

RN16 – Sociology of Health and Illness Newsletter

Issue 10 Feb. 2020

Newsletter Editor: Lia Lombardi Co-editors: Francesca Sirna and Marta Gibin

SUMMARY

Pag. 1 - Welcome from the ESA RN16 Coordinators

Pag. 2 - ESA RN16 Board Members

Pag. 6 - ESA CONFERENCE in Manchester 2019: RN16 Sessions and Experience

Pag. 7 - Call for abstract: RN16 Mid-Term Conference in Krakow

Pag. 18 - PhD and Early Career Researchers Workshop

Pag. 20 - 18th biennial ESHMS conference

Pag. 21 - AIS Sociologia della Salute e della Medicina - End of mandate conference

Pag. 22 - New books announcement

Pag. 26 - Articles

Pag. 27 - PhD and Postdoctoral projects

Pag. 29 - Other calls for papers

WELCOME FROM THE ESA RN16 COORDINATORS

We are very pleased to introduce you to the first Newsletter from the new Board of RN16. We would like to wholeheartedly thank the outgoing Board for all of their work on behalf of RN16.

In the Newsletter we welcome you to the new Board members (for 2019-2021) who were appointed at our Business Meeting at the ESA Conference in Manchester 2019. We also tell you about the exciting upcoming mid-term conference Health and Healthcare in Europe: between inequalities and new opportunities which will take place in Kraków (Jagiellonian June 17th-19th 2020 University), Poland (preceded by a PhD and Early Career Workshop), organised by Maria Świątkiewicz-Mośny (RN16 Board member), Aleksandra Wagner and Natalia Ożegalska-Łukasik.

RN16 continues to be one of the largest Research Networks within the ESA. At the Manchester conference in 2019 our RN held 17 sessions (including three joint sessions with other RNs). A total of 158 abstracts were submitted and 112 papers were given. The large critical mass of sociologists of health and illness affords excellent opportunities for collaboration amongst established and early career scholars alike. Together at the main ESA conference and our own mid-term conference we are able to explore new, cutting-edge research (both empirical and theoretical) in our field, advancing our academic discipline in important ways. The

Board are committed to continuing opportunities for RN members to develop, present and publish their work. For example, at the Mid-term conference in Kraków, PhD and early career researchers will be able to hear from and meet with the Vice-President of the European Society for Health and Medical Sociology (ESHMS), Zofia Słońska, the Joint Editor-in-Chief of the journal Sociology of Health and Illness, Karen Lowton, as well as with two of the Editors of the journal Social Theory and Health, Graham Scambler and Guido Giarelli (RN16 Board member). RN16 aims to provide publishing opportunities related to its conferences. A collection of papers from the last RN16 Mid-term conference in Turin (2018), edited by Jonathan Gabe, Mario Cardano and Angela Genova, will be published by Emerald and we are hoping to publish a journal special issue from the Kraków

The heart of RN16 lies with its members and we would encourage everyone to contact us with ideas for activities that you would like to foster. The Newsletter is, as the name suggests, intended for news, not only from the Board, but also from members. So please do send in

comments about current or future activities of relevance to the Research Network and well as content such as commentaries on issues in the field of the sociology of health and illness, to the Newsletter Editor, Lia Lombardi. RN16 is particularly keen to further develop links with other RNs and national associations. If you have any suggestions on this, do contact Guido Giarelli (RN16 Board member with responsibility for relationships with other RNs and national associations).

Finally, if your membership of the RN and the ESA is about to expire please do renew them. Networks receive network membership fees (which Board Members also pay) and it is this which enables us to keep registration fees for our Midterm conference at a reasonable rate for members.

We look forward to seeing those who can join us at the Mid-term conference in Kraków in June! Abstract submission is open until February 28th.

Ellen Annandale (Coordinator) and Ana Patrícia Hilário (Vice-coordinator)

ESA RN16 BOARD MEMBERS



ELLEN ANNANDALE (Coordinator)

Is Professor of Sociology at the University of York UK. She has a long history of participation in ESA. For example, she was a member of the ESA Executive Committee between 2011-2015, and an ESA Vice-President 2013-2015. While part of the ESA Executive she chaired its Postgraduate Committee (2013-2015) and organised ESA's PhD Summer School in York in 2014 and PhD Workshop in Prague in 2015. She was Editor-in-Chief of the journal Social Science & Medicine 2004-2012.

She is presently the Chair of Trustees for the Foundation for the Sociology of Health and Illness https://www.shifoundation.org.uk/ and the Coordinator of ESA RN16. Ellen's research focuses on gender and health, health professions, and the organisation and provision of healthcare. She is currently Chief Investigator on the research project Interactional Practices of Decision Making During Childbirth in Maternity Units https://www.journalslibrary.nihr.ac.uk/programmes/hsdr/147073/#/

Contact: ellen.annandale@york.ac.uk



ANA PATRICIA HILARIO (Vice-Coordinator)

I am a research fellow (investigadora auxiliar) at the Instituto de Ciências Sociais, Universidade de Lisboa (ICS-ULisboa). I am also a guest lecturer at Escola Superior de Saúde, Instituto Politécnico de Santarém. Previously, I held a post-doctoral position under the framework of a project funded by the European Research Council (ERC). I also worked as a research assistant at the Instituto Universitário de Lisboa,

ISCTE-IUL, Instituto Superior de Ciências Sociais e Políticas (ISCSP-ULisboa) and Instituto de Ciências Sociais (ICS-ULisboa), Universidade de Lisboa. I qualified with a PhD in Medical Sociology from Royal Holloway, University of London (RHUL). I have published in top ranking international journals in the fields of gender, health, ageing and death. I have been a board member of the European Research Network of Sociology of Health and Illness (ESA-RN16) and currently I am the Vice-Coordinator of ESA RN16. My current research interests focus on the Sociology of Health and Illness, Sociology of Gender and Sociology of Childhood and Youth.

Contact: patriciahilario@gmail.com



GUIDO GIARELLI (Relationships with other RNs and national associations)

Ph.D. at University College London, is professor of Sociology at the University 'Magna Græcia' of Catanzaro (Italy). He was a founder and first president (2002-2005) of the Società Italiana di Sociologia della Salute (S.I.S.S.); secretary (2005-2008) and then member (2008-2011) of the board of the Section of Sociologia della salute e della medicina of the Associazione Italiana di Sociologia (AIS); member of the board (2004-2006) and then elected president (2006-2010) of the

European Society for Health and Medical Sociology (ESHMS); member of the Board (2010-2014) and then vice-president (2014-2018) of the Research Committee 15 (Sociology of Health) of the International Sociological Association (ISA); and he is currently member of the board of the Research Network 16 – Sociology of Health and Illness of the European Sociological Association. He has been research associate of the Institute of African Studies of the University of Nairobi, adjunct associate professor of the School of Health Sciences of the Oakland University of Rochester (Michigan), visiting scholar at the New York Academy of Medicine and at Harvard Medical School of Boston, visiting professor at the University of Oviedo (Spain), at the Escola de Saúde Pública do Ceará di Fortaleza (Brasil), at the Centre for Sociological Theory and Research on Health Division and Population Health of University College London, at the University of Coimbra, at the University of Lisbon, at the Panteion University of Social and Political Sciences of Athens and at the Miguel Hernandez University of Alicante. His main research interests are in the Sociology of health and medicine, comparative health systems, self-help and civil society in health care reforms, non-conventional medicines and integrated medicine, illness narratives, person-centred medicine, aging and the life course.

Contact: giarelli@unicz.it



TRUDE GJERNES (Treasurer)

Trude Gjernes, PhD, is sociologist and professor at the Faculty of Social Sciences, Nord university, Norway. Her work focuses mainly on production and maintenance of social inequality, cultural models and conceptions of health and health risks, and social organization of care work. She has published on such topics as experiences of risk and risk behavior, health

promotion, governmentality and change, the elderly, dementia care, sickness absence, social activity and social membership. She is interested in the sociology of health and illness, health inequalities, social interaction and collaboration in dementia care, work-related sickness absence and gender studies.

