

# Newsletter

*of the Research Committee on the Sociology of Health*



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Dear colleagues,

In this spring 2015 edition of the RC15 Newsletter, we are pleased to showcase that the initial preparations for the 2016 ISA Forum meeting in Vienna under the theme "The Futures We Want: Global Sociology and the Struggles for a Better World" are already well underway! Vice-President Guido Giarelli and myself are co-organizing the program, and we received 32 session proposals, double the number of sessions we were allotted. While that unfortunately meant we had to refuse some proposals, we did maximise participation by merging proposals on congruent topics, as well as through joint sessions hosted by other RCs. As you will see from the session descriptions in this newsletter, the upshot is that we have a vibrant program to propose to you covering the breadth of the Sociology of Health, and offering both longstanding topics of interest as well as more cutting-edge developments in this field. The call for abstracts is now open until September 30, 2015 and our sessions are listed at <http://www.isa-sociology.org/forum-2016/rc/rc.php?n=RC15>. The session organizers will be looking forward to receiving your abstract submissions in great numbers! I would also like to solicit your suggestions: ISA asked the Boards of its subgroups to each submit a leading scholars for consideration as a plenary speaker for the ISA Common Sessions. The purpose of the Common Sessions is to foster dialogue among ISA's RCs, WGs, and TGs by jointly focusing on the common theme of the Forum, on forward-oriented modes of sociology to tackle the huge challenges of our time, on the future visions of different social actors, and their struggles for a better world. Thus, I would like to ask for your help in identifying such a scholar to represent



the RC15. Please send me your nominations, consisting of a short bio and the rationale for your submission before August 1, 2015 at [amelie.quesnelvallee@mcgill.ca](mailto:amelie.quesnelvallee@mcgill.ca). This upcoming meeting also promises to be more "connected" online, as there will be a Web Forum animated by ISA to stimulate debate and discussion around the conference's theme, and promote the relevance of sociology to the general public. I also want to take this opportunity to remind you of our RC15's latest initiative to facilitate online debate and networking among RC15 members, and particularly reaching out to trainees. I created a [LinkedIn group for RC15](#), where I would encourage you to start discussions, post announcements for recent publications, meetings, or jobs, etc. Twenty-five RC15 members have already joined, and I hope you will do so as well! If you are receiving this newsletter, you should already be preapproved for membership, but do not hesitate to email me if that is not the case. I also encourage you to contact me or other board member if you have suggestions of how RC15 could better serve your needs.

Warm regards,

**Professor Amélie Quesnel-Vallée**  
**President RC15 Sociology of Health**

*McGill University, Canada*

Email: [amelie.quesnelvallee@mcgill.ca](mailto:amelie.quesnelvallee@mcgill.ca)

Chers collègues,

Les préparatifs en vue de la troisième édition du Forum de l'ISA aura lieu du 10 au 14 juillet 2016 à Vienne, en Autriche, « Les Avenirs que nous voulons : La sociologie mondiale et les luttes pour un monde meilleur » vont bon train! En tant que co-organisateurs du programme du comité de recherche 15 pour ce Forum, Vice-Président Guido Giarelli et moi avons reçu 32 propositions de sessions. Cela s'avérant le double du nombre de sessions qui nous ont été allouées, nous avons la difficile tâche de refuser certaines sessions; néanmoins, nous avons maximisé la participation des soumissionnaires en joignant des sessions sur des thèmes connexes, ainsi qu'en s'alliant à d'autres comités de recherche pour proposer plus de sessions. Je vous enjoins donc à répondre en grand nombre à notre appel d'abrévés, que vous pouvez trouver au <http://www.isa-sociology.org/forum-2016/rc/rc.php?n=RC15>, et qui sera ouvert jusqu'au 30 septembre 2015. J'aimerais également solliciter votre aide: l'ISA a demandé au conseil de chacun de ses sous-groupes de nommer un chercheur de renom pour représenter notre sous-discipline en session plénière dans les *Common Sessions* de l'ISA. L'ISA entend tenir ces sessions pour favoriser le dialogue entre les nombreux comités de recherche, groupes de travail et groupes thématiques, autour d'enjeux pertinents au thème du Forum. Ce thème général invite ainsi à s'interroger sur la multiplicité des possibles, des projets, des visions d'avenir, et entend accueillir une grande diversité d'approches, y compris des collaborations sur la base de travaux comparatifs et interdisciplinaires. Je vous demande donc de nous aider à identifier une telle personne en me soumettant vos suggestions consistant d'une brève biographie ainsi que d'un paragraphe expliquant ce que les recherches de cette personne apportent au thème du Forum, d'ici le 1er août, à [amelie.quesnelvallee@mcgill.ca](mailto:amelie.quesnelvallee@mcgill.ca). Le Forum s'annonce également prometteur au niveau des interactions en ligne. L'ISA prévoit en effet un *Web Forum* visant stimuler les débats entre les sous-disciplines, ainsi qu'à promouvoir la contribution de la sociologie auprès du public. Les membres de l'exécutif de RC15 y participeront, et nous diffuserons ces contributions auprès de nos membres pour animer la discussion à l'approche du Forum. Je profite également de cette occasion pour vous rappeler que nous avons maintenant un groupe [LinkedIn pour RC15](#), où je vous encourage à entamer des discussions, afficher des annonces de publications récentes, de colloques, des offres d'emplois, etc. Vingt-cinq membres ont déjà joint le réseau, et j'espère que vous en ferez de même! Si vous recevez ce bulletin, vous devriez déjà être pré-approuvés pour l'adhésion, mais n'hésitez pas à me contacter si ce n'est pas le cas ([amelie.quesnelvallee@mcgill.ca](mailto:amelie.quesnelvallee@mcgill.ca)). En somme, nous espérons que vous apprécierez les efforts de notre exécutif pour assurer la vitalité de notre comité de recherche, mais si vous avez des suggestions qui pourraient nous permettre de mieux rencontrer vos besoins, n'hésitez pas à nous en faire part!

