public health response played an importing role in associating HIV/AIDS with gay men. Some gay men also assumed that they were at risk of HIV/AIDS as a result of their identity.

Discussion: This research is willing to inform the policy-makers to implement more inclusive and diverse HIV/AIDS policies. However, this “manufactured consent” building on internalized stigma indicates that any attempt to remove the assumed relationship between gay men and HIV/AIDS which characterized as structural stigma is a challenge in China.

Emma Davison

Title: Criticisms and Recommendations For The Explicit Policies of Public Gendered Spaces For Women Towards Trans and Genderqueer Individuals

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Abstract:

A six-month research project in response to the lack of academic interest in the experiences of trans and genderqueer individuals towards public gendered spaces for women. Research looked at how trans women and genderqueer people from the United Kingdom and the United States of America reflected upon women-only spaces. The objective was to find out the *how* behind the way they reflected in an interview setting to discover their insider views on the policies /practises of women-only spaces.

Sociological theory used was dramaturgical/discrepant social performances from the 1959 text *The Presentation of Self in Everyday Life* by Erving Goffman. Methods used were semi-structured qualitative one-hour-long interviews and documentary content analysis of primary interview transcripts. Eleven individuals were found: eight were trans women, three were genderqueer, seven were British and four were American.

There were four ways *how* the interviewees reflected. Policy was a central focus of one of these ways. Four interviewees had recommendations on policy, with a key conclusion being if public gendered spaces for women are not politically explicit about trans inclusion, this has allowed and will allow transphobia the chance to enter the space.

A recommendation given was for spaces to be politically explicit towards trans individuals to tackle damaging repercussions of transphobia. Trans/genderqueer inclusion in public spaces should be practise and policy to upkeep civil SRHR transgender rights at a time of contentious political debates of self-identified gender.

Service gap: the disconnect between SRHR services and needs

Anne Boleyn Niwetwesiga

Title: Sexual and Reproductive Health and Rights-related needs of young displaced people. A case study of Bidibidi Refugee Settlement, Uganda

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Abstract:

Young people are among the most vulnerable population to sexual violence, exploitation and HIV/AIDS in emergency situations. Sexual and reproductive health and rights (SRHR)-related services help in reducing sexual violence-related risks and HIV/AIDS infections. However, provision of SRHR services to young people is often overlooked in humanitarian emergencies. The existing body of research on young people and SRHR barely engages with young people in refugee camps, thus this study aims to fill the gap with empirical findings on SRHR-related issues by analyzing SRHR-related needs and challenges of young displaced people and how service provision responds to these needs in Bidibidi Refugee Settlement in Uganda. Additionally, the data supports policy-makers and humanitarian organizations in designing, delivery and evaluation of SRHR-related programmes and packages for young people in humanitarian settings. Data was collected through interviews, focus group discussions, observations and workshops. The findings indicate that young displaced people are provided with SRHR-related services but insufficient knowledge and information on SRHR-related issues they have, causes inefficient utilization of the available facilities and services. Traditional and cultural norms challenge especially girls and young women to realize their SRHR, and hinder service provision. The study concludes that youth-specific and friendly SRHR-service provision allows young people participate freely. The study calls for further analysis on more appropriate strategies to respond to SGBV-related cases that can allow SGBV victims speak out without fear of victimization and traumatization.

Key words: SRHR-related needs, young displaced people and SRHR service provisio

Georgina Phillips

Title: Exploring whether school-based reproductive and sexual health education is fit for purpose

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Abstract:

The objective of this study was to explore school-based reproductive and sexual health education (RSHE) and assess whether current models are fit for purpose. This dissertation used Nepal's school-based RSHE programme as a case study. The study's framework drew on problems with school-based RSHE identified in the literature. The framework looked at issues of awkwardness, teachers' training and 'too little, too late, too biological' to establish whether RSHE programmes are 'fit for purpose'.

This qualitative research briefly outlines the history of RSHE as well as Nepal's stance on sexual and reproductive health and rights (SRHR). The framework is explored and the definition and parameters of what makes a successful scrutinised. The dissertation then reviews academic literature, policy documents and curriculum texts about Nepal's RSHE programme. This included analysing the SRHR contents of textbooks for grades 1-10. The academic literature was then assessed against the three themes of awkwardness, teachers' training and whether the programme is 'too little, too late, too biological'.

Nepal is highly progressive in SRHR in the context of South Asia, particularly for LGBT* rights, and has mandated school-based RSHE. Awkwardness is found amongst both students and teachers, and teachers do not receive specific training on how to teach RSHE. Although Nepal's RSHE curriculum is broad and starts early, taboos around sexuality and a lack of specific guidance for teachers continue to limit its implementation. This research demonstrates that thorough curricula alone are not sufficient to deliver knowledge, and that the Nepali programme is not fit for purpose.

Marta Sanchez Martinez

Title: Theorizing the relationship between gender roles and attitudes towards abortion: an analysis of the University of Groningen students' opinions

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Abstract:

Introduction

Scholars argue that the stigma that abortion carries is linked to the violation of traditional gender norms that it represents—in particular the seemingly inseparable conflation of 'women/mother'.

In order to explore this further, this project aims to analyse the relationship between attachment to traditional gender roles and attitudes towards abortion.

Method

Data will be collected between September and October 2018 using online survey research, using two scales: Attitudes Toward Women Scale (ATWS) in order to pick up information about gender roles, and a 20-item scale measuring attitudes to abortion. The survey will be available online through Google survey and will be disseminated posting it via groups and pages on Facebook and also with announcements on the University. The sample would be students between 18-26 years old studying at University of Groningen (RUG). Once an invitation to participate in a survey is posted to the page on Facebook of a community of interest, they could access to online survey research service through Google and do it only once per student.

Results

The hypothesis that guides this research is: "there is a correlation between stricter attachment to traditional gender roles and negative/restrictive opinions on abortion".

Data is being collected and analysed and the results are pending but will be made available—at least preliminarily—by the time of the event.

Conclusion and discussion

This project's contribution is to recognize the relevance of gender roles in the attitudes to abortion. A better understanding of these can help inform the development of training programs and policies regarding abortion care.