Contact: trude.k.gjernes@nord.no

MARIA ŚWIĄTKIEWICZ-MOŚNY (Mid-term conference chair)

Maria Świątkiewicz-Mośny is a professor of sociology in the Institute of Sociology, Jagiellonian University in Krakow. She graduated in sociology and psychology. She is an author of several articles (published, for example, in Social Theory and Health, Health Policy, The New Education Review, Energy Policy), and two monographs about identity. The first one (2010) focuses on the process of the construction identity by girls/women with Turner syndrome. Her main scientific interests are communication about health and healthcare and discourse about energy issues. Now she is focusing on chronic illness (cancer and remission society), contracting identity by people (especially adults) with Autism Spectrum Disorder, and vaccination discourse.

e-mail: maria.swiatkiewicz-mosny@uj.edu.pl
www.socjologia.uj.edu.pl
facebook.pl
maria.swiatkiewicz-mosny@uj.edu.pl
maria.swiatkiewicz-mosny@uj.edu.pl
facebook.pl
facebook.pl
facebook.pl
maria.swiatkiewicz-mosny@uj.edu.pl
<a href="maria.swiatkiewicz-mosny@uj.edu.p

LIA LOMBARDI (Webmaster and Newsletter Editor)

Lia Lombardi is fixed-term professor in Sociology, Sociology of Health and Medicine at the University of Milan; senior researcher and project manager at the Fondazione ISMU - Iniziative e studi sulla multietnicità (Initiatives and Studies on Multietnicity), Health and Welfare Dpt. From 2008 to 2017 she was President of the Associazione BLIMUNDE –Sguardi di donne su salute e

medicina (Women's View on Health and Medicine). Gender, Health, Migration and Social Policies are the main fields of her studies, with special attention on Mediterranean countries. Since 1989 she has been carrying out comparative researches on health and reproductive health by a gender and cultural perspective, with focuses on reproductive technologies and migration processes. For the Fondazione ISMU, from 1-1-2018 to 31-12-2019, she has been project manager and coordinator of two international projects (1. "PROVIDE - PRoximity On Vlolence: Defence and Equity" JUST/2016/Action grants; 2. SWIM "Safe Women in Migration". Strengthen GBV protection for migrant and asylum seeker women.

JUST/2016/Action grants) and she currently is coordinator of one national project (START 2.0- Servizi socio-sanitari Trasversali di Accoglienza per Richiedenti Asilo e Titolari di protezione internazionale). She also had teaching and research experiences abroad: University of Buenos Aires and Cordoba; Beirut and South Lebanon (2009-2015). In 2008 she received the "Excellence in Teaching Award" from The University of California, Study Center of Padua. In 2018, she obtained the National Scientific Certification as Associate Professor in Sociology.

e-mail: rosalia.lombardi@unimi.it

Skype contact: liaskype5

FRANCESCA SIRNA (Secretary)

Francesca Sirna is a sociologist, research fellow at the National Center for Scientific Research (CNRS), Norbert Elias Centre (UMR 8562), EHESS campus in Marseille, associate researcher at URMIS (UMR 8245) and fellow at IC Migrations (http://icmigrations.fr). Her work focuses on the reconfiguration of geographical and professional mobility in the context of economic and societal crises. She is a bord member of the French Sociological Association (AFS) RT02 Migrations, Otherness and internationalization, and also member of the AFS RT19 Health, Medicine,



illness and disability. She has published several articles on Italian migrations after the Second World War, on return migration and the economic crisis, and on the circulation of European and non-European qualified doctors in France. She is interested in sociology of migration, sociology of health, economic crises and French health system, gender studies and sociology of professional groups.

http://centre-norbert-elias.ehess.fr/index.php?278

Contact: <u>francesca.SIRNA@univ-amu.fr</u>; <u>francesca.sirna@gmail.com</u>

MARTA GIBIN (PhD representative)



Marta Gibin is PhD student in Sociology and Social Research at the University of Bologna, Italy. Her research interests include illness narratives of cancer patients, both offline and online, doctor-patient relationships and gender studies. She works also for Ca' Foscari University of Venice on projects regarding the prevention and management of overweight and obesity in young children, and the use of ICTs to support elderly care.

Contact: marta.gibin2@unibo.it

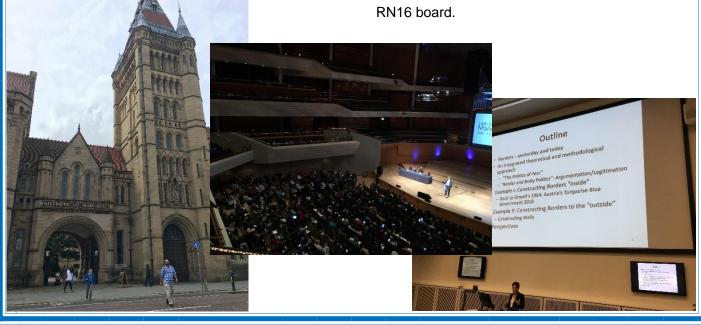
ESA CONFERENCE in Manchester 2019: RN16 Sessions and Experience

ESA conference in Manchester: 158 abstract proposals were submitted for RN16 sessions, and 112 papers were presented at the conference.

SESSION	N. ABSTRACTS
a_OpenSession	19
b_HealthCare Organisation	14
& Policy	14
c_Professions	10
d_Class, Gender &	22
Ethnicity	
e_Childhood	1
f_Risk	7
g_Bioethics	2
h_Pharmaceuticals	0
i_Social movements	11
J_Technologies	9
K_Mental Health	21
I_Chronic Illness	5
m_Disability	7
n_Migration	12
JS_16-01_Ageing	2
JS_16-20_Co-creation and	8
design in health care	
JS_16-22-30_Obesity	8

Marta's experience at the ESA Conference in Manchester

I am Marta Gibin, PhD student in Sociology and Social Research at the University of Bologna. The ESA Conference in Manchester has been for me the first opportunity to participate in an international sociology meeting. It has been an exciting occasion to present my work and receive valuable feedback from other European scholars, but also to become part of the Research Network of Sociology of Health and Illness. The effort, endorsed by our Research Network and by ESA more broadly, to promote a space for sociologists to meet fits well with the conference theme about rethinking boundaries. In a world erecting barriers, ESA represents an opportunity to build a community, open and inclusive, where people passionate about sociology can gather and share knowledge. It is about connecting academics from different countries and with different research interests, but all willing to interpret the reality from a sociological perspective. Building on the theme of the ESA Conference in Manchester, the RN16 mid-term conference will focus on health inequalities. We, as social researchers, must play a key role in stimulating discussion on how to promote equal access to healthcare and how to remove the barriers preventing people to live a healthy life. It is an enriching experience to be part of this network and be a member of the



MID-TERM CONFERENCE OF THE RN16 - SOCIOLOGY OF HEALTH & ILLNESS

EUROPEAN SOCIOLOGICAL ASSOCIATION

Health and health care in Europe: between inequalities and new opportunities

17th-19th June 2020, Jagiellonian University, Kraków, Poland

Abstract submission open until 28th February



Keynote speakers:

Graham Scambler - Emeritus Professor of Sociology, UCL, UK Zofia Słońska – PhD, Instytut Kardiologii, Warszawa, Vice-President European Society for Health and Medical Sociology (ESHMS)

Call for Papers

After successful conferences in Lisbon (2016) and Torino (2018), the Mid-term Conference of the Research Network of Sociology of Health and Illness, European Sociological Association (ESA RN16) will be hosted by Jagiellonian University, the oldest university in Poland. In magical Kraków we will undoubtedly enjoy a fruitful, academically inspiring and engaging conference. We will have a comfortable conference venue, delicious and healthy cuisine, beautiful historical monuments, nice hotel base and a friendly, supportive atmosphere. We plan to make the conference full of inspiring presentations, relevant discussions and lively networking opportunities. We are planning a Special Issue of a journal from the conference.

Health is one of the most important goods for individuals and societies. That is why discussion about health and health care should be treated as crucial. The goal of our conference is to gather together

scholars who are conducting research in the field of health and health care. We are going to tackle problems of inequalities and focus on new opportunities for addressing them. Sociology has been concerned with inequality from its very beginnings. Inequality means the uneven distribution of goods. One of the most important goods is health, but social factors such as education, employment status, income level, gender, ethnicity, and age influence health status and access to care.

The task of policy makers is to reduce inequalities, which means giving everyone the same opportunities to lead a healthy life. But the task for sociologists is to research and explain what does, or could, cause inequalities and to propose solutions. We know that education, employment status, income level, gender and ethnicity and other factors have a great impact on life expectancy and quality of life. In modern Europe all these social factors are fuelled by migration, political tribulations and the neoliberal economy. Value crises, risk, and individualism do not help. Developments in medicine, in medical technology and biotechnology, new treatments and new procedures, and many other things which become an opportunity to cure and care, can be a source of further inequalities. That is why involving social science, sociology, in the discourse about health and health care is important.