Bien cordialement,  
Amélie Quesnel-Vallée

Estimadas y estimados colegas,

En la edición de primavera de 2015 del Boletín Informativo de Comité de Investigación 15 (CI-15) nos place señalarle que las preparaciones del Fórum de la AIS-2016 a realizarse en Viena, cuyo lema es “Los futuros deseados: La sociología global y las luchas por un mundo mejor” van muy bien encaminadas. El Vicepresidente Guido Giarelli y yo estamos coorganizando el programa. Recibimos un total de 32 propuestas para las sesiones, el doble del número que finalmente formalizamos. Aunque ello lamentablemente significó dejar de lado algunas propuestas, sí ampliamos la participación a través de la fusión de propuestas que compartían varios de sus elementos, y además de juntar otras sesiones organizadas por otros comités de investigación. Como usted podrá ver en las descripciones de este boletín informativo, uno de los principales logros es que contamos un programa vibrante, que nos permite cubrir ampliamente varios tópicos de la Sociología de la Salud, incluyendo varios temas de interés de larga trayectoria y de importante desarrollo innovador en esta área. El llamado de resúmenes ya está abierto y su fecha de cierre es el 30 de Septiembre de este año. Cada una de las sesiones se encuentra en el siguiente enlace <http://www.isa-sociology.org/forum-2016/rc/rc.php?n=RC15>. Los responsables de cada sesión ya están atentos de recibir vuestros resúmenes, los cuales creemos llegarán en gran volumen. También aprovecho de solicitarle que considere enviarme sus sugerencias. La AIS invitó a los miembros de los subgrupos a que propusieran nombres de académicos destacados para que fueran oradores en los plenarios de las Sesiones Comunes de la AIS. El objetivo de las Sesiones Comunes es promover y fortalecer el diálogo entre los Comités de Investigación, Grupos de Trabajo, y Grupos Temáticos para que de manera conjunta nos podamos enfocar sobre el tema principal del Fórum, modos de sociologías vanguardistas que aborden los más importantes desafíos de nuestros tiempos, las visiones de futuros de los distintos actores sociales y sus luchas por un mundo mejor. Por lo anterior, me gustaría solicitarle me ayude a identificar qué académico podría representar al CI-15. Por favor envíeme sus propuestas de nominación antes del primero de Agosto de 2015 a [amelie.quesnelvallee@mcgill.ca](mailto:amelie.quesnelvallee@mcgill.ca). Dicha propuesta deberá consistir en una mini biografía y justificación de dicha nominación. Este próximo encuentro promete estar más “conectado”, ya que habrá un Foro Web animado por la AIS con el objeto de estimular el debate y la discusión sobre el tema principal de la conferencia, además de promover la relevancia de la sociología al público general. Quiero aprovechar esta oportunidad de recordarle de nuestra última iniciativa como CI-15 para fomentar el debate online y formación y fortalecimiento de redes de trabajo entre los miembros del CI-15, y en particular para acercarse a los estudiantes en práctica. He creado el grupo [LinkedIn para el CI-15](#), donde le animo a iniciar discusiones, anuncios de publicaciones recientes, reuniones, encuentros, ofertas laborales, entre otras. 25 miembros del CI-15, ya están inscritos, y espero usted también lo haga. Si usted está recibiendo este boletín informativo, su membresía ya debería estar pre-aprobada, pero no dude en enviarme un correo electrónico si esta no ha sido su situación. También los animo a que contacten a otros miembros del directorio o a mí, en caso de que tengan algunas sugerencias sobre cómo el Comité de Investigación 15 podría adaptarse a vuestras necesidades.

Me despido atentamente  
Amélie Quesnel-Vallée

# Life of RC15 - Sociology of Health

The Futures We Want: Global Sociology  
and the Struggles for a Better World



3<sup>rd</sup> ISA Forum of  
SOCIOLOGY



July 10-14, 2016  
Vienna, Austria

## Call for Abstracts

**Deadline for submission: 30 September 2015 24:00 GMT**

**Anyone interested in presenting a paper should submit an abstract on-line to a chosen session of RC/WG/TG**

**The abstract (300 words) must be submitted in English, French or Spanish at [www.isa-sociology.org/forum-2016/](http://www.isa-sociology.org/forum-2016/)**

## RC15 Sociology of Health

### Program Coordinators

Guido GIARELLI, University Magna Graecia, Italy, [guido\\_giarelli@tin.it](mailto:guido_giarelli@tin.it)

Amélie QUESNEL-VALLEE, McGill University, Canada,

[amelie.quesnelvallee@mcgill.ca](mailto:amelie.quesnelvallee@mcgill.ca)

## SESSIONS

1. RC15 Business Meeting
2. Towards a Comparative Perspective on Citizens' and Civil Society Organizations' Participation in Healthcare
3. Drug Use and Local and Global Public Policies of Health: New Tensions, Complementation or Changes for Not Change?
4. Aging, Health and Life Course: Theoretical Issues and Methodological Problems
5. Welfare States and Health Care Systems: In Search for Solutions to Social Inequalities in Health
6. Integrating Complementary and Alternative Medicine in Healthcare
7. Missing in Action? Sociological Analysis and the Provision of Public/Private Healthcare
8. The Future Health Workforce We Need: Professions, Policy and Planning
9. Same-Sex Families and Health
10. Constrained Choice and Health Disparities
11. Exploring the Nexus of Health, Religion/Spirituality and Healing
12. Gender, Health and Migration in Transnational Context. Rights, Policies, Accessibility
13. On Social Plasticity: The Transformative Power of Pharmaceuticals on Health, Nature and Identity
14. E-Health (Electronic Health) and Informatization of Medicine
15. Migration of Physicians and Nurses: Global Health (Non) Governance?
16. Health Inequalities in Comparative Perspective