Inviting you to Kraków we offer various activities you may wish to participate in:

- 1. Plenary session. Graham Scambler and Zofia Słońska will be our keynote speakers. The title of their presentations will be announced soon.
- 2. How to publish? Karen Lowton on behalf of the Journal Sociology of Health and Illness will present some tips.
- 3. Regular session. We plan 18 sessions (abstracts below). If you want to submit an abstract for an oral presentation, please send your abstract (on the form provided with the session name and other details by the deadline of 28.02.2020 to ESARN16conference@uj.edu.pl. A person can submit at maximum two abstracts (one as a first author and a second as co-author) and an abstract can only be submitted for one of the sessions.
- **4. Poster Session.** If you want to present a poster, please send your application (please use the Abstract Submission Form provided attached) by the deadline of 28.02.2020 to ESARN16conference@uj.edu.pl. A person can present at maximum two posters (one as a first author and a second as co-author)
- **5. Meet a friend.** We plan to organize meetings for all who want to find a partner for article or research grant proposal. If you are looking for colleague with whom you could write article or prepare a grant application, please send application (on the form provided) by the deadline of 28.02.2020 to ESARN16conference@uj.edu.pl

REGULAR SESSIONS

We invite colleagues from Europe and around the Globe in the field of the sociology of health and illness to considering submitting their work to the following sessions:

Session 1: Social, political and scientific controversies about vaccines and immunization policies Organized by Giampietro Gobo (University of Milan) & Barbara Sena (Unitelma Sapienza University of Rome).

Socio-political and scientific controversies on vaccines and immunization policies are not a new phenomenon both in Europe and the rest of the world. On one side, ancestors of the scientific opposition were the English physicians Charles Creighton (1847–1927) and Edgar Crookshank (1858–1928), as well as the German pathologist Johann Ludwig Casper (1796-1864) and the famous Welsh biologist Alfred Russel Wallace (1823-1913). On the other, the opposition to mandatory and mass immunization rise in the second half of 1800s (e.g. the Anti Vaccination League and the Anti-Compulsory Vaccination League). This social and scientific criticism re-emerged in the late 1970s in the American New Left, second-wave feminism, and the environmentalist movements. This entailed a general disillusionment with the traditional medical practices and growing doubt about the safety of commonly prescribed drugs. We are now assisting in the appearance of a third wave of renewed criticism, configuring it in distinct social movements (often labelled as "pro-vax", "free-vax" or "hesitant") constituted by multiple actors (parents, practitioners, scientists, politicians, artists and so on), which express concerns about even more general issues: freedom and civil rights, public health, big pharmas and political agendas. In this framework, are welcome papers which, focusing on vaccination policy controversies, will explore (in balanced and equidistand ways): i) political debates; ii) economic conflicts; iii) law disputes; iv) cultural oppositions; v) religious believes; vi) new social movements; vii) scientific controversies on single aspects of vaccines and immunization theories.

Session 2: The social construction of autism

Organized by Alice Scavarda (University of Turin) & Angela Genova (Università Carlo Bo, Urbino)

The last years have been witnessing a growing interest in autism research, both in sociology of health and in disability studies fields, raising issues about the social origins of autism epidemic, the construction and the use of the diagnosis, the role of parents and health professionals and the autism advocacy movement with the neurodiversity concept proposal. This session aims to provide space for critical thinking, on how autism is produced, represented and, in some way, resisted by individuals, groups and by cultural and health systems. To unpack the notion of autism, we invite theoretical and empirical papers, addressing the following issues and other related topics: i) the identification and the diagnosis of autism, namely the medical discourse on autism, deepening the institutional matrices of knowledge, practices and identity; ii) the cultural discourse on autism, including book and film industry, performing arts, photography; iii) the living experience of autism, considering both the accounts of people with autism and their families, with a specific focus on disablement; iv) the resistance to dominant discourses, particularly in terms of neurodiversity. The session invites both international and national based studies.

Session 3: Making sense of gender and age in the lived experience of chronic illness

Organized by Catarina Delaunay (CICS.NOVA) & Ana Patrícia Hilário (Instituto de Ciências, Universidade de Lisboa)

Gender differences have important implications for how chronically ill people experience the onset, treatment and daily management of their affliction. Indeed, there is evidence that women and men tend to react to and deal with chronic illness differently because of their gender roles. Gender not only conditions the way sufferers experience chronic illness, but also how others perceive and/or deal with it. Nonetheless, other social determinants such as age might influence the lived experience of chronic illness. Thus, when analyzing chronic illness social scientists must take into account gender as well as age differences across the life span (i.e., generational differences). For instance, age constrains individual and social expectations around the diagnosis of chronic illness. Age and gender also matter in

relation to health outcomes, policy-making and clinical practice. Indeed, intersectionality is key for understanding the lived experience of chronic illness and might offer valuable insights for its prevention, treatment and management. The purpose of this session is to offer insights into how both gender and age shape how chronic illness is perceived and experienced. By recognizing intersectionality, we might bring to the fore issues related to social inequalities. We welcome either empirical or theoretical papers that explore intersectionality, namely the role of gender and age, in the lived experience of chronic illness.

Session 4: Chronic illnesses and media: resources, opportunities and online representation

Organized by Andrea Volterrani (University of Rome Tor Vergata) & Angelica Spampinato (University of Rome Tor Vergata)

The role that social media have in people with chronic illnesses highlights the cultural differences, homogeneities and socio-economic contexts related to the diseases. In particular, we suggest the following topics to investigate in your papers: i) The role of social media in creating awareness about chronic illnesses; ii) the impact of open and closed communities built ad hoc in social media on the improvement of care and specialized medical or healthcare professional /patient relationships; iii) analysis of the role of the media and social media in the prevention of some of the most common problems among people with chronic illnesses; iv) the online and offline roles of national associations to fight against illnesses and to promote active participation of people affected. Papers from studies conducted at local, national and international levels that contribute to conceptualization and/or methodological and empirical developments in the aforementioned topics are welcome.

Session 5: Disability in the medical and social perspective

Oganized by Dorota Żuchowska-Skiba (AGH University of Science and Technology) & Jakub Niedbalski (University of Lodz) & Mariola Racław (University of Warsaw)

The thematic session organized by the Section PTS (Polish Sociological Association) Sociology of Disability will be devoted to the subject of changes in defining disability that have taken place in recent years. It can be seen that today there is a departure from the perception of disability in medical terms, and the social dimension of disability is increasingly emphasized. This trend is part of the processes that take place in all European countries. This causes the need to start a debate about the changes taking place. The topics of the session will cover six areas emerging at the meeting point of medical and social problems related to disability, which significantly affect the situation of people with disabilities today: i) individual vs social vs biopsychosocial disability model - new perspectives for reflection on disability; ii) standardization policy versus diversity policy - a new model of social policy for people with disabilities; iii) exclusion vs inclusion - a new model of certificate of degree of disability and the problems of advocacy and self-advocacy of persons with disabilities; iv) compensation vs integration - the importance of new technologies for people with disabilities; v) accessibility vs barriers in the medical and social area accessibility of services for people with disabilities; vi) stigmatization vs acceptance - a change in the perception of people with disabilities in Poland and in the world. We are also open to other issues that are part of the debate on changing the model of disability in contemporary Poland and other European countries.

Session 6: Undesirable consequences of increasing non-expert agency in the neoliberal health care system

Organized by Kadi Lubi, (Health Education Center) & Marko Uibu (University of Tartu)

The neoliberal health care system expects individual responsibility for one's health. Yet, the signs and appearance of the readiness to take this responsibility either as an individual or as a (local) community, raises emerging contradiction. The latter, in turn, causes tensions and emotional confrontations between and inside groups of local communities/individuals, physicians, healthcare workers, decision- and policymakers. The tendency is increasing globally in discussions regarding vaccination, alternative and complementary medicine and organization of healthcare. The aim of the panel session is to discuss the new reality of healthcare and medicine in the context of broader socio-cultural trends. Some major questions the panel addresses are following: i) how are new agencies perceived and executed by individuals, communities, and (medical) systems; ii) what are the consequences of the increasing existence of a variety of authorities who influence individual health decisions; iii) how do people combine their individual responsibility over health with expert systems/knowledge and vacillate between patient, consumer, and lay expert/activist positions; iv) how to maintain increased agency and empowered citizens together with the preference of evidence-based solutions under the societal challenges of an ageing population and an increased rate of chronic illnesses? The wide frame of the panel allows discussions about (but are not limited to) the change of the patient's role in terms of chronic illnesses, complementary and alternative medicine/approaches, civic activism in terms of health care (policy) changes. This session welcomes empirical and/or theoretical papers that engage the issues of healthcare (system/policy) and health challenges under neoliberal circumstances.

Session 7: Health inequalities among the elderly: differences in morbidity, autonomy and quality of life

Organized by Höglinger Marc (Zürich University of Applied Sciences) & Carlander Maria (Winterthur Institute of Health Economics)

Health inequalities between the elderly are the result of cumulative risk factors and the availability of personal resources and manifest themselves in differences in morbidity and mortality. Numerous international studies show that individuals' educational background, migration experience, income, and wealth are associated with differences in various health outcomes (Mackenbach et al. 2016). Although the so-called "social gradient in health" (Marmot 2005) tends to decrease in older age (partly due to selective mortality), it never completely disappears (Huwiler et al. 2002, Bop and Minder 2003). In addition to differences in morbidity, differences in the individual consequences of diseases must be considered. Social and material resources not only influence the risk of suffering a disease. They also determine access to adequate health care, to formal and informal support, and they are associated with coping strategies to deal with a disease. Accordingly, the same disease might affect central health-related outcomes such as quality of life or autonomy very differently from person to person. This session will therefore focus not only on social determinants of disease and illness, but also on factors that influence how health-related outcomes such as quality of life and autonomy are affected by disease. A particular focus will be put on social integration and social networks as protective factors against disease and important resources in coping with disease (Bachmann 2014, Heaney and Israel 2008 &Berkman et al. 2000). In addition, we welcome contributions on interventions and preventive measures.

Session 8: Incorporating the One Health approach into health care organizations: how does it work? Organized by Giacomo Balduzzi (University of Eastern Piedmont) & Francesca Zaltron (University of Eastern Piedmont) & Anna Rosa Favretto (University of Eastern Piedmont)

The session aims at discussing the effectiveness of integrated health strategies inspired by the 'One Health', that is a relatively novel term rooted in long held understandings of the link between diseases shared between environmental factors, animal health and human health (Rüegg *et al.* 2018; Paternoster et al. 2017). Research and policy processes in many fields, especially health and welfare, are increasingly relying on trans-disciplinary and trans-sectorial cooperation. From local to global levels, the health care organizations need to integrate different knowledge, agencies, professions and policy areas, facilitate collective action, and making connections between 'organizational silos' (Jerolmack 2013). Social science may contribute to understand relational and inter-organizational issues in this specific strand of the health debate. Particularly, sociologists may share with other health scientists and practitioners theoretical and methodological instruments to apply in empirical researches and field interventions.

Session 9: Reform policies of European health care systems among state, market and civil society Organized by Guido Giarelli (University 'Magna Græcia')

After about four decades of continuing reforms of the European health care systems, the complexity involved in formulating effective policies to govern multiproblematic systems has been acknowledge. Given the complexity health care systems have, any reform attempt in this policy field have been caught in an attempt to combine opposite objectives: in fact, to control costs and the increase in health expenditures can lower the level of quality of the services delivered; on the other hand, to quarantee equality of access to health care for all may be detrimental for the freedom of choice of the citizens; and, finally, a centralization strategy to rationalize the organization of services can seriously hinder any substantial participation of the population in the decision-making process. These fundamental trade-offs are also blurring the traditional boundaries between the Bismackian health care systems based on social health insurances and Beveridgian ones based on national health services: they currently both combine universalization traits with marketization trend to successfully cope with the above challenges. What is the role that the different social and institutional actors - namely, the state, the medical and health professions, the medical-industrial complex, and the citizens with their associations of the civil society can play in this respect? To what extent we can speak of convergent or divergent policy processes? And, lastly, what is the room for a European Union strategy? Theoretical studies and field researches on casestudies adopting qualitative and quantitative approaches about these topics related to different European health care systems are both welcome in order to deepen the comparative perspective and the sociological insights.

Session 10: Inequalities and informal care: "the voice" of caregivers of chronic illness patients Organized by Cristina Calvi (Bruno Kessler Foundation) & Stefania Fucci (University of Parma)

The spread of chronic illnesses play an important role in our society from the point of view both of the material and immaterial resources that they are able to move, and of the impact they produce on the biographies of those directly involved (patients and caregivers). From the microsocial point of view, the illness can be considered as a biographical disruption capable of producing changes on the different trajectories that compose the biography of a person including the moral one. The biographical disruption

connected to illness, besides acting on the biography of the patient, also affects the life of those emotionally close to the patient providing care (caregiver). This panel is interested in the development of caregiver career. In general, the effect that a chronic disease produces on informal carers' lives depends above all on the economic, cultural and relational resources that they have at their disposal. In particular, the resources available to the subjects can make the difference with respect to the way in which the caregiver role is taken and the type of social support provided to the patient. This panel is interested in gathering contributions that reconstruct the impact of chronic diseases of adults and children on the biography of their caregivers with particular attention to gender differences, education and income level. The panel prefers to favour empirical researches that adopts qualitative methods to give voice to the experiences of caregivers and to highlight also the changes on the identity of these subjects.

Session 11: Excellences and Obstacles Implementing Interprofessional Care within Health and Educational Settings: Are healthcare professionals ready to commit?

Organized by Barbara Sena (Unitelma Sapienza University of Rome) & Enrico De Luca (Sapienza University of Rome) & Silvia Cataldi (Sapienza University of Rome)

Interprofessional Care has been recognized as one of the most innovative solution in healthcare organization and specifically to care for complex diseases patients (WHO, 2010). It represents an approach to care that rely on a reorganization of the health services alongside a challenging educational and training pathway for healthcare professionals. Many authors (e.g. Fox and Reeves, 2015; Bureau et al., 2017) have highlighted how a patient centered approach is fundamental to support the conditions leading to implement effective interprofessional care processes. Therefore, a cultural change is needed to ameliorate communication between professionals and to align their vision of care, often influenced by the role played within healthcare settings and the acquired routines by traditional intradisciplinary socialization processes (Sena and Liani, 2019). A broader view of this topic has suggested that it can be implemented with educational and health professional commitments, likewise the importance of specific training, both in the academic courses and in the implementation of interprofessional collaboration practices (WHO, 2013). This session aims to gather a range of papers in order to explore and discuss on different aspects of Interprofessional Care. Particularly, we are interested in: - how different healthcare professionals are involved in interprofessional collaborative practices and how they overcome cultural barriers and professional identities; - how interprofessional teams develop patient-centred approaches to care; - which kind of training and specific education programs are effective to promote interprofessional cultures in academia and health settings; - which factors can contribute to implement interprofessional care practices (e.g. new technologies, policies, clinical governance practices, etc.).

Session 12: The Medicalization of Human Reproduction in a Global Society: Gender, Inequalities and Social Change

Organized by Lia Lombardi (University of Milan)

To discuss human reproduction between health, gender and medicine means "to put it at the center" of reflection and analysis of social changes of the recent decades. The objective of this session is to discuss and compare research and studies on reproductive health (conception, childbirth, abortion, reproductive technologies, reproduction medicalization) as an indicator of development and well-being which highlights the processes of transition and the change of social structures and of gender relationships. I therefore propose an analysis of the relationship between human reproduction and social reproduction by placing reproductive health in a "key dimension" of the analysis of life courses, of the medicalization of human

reproduction and of daily life, including the health rights, the welfare policies and the system of social, health and gender inequalities. Studies and analysis of the complex area of health and reproductive rights, can be explored by the theoretical issues of classical sociology, by gender studies and sociology of health and medicine, in a global and gender-sensitive perspective that includes health and reproductive rights of migrant women. According with these premises I invite scholars from Europe and around the Globe to submit theoretical and/or empirical contributions - comparative perspective is also recommended - dealing with the following themes (but not limited to): • Human reproduction and social reproduction • Health and reproductive rights: analyzing global inequalities • Health and reproductive rights: contraception, abortion, pregnancy, childbirth, etc. • The medicalisation of pregnancy, childbirth, conception • Obstetric violence • Induced abortion in Europe and around the world • Reproductive health and rights of adolescents • Social and health inequalities in gender perspective • ART in European countries: comparative analysis • The impact of ART on gender relationships and "new parenthood" (homoparenthood, monoparental families, etc.); • Transnational reproduction and Cross-border reproductive care • Egg donation and "Social egg freezing" • The reproductive health and rights of migrant women • Reproductive rights and life/work balance: a gender perspective.