## 1. RC15 Business Meeting

## 2. Towards a Comparative Perspective on Citizens' and Civil Society Organizations' Participation in Healthcare

**Session Organizer(s):** Benjamin MARENT, benjamin.marent@lbihpr.lbg.ac.at, Ludwig Boltzman Institute, Austria

Session in English

Across the world, citizens' and civil society organizations' participation in healthcare decision-making and research is increasingly implemented as method of good governance. Participation is a complex phenomenon that is practiced in different forms leading to diverse experiences and outcomes. Against this background, we invite theoretical contributions that improve our understanding of this phenomenon as well as empirical studies that reveal the challenges and consequences of participatory practices. Contributions may address the following questions:

- How do the increasing calls for participation relate to societal changes and what are their underlying rationalities?
- How can different forms of participatory processes be analysed by using concepts of power and/or knowledge production?
- How do different actors (e.g. citizens, caregivers, healthcare professionals) experience diverse forms of participation and which tensions or opportunities do arise from their engagement?
- What kinds of requirements (e.g. resources and competences) are considered to be necessary for specific participatory practices and what is their impact on health services and research?
- What are the wider societal consequences of the reconfiguration of relations between professionals and citizens e.g. in terms of active citizenship and opportunities to counteract the overwhelming medicalization of life?

By encouraging a systematic discussion of different participatory practices and their outcomes the session intends to disclose a step towards a comparative perspective that may offer new ways to conceptualize, investigate and generate evidence on citizens' and civil society organizations' participation in healthcare decision-making and research.

## 3. Drug Use and Local and Global Public Policies of Health: New Tensions, Complementation or Changes for Not Change?

**Session Organizer(s):**

Victoria SÁNCHEZ ANTELO, vsanchezantelo@gmail.com, Universidad Nacional de Tres de Febrero, Argentina

Session in Spanish, English

Global policies affecting drug use congregate aspects of security, terrorism and health. Locally, health promotion's strategies become complex by their interaction with a wide variety of social practices: use of leisure, nightlife, tourism, but also risk behaviors, addictions and / or crimes.

Also, some states have ventured into the legalization of marijuana use. For neighbor countries,

where the criminalization continues, it has introduced new political tensions, since they become a structuring axis of drug-users' collective action.

The debate is open, social actors are numerous and motivations are different. Among the arguments it intends to decriminalize by respect for individual freedoms and to facilitate access to underserved populations; but is also powered by actors with more economic interests, oriented to the profitability of the new markets, that a civil rights; also allow greater medical power on privacy, privatization of health services, and greater emphasis on assistance but not necessarily in prevention.

How global-local tension is expressed in strategies for health promotion and prevention? What new challenges propose the changes in legislation? Are different social actors disputed, complemented or changed so that nothing changes?

We expect papers with analysis of:

- a. Local socio-historical processes and their relationship to the global policies;
- b. Stakeholders involved in the processes of change or aimed the status quo;
- c. New notions of health and drug use in decriminalization context;
- d. Framework that enable/hinder actions aimed to prevention and health promotion in drug-use contexts.

#### **4. Aging, Health and Life Course: Theoretical Issues and Methodological Problems**

##### **Session Organizer(s):**

Guido GIARELLI, [guidogiarelli@tin.it](mailto:guidogiarelli@tin.it), University "Magna Graecia", Catanzaro, Italy

Session in English

**Session organizers:** Guido Giarelli RC15 and Giuseppina Cersosimo RC11

In most countries, life expectancy and longevity continue to rise, along with significant improvements in health also during the old age. These trends are radically destabilizing conventional notions of ageing and old age, traditionally considered as synonymous of illness and disability; even the idea of a "natural" lifecourse following normatively and socially defined stages ending in infirmity has been challenged by biomedical developments and cultural changes. The increasingly differentiated idea of "normal" ageing rises a certain number of theoretical issues involved: to what extent a normatively based conception of lifecourse, ageing and old age is still possible? If yes, on which biological, social, psychological and cultural basis? How can we distinguish the boundaries among the newly reconfigured domains of the "natural" and of the "normal" of one side, and of the pathological on the other side? And what is the specific contribution of sociology to an integrated gerontological approach?

Finally, healthy ageing is favourable for individuals, but also for society, reducing healthcare costs and enabling citizens to remain socially and economically active. It also opens up new opportunities for social innovation, to cater for the health and wellbeing needs of a growing sector of society.

Even at the methodological level, a number of issues can be raised: how can we integrate qualitative approaches with quantitative ones? How can we evaluate the impact of the new healthy ageing on society and healthcare systems?

We invite to present both theoretical and empirical contributions.

## 5. Welfare States and Health Care Systems: In Search for Solutions to Social Inequalities in Health

### Session Organizer(s):

Tuba AGARTAN, tagartan@providence.edu, Providence College, USA

Claus WENDT, wendt@soziologie.uni-siegen.de, University of Siegen, Germany

Session in English

How do welfare systems impact the social determinants of health? Comparative studies have shown that health inequalities remain a serious problem for countries without mature welfare states as well as for generous welfare states in Europe with universal health care systems. However, at the same time, the great variance in the size of social inequalities in health across countries indicates that these inequalities are amenable to social and health policy intervention. So, why do social inequalities persist and what can we do to reduce them?

This panel invites both theoretical and empirical studies that aim to answer this question. We are interested in studies that examine the mechanisms underpinning welfare state policies, their impact on social inequalities in health as well as papers that explore the intersectionality of socio-economic-, gender- and ethnicity-based health inequalities. Comparative studies as well as single-country case studies focusing on determinants of health inequalities are welcome.

## 6. Integrating Complementary and Alternative Medicine in Healthcare

### Session Organizer(s):

Mike SAKS, m.saks@ucs.ac.uk, University Campus Suffolk, United Kingdom

Nelson BARROS, filice@fcm.unicamp.br, Professor, Brazil

Session in English

Complementary and alternative medicine (CAM) has become ever more important in many modern societies – with a fast growing range of users, increasing numbers of practitioners and a rising proportion of healthcare spending on this area. At the same time, though, in terms of potential philosophical and other conflicts between CAM and medical orthodoxy, it is very important that ‘the baby is not thrown out with the bath water’ and that CAM is employed in a selective and synergistic way with the best of conventional healthcare to the benefit of the public. This leads to several questions about how this might be achieved through integration in attaining a desirable future: What is the current comparative evidence base? How methodologically should the relative strengths and weaknesses of CAM and medical orthodoxy be evaluated? Should there be greater coordination of the providers of CAM and orthodox medicine? What issues are posed in these circumstances by multi-professional working and communication? How should CAM and orthodox medicine be funded in terms of public and private sector resourcing? Should CAM practitioners be integrated into mainstream health services? Or is it more effective if CAM is integrated through delivery by orthodox practitioners? What implications does this have for education and regulation? Under what conditions might integration be most likely to occur? And, crucially, how might this impact on users? Abstracts are very welcome on these questions and related themes, focused on one or more countries, in this regular paper presentation session.

## 7. Missing in Action? Sociological Analysis and the Provision of Public/Private Healthcare

### Session Organizer(s):

Fran COLLYER, fran.collyer@sydney.edu.au, The University of Sydney, Australia

Karen WILLIS, Karen.Willis@acu.edu.au, Australian Catholic University, Fitzroy, Australia

Session in English

Health care systems across the world are grappling with the challenges of healthcare provision, including in particular, the increasing private provision of healthcare services. For many years, healthcare has been viewed as a public good, but this has been replaced with the view that services should be delivered by the market. Surprisingly, there has been little sociological analysis of the implications of this change for patients, providers and governments. This is despite increased concern in the media about rising inequalities in patient access to healthcare and deteriorating health outcomes as public resources are withdrawn or redirected. We are therefore aiming for a lively debate about our field of medical sociology/health sociology and its potential – in particular:

- analytical and explanatory pieces about the lack of extended, critical sociological analysis of these changes to healthcare systems;
- reviews of past trends in medical/health sociology and reflections on future directions;
- assessments of sociology's past contributions to the health field and reasons for the current lacuna;
- reflections about the changing context of medical/health sociology and its influence on the way sociologists produce knowledge about health.

We invite two types of papers – full papers reporting on theoretical or empirical research; or brief reports – reflections or work-in-progress on contemporary issues in health/medical sociology, with the focus remaining on the public/private healthcare nexus. Participants are asked to specify whether their paper is 'brief' or 'full'.

## 8. The Future Health Workforce We Need: Professions, Policy and Planning

### Session Organizer(s):

Ellen KUHLMANN, e.kuhlmann@em.uni-frankfurt.de, Goethe-University Frankfurt, Germany

Session in English

Health workers are crucial for better healthcare for all people, but available data highlight a widening gap in future health human resources as well as alarming imbalances in the skills and the geographical distribution of health professionals. Imbalances exist within professional groups, sectors, and healthcare systems as well as between them. Here globalization and austerity politics have increased the inequality in health human resources, and this in turn calls for new approaches to health workforce policy and governance both locally and globally. Most recently, the Ebola crisis has dramatically revealed the importance of health professionals and the need for a global approach to workforce planning, but there are also alarming imbalances in certain areas of resource-rich countries. Added to this, there is a growing demand for new forms of professionalism that are better able to integrate complex caring demands of the citizens, skill-mixes, and the competencies of professionals with diverse social backgrounds, including gender, ethnicity and age. This Joint

Session of RC15 and RC52 seeks to highlight the need for multi-level governance and research and to further comparative approaches. We invite papers that address a range of dimensions, levels and areas of health workforce issues, including healthcare policy, planning and management as well as migration, mobility and gender equality either in one country or in comparative perspective.

## 9. Same-Sex Families and Health

### **Session Organizer(s):**

Justin DENNEY, [jtdenney@rice.edu](mailto:jtdenney@rice.edu), Rice University, USA

Session in English

Decades of research on families and health have provided evidence of the importance of family relationships and resources for individual well-being. These studies span outcomes related to daily stress, health behaviors, and mortality and focus on adults in marital and other kinds of relationships, as well as their children. Largely missing from this body of work are systematic, population-level studies of health and well-being for children and adults in same-sex families, broadly construed as families composed of two men or two women and, in some cases, their children. A growing number of governments around the world are debating the legal recognition of same-sex unions and what they might mean for health. Meanwhile, dozens of countries legally recognize same-sex unions. This session invites all submissions that contribute to understanding the health and well-being of family members of same-sex families, legally recognized and not, across the world to help fill this important void in the families and health literature.

## 10. Constrained Choice and Health Disparities

### **Session Organizer(s):**

Patricia RIEKER, [rieker@bu.edu](mailto:rieker@bu.edu), Boston University, USA

Chloe BIRD, [chloe@rand.org](mailto:chloe@rand.org), Rand, USA

Session in English

The proposed session will invite papers on how constrained choice shapes health capacity and disparities. Constrained Choice Theory articulates how social position and policies determine the options individuals have in making everyday choices that cumulatively impact their lives and health. Such personal agency may be impeded or enhanced at times by interactions among social positions such as gender, class, race/ethnicity, or sexual orientation. The constraints that affect an individual's agency and decision-making can occur at the levels of family, work, community, and broader public policy and operate to narrow or expand the range and relative economic and noneconomic costs associated with the options. Current research will examine how constrained choice works with extreme cases, those living at a given society's margins, as well as those in other social positions. The examples will include the myriad of personal constraints and laws or policies that differentially disadvantage particular racial/ethnic, immigrant groups or sexual minorities by creating barriers to education, employment and other routine activities, with far reaching consequences for all aspects of individuals' lives. Constraints can also affect the personal agency, life chances, and health of advantaged groups in more subtle ways. Papers for the session will examine how the options that an individual has, or can afford to choose from, are socially and economically patterned in ways that contribute to differential exposures and risks, thereby shaping life chances across various health conditions and outcomes.