Session 13: Vaccinations in public discourse

Organized by Paulina Polak (Jagiellonian University) & Maria Świątkiewicz-Mośny (Jagiellonian University)

To vaccinate or not to vaccinate, this has become a key question for many parents. More and more are lost between scientific data, official regulations, conflicting reports from various sources, and emotional stories. In this session, we would like to take a closer look at how vaccines and the problems of vaccinating and non-vaccinating are presented in the public discourses: official (including regulatory and supervisory bodies, government), traditional and online media, and social media. Some problems that we would like to include in the discussions are knowledge and ignorance, misinformation, the problems of individual vs. public risk, communicating about vaccines and vaccinating from official sources and individuals, anti-vaccination groups and their discourses. We invite all papers that talk about vaccination discourse either in the media/social media or in public sphere. We will try to answer questions as for example: i) what discursive strategies are present in vaccination discourses in different contexts?; ii) who are the main actors and how are they presented?; iii) who is excluded from vaccinate discourse?; iv) how inequalities discussed in the discourse?

Session 14: Coercion in psychiatric cure

Organized by Mario Cardano (Università degli Studi di Torino) & Luigi Gariglio (Università degli Studi di Torino)

Coercive measures have been used to tackle mental distresses in psychiatry since the origin of the discipline. It is hardly possible to think of psychiatry without thinking of both coercion and social control. In the past Asylums was a total institution in which doctors would "cure" people with a "broken brain" - showing different kinds of alterities - coercively keeping them in custody; often, doctors and nurses would use extreme body restraint such as mechanic restraint. Even after the discovery of anti-psychotics drugs mechanic restraint and other coercive measures remained the means by which staff controlled inpatients routinely. Nowadays, despite, on the non-restraint movement dating 1850, and spread the process of deinstitutionalization - the shift of psychiatric care towards the territory that occurred in the UK, in Italy and elsewhere - different forms of coercion (environmental, chemical, anaestesiological, manual,

mechanical, psychological, familiar, etc.) are apparently still firmly in the picture in many, if not all, EU psychiatric settings. This panel aim to investigate the issues both theoretically and empirically from both academic and non-academic perspective. Paper from the field of humanities, psychology, and the medical sciences are also very welcome.

Session 15: Health and its social meanings

Organized by Iwona Tarnowicz (University of Wroclaw)

The concept of health covers a lot of social meanings connected with social order. The slogan "your health in your hands" embodies social expectations of individuals in post-modern society. Taking responsibility for one's own identity and life is the main task of each individual, and self-examination becomes the most important kind of social control. But is each of us able to take control of our own life and health and to make the right choices? Health-related behaviours express social status. In the contemporary society, expert systems, not tradition or religion, are the sources of knowledge, values and norms (and some of these systems are not based on science). Where do people look for knowledge of health and what kind of arguments do they consider to make their choices? How often does the issue of health appear in our day-to-day life and what activities does it concern? Health is one of the most important social values, but what does it mean precisely? If people care for their health, what goals do they want to achieve? What emotions does health trigger? The social concept of health describes what is good and right in the society, what behaviours are desirable, therefore this subject is worth investigating.

Session 16: Explaining variation in health inequalities from a comparative institutional perspective: innovative theoretical approaches and empirical studies

Organized by Barbara Willems (Health and Demographic Research, Department of Sociology Ghent University).

A large strand of research has revealed substantial differences across European countries in the health disadvantage of the lower socioeconomic groups as compared to the higher ones. The demonstration of the persistent (or even increasing) impact of social determinants on health, as well as the variation of this health gradient across Europe, highlights the need for a better understanding of this connection. In order to explain cross-national differences, health sociologists are increasingly focusing on the contextualization of social inequalities in health, thereby emphasizing the need of an institutional theory of health inequalities. They argue that macro-level contexts (i.e. policies, institutions) not only shape the distribution of resources, such as educational attainment, income, and labor conditions, in a population, but also how important these resources are for individuals' health. In other words, the persistence of social disparities in health can also be attributed to social institutions such as health care systems, labor markets, and schools, if these institutions undermine individuals' potential for access to, utilization of, and adherence towards health services, practices or guidelines. Previous studies have, for instance, demonstrated the beneficial effect of comprehensive educational systems, unemployment insurance coverage, higher social spending, and organized cancer screening programs on (preventive) health inequalities. There remains, however, large potential for future research. This session invites both theoretical and empirical studies that investigate topics of social inequalities in health. Cross-national comparative studies with a focus on the impact of macro-level factors on health inequalities or national approaches with a focus on social change or evolution of health inequalities over time are preferred.

Session 17: International Mobility of Health professionals: pathways, gender and discrimination processes

Organized by: Francesca Sirna (CNRS, CNE, EHESS-Institut Convergence Migrations) & Simeng Wang (CNRS, CERMES3, EHESS-Institut Convergences Migrations)

Population movements in the health sector, characterized by labor shortages and high feminization (Acker 2005; Castles and Miller, 2003), have affected sending and destination countries on a global scale, based on labour shortages and recruitment schemes (Mejia 1978; Bashford 2006; Kingma, 2006; Solano and Rafferty, 2007). Medical and paramedical staff have experienced increased international geographical mobility since the early 2000s as a result of selective migration policies (Cash & Ulmann 2008). In this context, the EU and EFTA have become destinations for many health professionals (European and non-European) as they accompany the evolution of health systems and the restructuring of forms of employment in the sector. Thus, analysing the reconfigurations of the current mobility of health personnel with foreign diplomas would make it possible to understand in depth these changes, these re-compositions determined by this recent societal context. The international mobility of health professionals refers to the regulation of the number of medical and paramedical personnel through the use of immigration. The aim would be to describe national and Community migration policies oriented in this direction. The presence of these foreign personnel also makes it possible to address issues related to the inclusion/exclusion policies implemented by European Union (EU) countries. They cover both professional dimensions (integration, selection, training, recognition of diplomas, equivalence procedures, de-skilling) and family and relational dimensions that provide an understanding of the migration phenomenon as a whole. The migration paths of health workers with foreign diplomas and opportunities for social mobility can also be captured in terms of gender (Cresson 1995; Herzlich et al. 1993; Picot 2005; Cognet 2010), race (Iganski and Mason, 2002) or ethnicity (Ryan, 2007). In this respect, the hospital, as an institutionalized social world, can make it possible, through career analysis, to highlight the articulation effects of the factors of discrimination. Finally, this mobility questions the balances between regions of the world (North/South), but also between countries of the European Union (Western/Eastern countries). The privatization of healthcare sector and the global neoliberal shift underway have profoundly redefined the motivations of health professionals and their migration project. Strong contrasts may thus appear depending on the country of origin or the time of migration to be described. The objective of this session is to bring together specialists in these themes and to discuss the mobility/migration issues of health professionals with foreign diplomas in different national contexts.

Session 18: Open session

This Open Session is intended for those who wish to present a paper/poster on the theme of the conference **Health and health care in Europe: between inequalities and new opportunities,** but which does not fit into one of the 17 themes.

Authors will be notified by the end of March 2020 if their abstracts for oral presentations and posters have been accepted (or not).

Practical Information:

Early Bird Fee (before 15.05.2020)

- regular fee Non-ESA RN16 members 600PLN (about 142 €)
- regular fee ESA RN16 members 450PLN (about 107 €)
- regular fee PhD Student 200PLN (about 47 €)
- full fee Non-ESA RN16 members 750PLN (180 €)
- full fee for ESA RN16 members 600PLN (about 142 €)
- full fee PhD Student 400PLN (100 €)

after 15.05.2020

- regular fee Non-ESA RN16 members 700PLN (about 166 €)
- regular fee ESA RN16 members 550PLN (about 130 €)
- regular fee PhD Student 300PLN (about 75 €)
- full fee Non-ESA RN16 members 850PLN (202 €)
- full fee for ESA RN16 members 700PLN (about 166 €)
- full fee PhD Student 500PLN (119€)

Please be aware:

The fee must be paid in local currency (Polish Zloty).