## 11. Exploring the Nexus of Health, Religion/Spirituality and Healing

### Session Organizer(s):

Alex ASAKITIKPI, alex.asakitikpi@monash.edu, Monash South Africa, South Africa

Session in English

The variability of health, illness, and medicine in different socio-cultural contexts is well known and acknowledged in sociology, what is less known is the relationship between health and the various modes of healing adopted by human groups especially those in non-western societies. Non-biomedical forms of healing have been relatively confined to non-western societies for centuries until recently. However, the ubiquitous forms of non-western healing practices in western societies (referred to as alternative medicine or holistic medicine) today suggest their increasing popularity and appeal as an important alternative to biomedicine. Within the context of dwindling economic fortunes, invasive biomedicines, and the need for wholeness, it is appropriate to examine the complex and often misunderstood relationship between health, religion/spirituality and the healing process. In this session, we will explore this grey area of health and medicine. We invite theoretical and/or empirical papers that focus on any aspect of the following areas: interrogation of the key concepts of healing, curing, religion/spirituality and sickness/illness; theorization of the body in relation to illness and healing; esoteric and metaphoric language in the healing process; the socio-economic dimension of alternative medicine; gender differentials in healing practices; religion/spirituality and chronic diseases.

## 12. Gender, Health and Migration in Transnational Context. Rights, Policies, Accessibility

### Session Organizer(s):

Mara TOGNETTI, mara.tognetti@unimib.it, University of Milan-Bicocca, Italy

Lia LOMBARDI, rosalia.lombardi@unimi.it, ISMU Foundation (Iniziativa e Studi sulla Multietnicità), Italy

Session in French, English

With reference to the theoretical and epistemological approaches of sociology this session aims to relate the socio-economic determinants with social policies and with the health status of migrant people. Given that the dimension of health is a key factor to understand the system of inequalities, both social and gender, the aim of the session is to show the relationship among health, gender and migration highlighting, through a transnational perspective, both the social construction of gender inequality and the "multiple discrimination" due to the overlap of inequalities related to gender, migrant status and social conditions. Another objective of this session is to understand the role of policies for containing gender and health inequalities. In particular, we analyze the rights of migrant women (regular, undocumented, refugees, nomads) in different countries, their ability to access to healthcare services, including reproductive health (childbirth, abortion, female cancers prevention, etc.). Therefore, we urge scholars and researchers to participate in this session by sending theoretical and/or empirical contributions dealing with one of the following topics:

- the determinants of health related to gender and migration;
- reproductive health and rights of migrant women in the countries of immigration;
- the impact of the european economic crisis on the health status and living conditions of

migrant people;

- conflicts and forced migration in the Middle East and Europe. Health and gender conditions;
- gender policies, migration and welfare in the European and Mediterranean area;
- working and health conditions of migrant women.

### 13. On Social Plasticity: The Transformative Power of Pharmaceuticals on Health, Nature and Identity

#### Session Organizer(s):

Johanne COLLIN, johanne.collin@umontreal.ca, University of Montreal, Canada

Session in English

Drugs can be envisaged as major devices of a *pharmaceutical regime* constituted of networks of actors, institutions and artefacts as well as cognitive structures (Williams et al., 2011). However, although pharmaceuticals are considered as «[t]he most dominant and portable mechanisms of biomedicalisation» (Clark et al., 2010: 44), most studies focus either on macro-analyses of structures, institutions and collective actors that produce, market and use pharmaceuticals or on micro-analyses of specific drug trajectories.

The goal of this regular session is thus to invest the *interzone* between these two major trends, by exploring, through case studies as well as theoretical papers, the role of medications *per se* in transforming perspectives and shaping contemporary subjectivities (Collin, accepted).

Many studies on medicalization have shown how drugs contribute to the blurring of boundaries between health and illness. However, we suggest that drugs also play a major role in the process of molecularisation through enhancement and the transformation of what is considered natural and artificial in everyday life, and in the shifting of the border that separates ethically acceptable extensions of corporal limits from the unacceptable ones. Finally, through biosocialisation, medications would play a significant role in the blurring of boundaries between conformity and resistance to dominant social norms. To develop a theoretical and empirical reflection around this interzone, we aim at soliciting communications on the role of pharmaceuticals in relation to 1) the production of new normativities; 2) biosocialisation and identity; 3) new corporal territories and the extension of the body's limits.

### 14. E-Health (Electronic Health) and Informatization of Medicine

#### Session Organizer(s):

Gul SECKIN, gul.seckin@unt.edu, University of North Texas, USA

Session in English

The eHealth technologies have produced a revolutionary change in availability and amount of health and medical information accessible to patients. Sometimes referred to as the informatization of medicine, a whole new field of knowledge around medical information and communication technologies has emerged. There is an estimated over 1,500,000 smartphone applications, out of which nearly 14,000 are health applications available for user download in Apple's application store. A search in 2012 for health and fitness yielded nearly 16,000 applications

for Android consumers. The number of people who downloaded health related smartphone applications reached 247 million in 2012 around the globe. Research studies indicate that eight in ten people browse the Internet for health information and/or support, which makes it one of the most common online activities. This widespread use of the Internet and mobile health applications provides a new technology-based platform for interactive health service provision. The purpose of this session is to explore the synergy between information and communication technologies, health, and medicine. This proposed session aims to map out the current state of knowledge in this rapidly growing body of research in the following areas listed below:

Area 1: Online Patient Networks

Area 2: Healthcare

Area 3: Cyber seniors and Intergenerational Comparisons/Trends

Area 4: (Electronic) Health Information Literacy and Information Quality

Area 5: Medical Interactions and Communication between Doctor and Patient

Area 6: Self-Care

Area 7: Digital Health Divide

The proposed session will be in a roundtable session format.