- ✓ Full conference fee includes conference bag, coffee and catered lunch breaks, an evening social dinner on 18th June, a visit to Jagiellonian Museum.
- ✓ Regular conference fee includes conference bag, coffee and catered lunch breaks.

For queries please contact: ESARN16conference@uj.edu.pl

For submitting your abstract please use the appropriate form and send it to ESARN16conference@uj.edu.pl. The address of the webpage of the conference will be announced soon. The registration of the conference will be made online after the launch of the webpage.

Local Organising Committee: Maria Świątkiewicz-Mośny, Aleksandra Wagner, Natalia Ożegalska-Łukasik

Scientific Committee ESA RN16 Board: Ellen Annandale, Ana Patrícia Hilário, Maria Świątkiewicz-Mośny, Francesca Sirna, Guido Giarelli, Trude Gjernes, Lia Lombardi, Marta Gibin.

PHD & EARLY CAREER RESEARCHERS WORKSHOP

Mid-Term Conference of the Research Network of Sociology of Health & Illness

EUROPEAN SOCIOLOGICAL ASSOCIATION

Health and health care in Europe: between inequalities and new opportunities

16th June 2020, Jagiellonian University, Poland

CALL FOR PAPERS

Submission deadline 28th February

The ESA Sociology of Health and Illness Research Network is pleased to invite PhD students and Early Career Researchers to attend the workshop which will precede our mid-term conference in Kraków. Preselected participants will be invited to present their papers under the mentoring of senior scholars, such as Graham Scambler (Emeritus Professor of Sociology, UCL, UK and Editor of Social Theory & Health), Zofia Słońska (Vice-President of the European Society for Health and Medical Sociology), Karen Lowton (Professor of Sociology, University of Sussex, and Editor of Sociology of Health & Illness), Guido Giarelli (Professor of Sociology, Magna Graecia University of Catanzaro, and Editor of Social Theory and Health).

The workshop represents an excellent occasion to receive valuable feedback on your research, to improve and develop networking with other doctoral students and early career researchers, and to engage in collaborations with other scholars in your field of study.

Eligibility:

- Students registered for a PhD in Sociology or allied discipline, or waiting to defend the

doctoral thesis;

- Early Career Researchers who have been awarded the PhD in Sociology or allied discipline in the last two years. How to apply: Please submit a short CV (max. 3 pages) and an abstract of your paper (max. 250 words) by 28th February 2020 to ESARN16conference@uj.edu.pl

Your abstract must be written in English and should include:

- Title of the paper;
- Up to 4 keywords;
- The aims and objectives of the paper, the research methods (for empirical papers), and the findings/expected findings;
- Your name and affiliation.

All areas of Sociology of Health and Illness (either theoretical or empirical) will be taken into consideration.

Participants will be notified by 15th March 2020 if their abstract has been accepted (or not). If you are selected, you will be required to submit a full paper (max. 5.000 words, excluding title, abstract, keywords and references) by 1st May 2020 to the workshop's organisers and send it to ESARN16conference@uj.edu.pl. Papers must be written in English.

Mentors will provide you with a review of your paper and all papers will be circulated in advance among the participants. During the workshop, you will have the opportunity to present your paper in order to receive valuable feedback from your peers and senior academics, and stimulate enriching discussion.

Registration Fees:

Non-ESA RN16 members: 190 zł (about 45€) ESA RN16 Members: 170 zł (about 40€) Travel, accommodation and meals are not included in the fee.

For any additional information about the workshop, please do not hesitate to contact us at ESARN16conference@uj.edu.pl

Scientific Committee ESA RN16 Board: Ellen Annandale, Ana Patrícia Hilário, Maria Światkiewicz-Mośny, Francesca Sirna, Guido Giarelli, Trude Gjernes, Lia Lombardi, Marta Gibin.





18TH BIENNIAL ESHMS CONFERENCE

European Society for Health and Medical Sociology

Imagining beyond crisis: health, society, medicine

27th-29th August 2020, Uppsala University

Under the theme of 'Imagining beyond crisis: health, society, medicine' the conference will be convened from 27th to 29th August 2020, in the English Park (engelska parken) Campus of Uppsala University.

Crises are not hard to find in contemporary Europe: crises in democratic representation and the distribution of resources, in solidarity with and hospitality towards immigrants, in environmental degradation, species extinction and climate change. Some health crises cry out for a sociological approach: socio-economic aspects cannot be ignored in addressing antimicrobial resistance and widening mortality inequalities. Any crisis that implies social cohesion and economic inequalities within and beyond Europe has a health sociological dimension.

How do we as scholars, practitioners, policy-makers grapple with the moral panics and conspiracy theories that accompany crises? As sociologists how do we use research evidence to represent and understand such crises, to analyse the underlying causes and effects, to imagine a better social world?

The scientific and programme committees are at work on the practicalities of a conference where we hope to welcome you to exercise your sociological imagination on medical sociological matters.

From Hannah Bradby, Professor, Sociology Department, Uppsala University

For information, visit: https://www.eshms2020.com/







"Personalisation of care and citizens participation in digital society"

End of mandate conference Italian Sociological Association (AIS) - Sociology of Health and Medicine

Bologna, 28-29 May 2020

The Sociology of Health and Medicine unit of the Italian Sociological Association (AIS) is pleased to announce that the end of mandate conference will be held in Bologna on 28-29 May 2020. The conference will explore the impact of digitalisation on medicine and healthcare, with a focus on the P4 Medicine (predictive, preventive, personalised, participative). This patient-centred approach is based on the availability of patients' big data, in order to produce predictive models of health and illness conditions. What is the role of sociology in analysing the complex ethical, legal, social, and privacy protection issues, as well as political and economic, that this change entails?

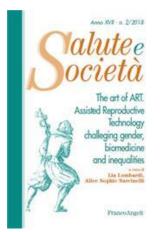
For information, visit: https://www.ais-sociologia.it/event-items/personalizzazione-della-cura-epartecipazione-dei-cittadini-nella-societa-digitale-call-for-session/



NEW BOOKS ANNOUNCEMENT

The art of ART. Assisted Reproductive Tecnology challenging gender, biomedicine and inequality.

Lia Lombardi, Alice Sophie Sarcinelli (eds) 2018



This special issue aims to provide a critical analysis of the development of ART (Assisted Reproductive Technologies) through a comparative investigation of different empirical studies in some countries in Europe, Africa and the USA (Italy, Belgium, Portugal, France, Netherlands, Algeria, Mozambique and California). The authors investigate the impact of ART on social and family structures, gender relationships, parenting and parenthood, and legal and political approaches through different perspectives: the medicalization of human reproduction and gender differences, and the politics of ART. In this perspective ART is intended as a crossroad of analysis in which different disciplinary areas and geopolitical contexts interact, in order to investigate the impact of ART on legal and policy issues, on reproductive culture, on family structures, on gender

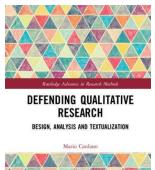
and on generational relationships. The theoretical and empirical approaches draw on to the sociology of health, gender studies, medical anthropology, public health and kinship studies. In addition, in this special issue the critical analysis of ART is developed through three main topics: *gender, biomedicine and inequality*. The questions behind this volume concern the aspects that are still central in the national and international debate: reproductive and individual rights; social inequalities that intersect with gender and health inequalities; the development of biomedicine and biotechnologies and their impact on social change affecting gender and generational relationships, family structures, law and policies; the space and time of reproduction, which is increasingly distant from physiological times and traditional private spaces. https://www.francoangeli.it/riviste/sommario.aspx?anno=2018&idRivista=107&lingua=it

Defending Qualitative Research. Design, Analysis, Textualization.

Mario Cardano, 2020

Focussing on the phases of qualitative research which precede and follow fieldwork – design, analysis, and textualization – this book offers new theoretical tools to tackle one of the most common criticisms advanced against qualitative research: its presumed lack of rigour. Rejecting the notion of "rigour" as formulated in quantitative research and based on the theory of probability, it proposes a theoretical frame that allows combining the goals of rigour and that of creativity through the reference to theory of argumentation. As such, it will appeal to scholars and students across the social sciences with interests in qualitative research methods.

website: https://www.routledge.com/Defending-Qualitative-Research-Design-Analysis-and-Textualization-1st/Cardano/p/book/9781138614055



The Italian National Health Service in a European Perspective. A Comparative Analysis.

Guido Giarelli, Vito Giovannetti (eds.), 2019



The Italian National Health Service (SSN), founded in 1978, represents a great post-war social achievement, even internationally recognized: after more than forty years, however, it is affected by a series of problems that tend to question its social equity and the universalism of services as its fundamental purposes, and which in the medium to long-term could also undermine its sustainability.

This volume analyzes first of all the latent paradoxes that characterized its realization, and then its evolution in a contradictory way: the progressive public de-financing and the creeping privatization, a corporatization without a

market and a leopard-spot managerialization, an inadequate regional devolution contradicted by measures of re-centralization, and a level of performance which, despite everything, is among the highest in the world.

After highlighting the specificities of the Italian case from different perspectives, the Italian SSN is compared with the other European NHSs according to a comparative historical perspective in order to investigate how they have faced the same problems and major challenges that in the past decades have strongly affected the health systems by the contribution of some of the major European scholars: the impact of the reforms of the British National Health Service (NHS) on the medical profession, the failed attempt to reform the Finnish health system in the Scandinavian context, the genesis and subsequent evolution of the various substantially inapplied reforms of the Portuguese Serviço Nacional de Saúde, the impact of the economic crisis on the Spanish Sistema Nacional de Salud.

The results of the final comparative analysis highlight how, beyond the points of divergence and convergence of the reform paths adopted in recent decades in the various European countries with NHSs, what is relevant for the future sustainability of these systems is the ability of each of them to elaborate differentiated answers and strategies able to adapt to the peculiarity of each specific historical context.

Circulation and Governance of Asian Medicine.

Céline Coderey (Ed.), Laurent Pordié (Ed.), 2020

This book unpacks the organized sets of practices that govern contemporary Asian medicine, from production of medications in the lab to their circulation within circuits and networks of all kinds, and examines the plurality of actors involved in such governance.

Chapters analyze the process of industrialization and commercialization of Asian medicine and the ways in which the expansion of the market in Asian medicines has contributed to the inscription of products within a large system of governance, greatly dominated by global actors and the biomedical hegemony. At the same time, the contributors argue that local actors continue to play a major role in reshaping the regulations and their



CIRCULATION AND GOVERNANCE OF ASIAN MEDICINE

Edited by

Crime Garrey and Entirely Porcie

implementation, thus complexifying the trajectory of the remedies and their natures. Examining in particular the plurality of actors involved in governance and circulation, and the converging or conflicting logics actors follow in regard to negotiations and tensions that arise, the book brings a unique multi-layered contribution to the study of governance and circulation of Asian medicines, offering further proof of their fluidity and resilience.

Filling a significant gap in the market by addressing circulation and governance of Asian medicines in Asian countries, including Bangladesh, Myanmar, and Singapore, this book will be of interest to students and scholars in the field of Asian studies, Asian culture and society, global health, Asian medicine, and medical anthropology.

https://doi.org/10.4324/9780429275418

DIGITAL INTERFERENCE. Sociological Perspectives on Technologies, Biomedicine And Gender Identity.

Veronica Moretti & Barbara Morsello

In the digital society medicine is often practiced "beyond the clinic", between self-monitoring practices and the use of apps and wearable devices. Having this in mind, what connections between arise well-being, treatment and disease? How does the relationship between individuals and their health change with the introduction of increasingly performing and personalized biomedical tools? And how do health knowledge and narratives change by using a gender perspective?

This book aims at answering to

Denessere tecnologia società

Con l'introducione di disposibili bismedici sempre più performanti e perannalizzali, come muda la relazione tra gli individui e la loro satturi? Petro che nella società digilate la medicina si descreta otre la collecti, muovendosi tra pratche di auto-montalogia e utilizzo di appe a variande divence, quali com-nessioni si censo tra bismosare cu a malatifa? Come carbitani si spere di li libro cerca di rispositore a queste di commente i e provincia di condisciple fallame che avanzano, altraverso esperienzo di ricorra ta loro divenze, nuove proportite in describuli a partire di chindrame il e introvazioni concellutari proposte dista Sociologia della satute e digili Scianco IL se ritrispori di distribi en el vari cappiti. I concombino si proposte di malati e relazioni concellutari proposte dista si concentra o si tra appetiti. Anzitutto fullizzo di nuove tecnologia per la satuta e per la incorna bismedici, che alimineta un approcio sociomitario di constituenza di concombina si proposte di concentra di co

these questions by involving the contributions of young female Italian sociologists. Through different research experiences, the authors suggest new intersectional perspectives starting from foundations and conceptual innovations proposed by Sociology of health and medicine and Science and Technology Studies.

The reflections focus on three aspects.

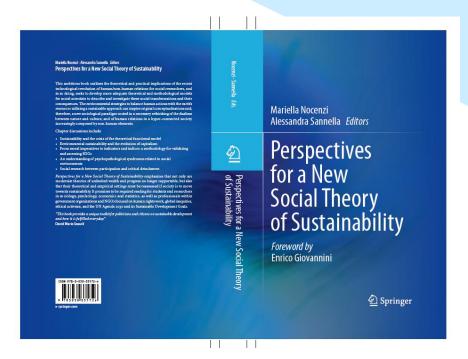
First of all, the use of new technologies for health and biomedical research, which boosts a sociomaterial approach, highlights new conceptualization, visualization and use of human body.

Furthermore, the digital approach to well-being and disease is fundamental in emphasizing the convergence between the citizen/patient perspective and their role in supporting the work of doctors and health professionals; in this scenario new surveillance forms arise.

Finally, the gender perspective is proposed as trait d'union, with a particular emphasis on the reproduction and subjectivation forms of the lived experience of illness and in the biographical narration.

Perspective of a New Social Theory of Sustainability

Mariella Nocenzi, Alessandra Sannella Editors



This ambitious book outlines the theoretical and practical implications of the recent technological revolution human/non-human relations for social researchers, and in so doing, seeks to develop more adequate theoretical and methodological models social scientists for describe and investigate these social transformations and their consequences. The environmental strategies to balance human actions with the earth's resources utilizing a sustainable approach can

inspire original conceptualizations and, therefore, a new sociological paradigm rooted in a necessary rethinking of the dualism between nature and culture, and of human relations in a hyper-connected society increasingly composed by non-human elements. Chapter discussions include: • Sustainability and the crisis of the theoretical functional model • Environmental sustainability and the evolution of capitalism • From moral imperatives to indicators and indices: a methodology for validating and assessing SDGs • An understanding of psychopathological syndromes related to social environments • Social research between participation and critical detachment. Perspectives for a New Social Theory of Sustainability emphasizes that not only are modernist theories of unlimited wealth and progress no longer supportable, but also that their theoretical and empirical settings must be reassessed if society is to move towards sustainability. It promises to be required reading for students and researchers in sociology, psychology, economics and statistics, as well as professionals within government organizations and NGOs focused on human rights work, global inequities, ethical activism, and the UN Agenda 2030 and its Sustainable Development Goals. "This book provides a unique toolkit for politicians and citizens on sustainable development and how it is fulfilled everyday."

David Maria Sassoli

ARTICLES

- Md Mizanur Rahman & Rakesh Ranjan (2019): Local migrantorganizations in the periphery: providing healthcare in India, Migration and Development, DOI:10.1080/21632324.2019.1706248. To link to this article:
- https://doi.org/10.1080/21632324.2019.170
 6248
- Chloé Tisserand, "Médecine à la frontière : le recours aux professionnels de santé afghans en contexte d'urgence humanitaire", Revue francophone sur la santé et les territoires [en ligne], déc. 2019
- Irdes, "Accès à l'Aide médicale de l'Etat (AME) et recours aux soinsdes personnes en situation irrégulière en France. Premiers résultats de l'enquête Premiers pas", Questions d'économie de la santé [en ligne], n°243-245, novembre 2019
- Simeng Wang, "Circumventing regulation and professional legitimization: the circulation of Chinese medicine between China and France", in: C. Coderey et L. Pordié (dir.), Circulation and Governance of Asian Medicine, Routledge, 2019, p. 139-156.
- Anne Gosselin, Julie Pannetier, Annabel Desgrées du Loû et al. "When and why? Timing of post-migration HIV acquisition among sub-Saharan migrants in France", Sexually Transmitted Infections, Juillet 2019
- Sabrina Volant, Gilles Pison et François Héran, "La France a la plus forte fécondité d'Europe. Est-ce dû aux immigrées ?", Population et sociétés, n°568, juillet/août 2019
- Michel Guillot, Myriam Khlat, Matthew Wallace, "Adult mortality among secondgeneration immigrants in France: Results