## 15. Migration of Physicians and Nurses: Global Health (Non) Governance?

### Session Organizer(s):

Joana SOUSA RIBEIRO, joanasribeiro@ces.uc.pt, Centre for Social Studies, University of Coimbra, Portugal

Yuko HIRANO, hirano@nagasaki-u.ac.jp, Nagasaki University, Japan

Session in English

Labour migration of physicians and nurses is a challenge to the regulation of health in its national scope. The expansion of professional jurisdiction not only reconfigures trust, autonomy and occupational competence, but also expands the role of institutional actors (among others, professional associations, government agencies and training institutions).

We welcome presentations based on the analysis of the recruitment and professional reskilling process of internationally educated physicians and nurses, notably involving Asian countries.

International recruitment, bilateral agreements, supranational regulations, government and non-governmental programs of professional skilling are explored in view of the globalization of the labor market in health, the transnational dimension of qualifications and the international process of health inequalities (re) production.

Given the current economic and financial european crisis, it is of particular relevance the study of the mechanisms of "care" and its intersection with employment, education and migration regimes.

## 16. Health Inequalities in Comparative Perspective

### Session Organizer(s):

Amélie QUESNEL-VALLÉE, amelie.quesnelvallee@mcgill.ca, McGill University, Canada

Peter KRIWY, peter.kriwy@soziologie.tu-chemnitz.de, Technische Universität Chemnitz, Germany

Sigrun OLAFSDOTTIR, sigrun@bu.edu, Boston University, USA

Session in English

In contrast with inequalities in health that stem from biological differences brought about by age or genetics, *social* inequalities in health are mutable and avoidable, as they are affected by public policies. In recognition of the importance of these social influences on population health and inequalities, the World Health Organization adopted in 2012 the resolution WHA62.14 endorsing the Rio Political Declaration on Social Determinants of Health (SDH).

Through this resolution, member states recognize the existence of social determinants of health and pledge to implement actions outlined in the Rio declaration, among which to “monitor progress and increase accountability to inform policies on SDH”. The success of this monitoring depends notably on the availability and quality of population data and its careful analysis through designs or methods allowing for causal inference. The primary objective of this session is to showcase the leading edge of international research on social inequalities in health. The session aims to encourage international exchanges in order to demonstrate the range of research practices and outputs.

## Joint Sessions

Click on the session title to read its description and the scheduled day/time.  
**[Aging Society and New Welfare Policies](#)**

Joint session of RC11 Sociology of Aging [host committee] and RC15 Sociology of Health

**[Aging, Health and Life Course: Theoretical Issues and Methodological Problems](#)**

Joint session of RC11 Sociology of Aging and RC15 Sociology of Health [host committee]

**[Drug Use and Local and Global Public Health Policies: New Tensions, Complementation or Changes to Not Change?](#)**

Joint session of RC15 Sociology of Health [host committee] , RC42 Social Psychology and RC49 Mental Health and Illness

**[Health Inequalities in Comparative Perspective](#)**

Joint session of RC15 Sociology of Health [host committee] and RC20 Comparative Sociology

**[Language on Health and Disease](#)**

Joint session of RC25 Language and Society [host committee] and RC15 Sociology of Health

**[The Future Health Workforce We Need: Professions, Policy and Planning](#)**

Joint session of RC15 Sociology of Health [host committee] and RC52 Sociology of Professional Groups

**[Welfare States and Health Care Systems: In Search for Solutions to Social Inequalities in Health](#)**

Joint session of RC15 Sociology of Health [host committee] and RC19 Poverty, Social Welfare and Social Policy

## *Introduction of Japanese sociological and social welfare studies Messages to the World*

In XVIII ISA World Congress of Sociology held at Yokohama in 2014, the Japan Consortium for Sociological Societies, which consists of more than 30 leading associations of sociology and social welfare, edited the book entitled *Messages to the World* in order to introduce Japanese sociological and social welfare studies to the participants of Congress. The Japanese Society of Health and Medical Sociology (JSHMS) contributed the paper, "The Great Expansion of Health & Medical Sociology in Japan: Past, Present, and Future", to the book. You can have access to the web version of book in the JSHMS English web site (*Messages to the World* page).

URL: [http://square.umin.ac.jp/medsocio/index\\_e.htm](http://square.umin.ac.jp/medsocio/index_e.htm)

Masahiko Kaneko,  
RC15 member, former chairperson of  
**International Exchange Committee at JSHMS**



## *Vienna ISA Forum 2016 Blog*

### *Call for participation*

The ISA Vice-President Research, Markus Schulz, and the Chair of the Local Organizing Committee, Rudolf Richter, of the Third ISA Forum of Sociology in Vienna, July 2014, cordially invites ISA Research Committees, Working and Thematic Groups to participate in the ISA Forum Blog: <http://isaforum2016.univie.ac.at/blog>

The blog serves to promote the ISA Forum 2016 in Vienna and should help to prepare a lively conference. With this blog we wish to encourage interaction between individual scholars as well as many participant groups. Local Organizing Committee and Austrian and Central European Sociology: the institutes represented in the LOC are contributing content related to their respective locations concerning Austrian sociological thought, research on the host country and continent (for example on history and history of science) and the theme of the Forum.

Members of the LOC introduce themselves by presenting their main issues of research and publications of interest concerning the forum's theme.

We would like to invite you to coordinate participation in the blog from your RC/WG/TG. Possible contributions:

- A discussion of the ISA Forum main theme "*The Futures We Want: Global Sociology and the Struggles for a Better World*" from the perspective of your RC/WG/TG
- A presentation of your ongoing research and upcoming RC/WG/TGs sessions in Vienna, initiating a pre-forum discussion to be continued at the Forum.
- A worldwide perspective on topics discussed within the Central and Eastern European context
- An introduction of the work and thematic focus of the president of the RC/WG/TG in form of an interview

The posts should ideally encourage interaction, address the reading public and invite them to leave comments and contribute their own perspective on the topic discussed. The texts should be written in English and the length of each post should be max. 1000 words, shorter posts are very welcome.

We ask interested RCs/WGs/TGs to send their contributions to

**Celi Scalon**

[celiscalon@gmail.com](mailto:celiscalon@gmail.com)

and

**Dieter Bögenhold**

[dieter.boegenhold@aau.at](mailto:dieter.boegenhold@aau.at)

## *New partnerships for Health Sociology Review*

The Australian Sociological Association (TASA) have formed new partnership with Taylor and Francis / Routledge to publish *Health Sociology Review*, an international peer-reviewed journal for high quality conceptual and empirical research in the sociology of health, illness and medicine.

*Health Sociology Review* is one of only a small group of international journals dedicated to promoting contemporary research and debate regarding the sociological aspects of health and illness. While the journal has had a long history in Australia, it has had an increasingly international scope, and with this new publisher will be seeking to showcase the best and most current work in health sociology from around the world.

A new editorial team has also been appointed to lead the journal into this new era. Led by Joint Editors Joanne Bryant and Christy Newman, at the Centre for Social Research in Health at UNSW Australia, the editorial team has an international reach, with core members located across Australia (Peter Aggleton at UNSW, Sarah Maclean at the University of Melbourne, Fran Collyer at the University of Sydney), Canada (Peter Nugus at McGill University) and the USA (Fernando de Maio at DePaul University). A newly reconstituted International Editorial Board will contribute to shaping the international direction of the journal, with a strong and dynamic team of high profile and emerging health sociologists representing key regions and interests across the globe.

The editors are now actively inviting high quality submissions in their efforts to further grow and internationalise the journal. Original research papers and critical reviews on matters of central importance to health sociology and related fields are invited. All submissions are subject to careful double-blind peer review, and the editorial team aims to keep review timeframes as brief as possible in order to harness the currency of cutting edge work in these fields.

To mark the new publishing and editorial arrangements for this journal, Taylor and Francis is offering free access to all manuscripts published in the first issue of 2015. Further details can be found on the *Health Sociology Review* website <http://www.tandfonline.com/rhsr> and you can follow the journal on Twitter @HealthSocRev for timely updates regarding journal news, events and publications.



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## PUBLICATIONS

For upper-division undergraduate/beginning graduate-level courses in Medical Sociology, and for Behavioral Science courses in schools of Public Health, Medicine, Pharmacy, and Nursing. A comprehensive overview of the most current issues in medical sociology. The standard text in the field, *Medical Sociology* presents the discipline's most recent and relevant ideas, concepts, themes, issues, debates, and research findings. To draw students into the course, author Dr. William Cockerham integrates engaging first-person accounts from patients, physicians, and other health care providers throughout the text. The Thirteenth Edition addresses the current changes stemming from health care reform in the United States, and other issues that reflect the focus of the field today.

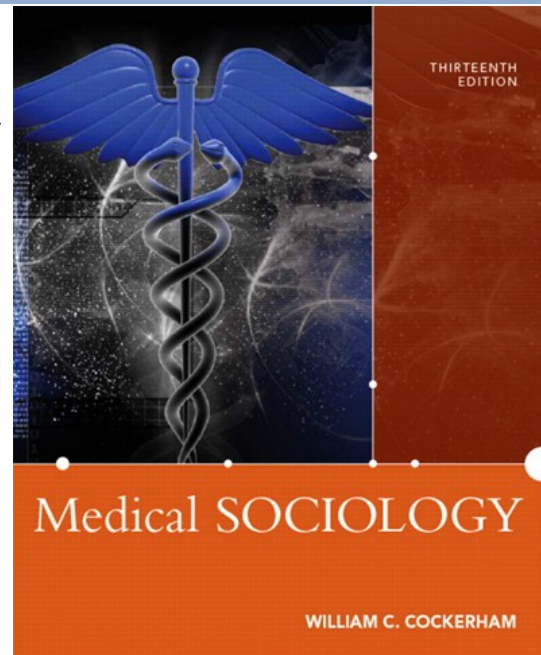
**New To This Edition:** New and updated coverage of the latest developments in the field

- Chapter 1 includes coverage of Ebola, MERS, and updates on other pandemics.
- Chapter 2 incorporates a new discussion of obesity as a disease.
- Chapter 4 has been updated to include new information on the decline of life expectancy among rural American white women.
- Chapter 5 offers fresh material on biomarkers, gene-environment interaction, and stress.
- Chapter 10 has been revised to include analysis of the role of the hidden curriculum in medical schools.
- Chapter 15 includes an extensive review of the Affordable Care Act, the most important policy change in American health care delivery in years.