- from a nationally representative record linkage study", Demographic Research, juin 2019
- Lire l'article : https://www.demographicresearch.org/volumes/vol40/54/40-54.pdf
- Morgane Linard, Priscille Sauvegrain, Elie Azria et al., "Differential rates of cesarean delivery by maternal geographical origin: a cohort study in France", BMC Pregnancy and Childbirth, Juin 2019
- Annabel Desgrées du Loû, "Migrations et santé: des (nouvelles) questions de santé publique au cœur des enjeux sociétaux", Questions de Santé Publique, n°34, 2018
- Doris Bonnet et Véronique Duchesne, "Infécondité, procréation médicale et inégalités sociales" in: G. Etienne et N. Henaff (dir.), Inégalités en perspectives, 2019
- "La santé mentale en migrations internationales", REMI, 2019, n°34



- C Gatey, S. Abgrall et al. "Does region of origin influence the timing and outcome of first-line antiretroviral therapy in France?", HIV Medicine, Fev. 2019
- Lombardi L. (2019) "Proximity violence against women refugees and migrants. Experiences and good practices in the

- Milano area" in Bartholini I. (Ed.) PROXIMITY VIOLENCE INMIGRATION TIMES. A Focus in some Regions of Italy, France and Spain, FrancoAngeli, Milano
- Hilário, A. P. & Augusto, F. R. (2019) An Exploration of the Practical and Ethical Issues of Research Using Multi-Visual Methods with Children Affected by Chronic Pain. Societies, 9(4): 81. DOI: 10.3390/soc9040081.
- Hilário, A. P. & Marques, A. C. (2019) Trans youth in Portugal: Gendered Embodiments. Culture, Health & Sexuality DOI: 10.1080/13691058.2019.1649464.
- Hilário, A.P. (2019) Preferences around the disclosure of dying: a vision from

- Portuguese society. Palliative & Supportive Care DOI: 10.1017/S1478951519000324.
- Hilário, A. P. (2019) (Re) Making gender in the clinical context: a look at how ideologies shape the medical construction of Gender Dysphoria in Portugal. Social Theory & Health, 17(4): 463-480. DOI: 10.1057/s41285-019-00102-3.
- Augusto, F. R. & Hilário, A. P. (2019)
 "Through the looking glass": the emotional
 journey of the volunteer ethnographer when
 researching sensitive topics with vulnerable
 populations. The Qualitative Report, 24(13).

PHD AND POSTDOCTORAL PROJECTS

How universal is Norway's universal health system?

An investigation of maternal health services for immigrant women

Lydia Mehrara

PhD Candidate in Sociology **Email**: lydia.mehrara@nord.no

Institution: Nord University, Bodø, Norway

Abstract:

How much inequality can a universalist welfare state tolerate in its pursuit of equity? The Nordic welfare model is most generous and dedicated to achieving equality through the universal provision of social services; however, there are increasing gray areas that challenge the system. These are invoked by the conundrum of equality versus equity. Universalism is a central principle in Norwegian health policy, however changes in the socio-political environment have meant the concept as originally conceived requires a more nuanced articulation. Population changes in particular, with a growing and diverse migrant settlement, present challenges as to how to achieve the equality desired by universalist measures, at the same time as the equity demanded by diversity. This an important policy question because there are growing health disparities between the immigrant population and the ethnic Norwegian population. An indicator of this is poorer maternal health and birth outcomes among immigrant women. Through a sociological perspective, this PhD project examines the consequent effects of this equity and equality nexus in policy and practice, within the context of maternal health provisions for immigrant women in Norway from both the micro and macro levels. The scholarly contribution of this research lies in promoting a critical reflection on the evolving definition of universalism, and in contributing to a discussion on how a retheorization of the concept in Norwegian health policy can contribute to attaining equity in practice.

Keywords: Diversity; health policy; maternal health; migration; Norway; universalism.

Men, masculinities and diabetes A qualitative research on the everyday life of men with a chronic illness

Valeria Quaglia, PhD, Italy

Email: valeria.quaglia@unito.it

Institution: University of Milan, University of Turin

Time: Enrolled in October 2015 – date of PhD defense February 18, 2019

Supervisor: Roberta Sassatelli, Raffaella Ferrero Camoletto

Funding: fully funded 3-year PhD scholarship from Compagnia di San Paolo (Network of the

Advancement of Social and Political Studies, NASP)

Abstract:

National and international epidemiological data show a general male disadvantage in health, and the dominant explanation for this outcome usually points to men's beliefs and behaviors in relation to health and illness: men, it is suggested, disregard health and mismanage illness in order to fulfil social expectations around masculinity. Although such studies have been crucial in order to identify general trends, it has been observed that this approach tends to be over-simplistic. Hence, this research responds to a call for empirical studies that problematize masculinity in relation to health and focuses on men's experiences of autoimmune diabetes, which is an incurable chronic disease that requires a series of self-management practices that poses specific challenges to dominant assumptions of masculinity (e.g. eating healthy, body discipline and self-monitoring practices). The main research questions that have oriented this research are: how do men discipline their diabetic bodies? What types of masculinities are discursively performed in their illness stories? 40 in-depth interviews have been conducted to young and adult diabetic men from working- and middle-class backgrounds, and the analyses of the empirical material highlighted three main ideal-typical configurations of practices: the Diabetic Quantified Self, the Athlete and the Free Spirit. The findings point to a plural and complex understanding of masculinity and support the idea that men, along their life course, might make sense of health and illness practices in multiple ways depending on both their embodied gendered habitus and to the meanings assigned to health practices in different social contexts.

Keywords: men's health; chronic illness; masculinity; diabetes; qualitative research.

OTHER CALLS FOR PAPERS

- -"Where is Care? (Un)settling Place, Materialities and Imaginaries in the Making of Healthcare Open Panel 213", EASST 4S in Prague, 18-21 August 2020. Deadline for abstract submission: 29 February 2020. For more information, see: https://www.easst4s2020prague.org
- "Towards A Critical Medical STS", 2020 EASST + 4S joint conference, Prague, 18-21 August 2020. Deadline for abstract submission: 29 February 2020. For more information, see:https://convention2.allacademic.com/one/ssss/prague20/
- International interdisciplinary conference "Public Health and Healthcare in the Move" Opportunities and Challenges in Research, Practice and Policy, Tallinn, 28-30 October 2020. Deadline for abstract submission: 1stFebruary 2020. For more information, see: https://www.conference-service.com/PHHM2020/xpage.html?xpage=235
- The annual conference of the Medical Sociology Group of the British Sociological Association will be hosted by Lancaster University (UK) 9-11 September 2020. Abstract submission deadline: 28 April 2020. For more information, see: https://www.britsoc.co.uk/events/key-bsa-events/bsa-medical-sociology-annual-conference-2020/
- The 8th Science & Technology Studies Italia Conference "Dis/Entangling Technoscience: Vulnerability, Responsibility and Justice" (with one of the main streams dedicated to "Biomedicine, bodies and technoscience"), University of Trieste, 18-20 June 2020. Deadline for abstract submission: 9 February 2020. For more information, see:https://www.stsitaliaconf2020.com/call-for-abstracts

CONGRESSES and WORKSHOPS

- Workshop "Patients' Changing Agency in the Tension of digital and non-digital Health Communication", 4th/5th of February in Hamburg, 4-5 February 2020. For more information, see: https://www.herma.uni-hamburg.de/news/events/programm-workshop-2020.html
- Program of the "Frühjahrstagung zu soziologischen Theorien und Gesundheitsforschung" (Deutsche Sektion Medizin- und Gesundheitssoziologie), 19-20 March 2020 in Leipzig. For more information, see: https://www.dgms.de/kongress-tagungsportal/sonstige-kongresse/

JOB OPPORTUNITY

- PhD studentship, Anglia Ruskin University, Cambridge, UK [UK, EU only] - Experiences and Understandings of Paternal Postnatal Depression, For more information about the project and candidate requirements, see: https://www.findaphd.com/phds/project/experiences-and-understandings-of-paternal-postnatal-depression/?p117260. Application deadline: 9 February 2020. For applying: http://www.anglia.ac.uk/studentships.