*Medical Sociology*, 13/E. William C. Cockerham, University of Alabama, Birmingham

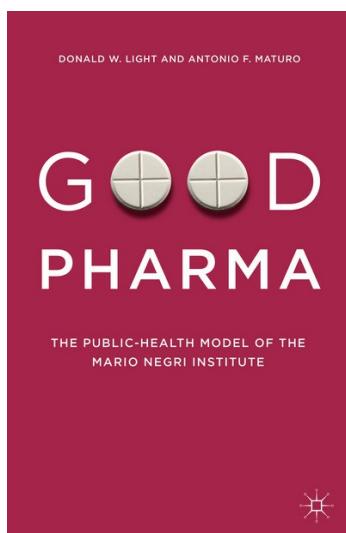
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Jul 2015 £65.00 **£45.50**  
\$95.00 **\$66.50**  
288 pp235 mm x 152 mm

Donald W. Light is Professor of Comparative Health Policy at Rowan University, USA and has published widely in major medical and sociological Journals on ethical as well as sociological issues. Recently, he served as the Lokey Visiting Professor at Stanford University, USA and as a Visiting Fellow at Harvard University, USA.

Antonio Maturo is Associate Professor of Sociology of Health at Bologna University, Italy and Visiting Professor at Brown University, USA. He has published several books in Italian and he has edited *The Medicalization of Life* (2009, with P. Conrad) and *The Medicine of Emotions and Cognitions* (2012, with K. Barker).

## Good Pharma

The Public-Health Model of the Mario Negri Institute  
Donald W. Light and Antonio F. Maturo

A model of Institutional Integrity to address corruptions of research, medical knowledge, and practice

Available to pre-order at a special price from June 2015  
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"...combines a devastating critique of the pervasive harms of patent-driven medical research by the pharmaceutical industry with a compelling account of an alternative..."

-Erik Olin Wright, Vitas Distinguished Professor, University of Wisconsin,  
Past President American Sociological Association

"...a bright light on a remarkable approach to conducting pharmacological research in the public interest... research motivated by...a social mission centered on compassion for and responsibility to the vulnerable, sick and suffering."

-Arthur L Caplan, Mitty Professor of Bioethics, New York University

### About the book

*Good Pharma* describes a working model of institutional integrity that bypasses the many ways that commercialized research has corrupted transparent science, valid results, and trustworthy clinical practice. It is the answer to Goldacre's book, *Bad Pharma*: ethical research without commercial distortions that mislead doctors and patients.

On the basis of key concepts in sociology and management, the authors describe the history of a remarkable institute that has elevated medical research and worked out solutions to the troubling practices of commercial pharmaceutical research. This extended case history of the Mario Negri Institute describes how a brilliant young researcher, Silvio Garattini, and a boldly imaginative philanthropist, Mario Negri, conceived of an independent, ethics-based research institute to develop better medicines for patients rather than medicines better for patenting.

Drawing on its public health model, the Institute developed the first methods for founding the WHO Essential Medicines List, as well as regional and national formularies of effective, safe drugs. It was an early partner with the Cochrane Collaboration, and it campaigned to reduce secrecy and commercial influences on how drugs are approved

The public health model of the Mario Negri Institute offers a breakthrough, already-successful way to develop better drugs at much lower prices than today's costly, wasteful drug, with few benefits for patients. An important book to provoke discussion in global public health, science and technology, history, and ethics courses.

### \*Special offer with this flyer valid from 1st June 2015 until 31st August 2015

This price is available to individuals only. This offer is not available to our trade and library customers. Offer only valid outside Australasia & Canada. Orders must be placed direct with Palgrave Macmillan.

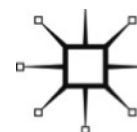
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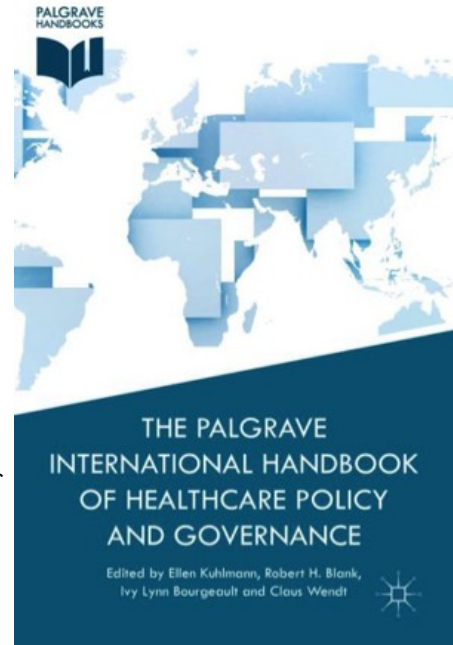
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**The Palgrave International Handbook of Healthcare Policy and Governance, Basingstoke: Palgrave, 2015, edited by E. Kuhlmann, R.H. Blank, I.L. Bourgeault and C. Wendt**

Healthcare policy is one of contemporary society's most dynamic policy arenas. Heightened pressures such as the global economic crisis, demographic changes, and inequity have increased interest in international, transnational, and global health policy. Yet, new concepts of healthcare may create diverse and contradictory results around the world that call for careful empirical investigation and for a systematic approach that brings the complexity of governing healthcare into perspective.

This international handbook brings together a group of 70 authors from all over the world. In 39 chapters key themes in the debates over changing healthcare policy are addressed. This includes health human resources planning; major concepts of management and leadership in healthcare; traditional and emergent areas of governance; and the challenges of equity and equality in the development, provision of, and access to healthcare services for diverse groups of citizens. With a focus on connections, including global and local perspectives, and macro-and micro-level policy using a multi-level governance approach, this handbook provides nuanced research that illuminates the intricate issues in global healthcare policy and governance.



For more information please visit the publisher's website; <http://www.palgrave.com/page/detail/the-palgrave-international-handbook-of-healthcare-policy-and-governance-ellen-kuhlmann/?K=9781137384935>

# THE NEW ISA RC 15 BOARD 2014-2018

## Officers and Board members contact information (with terms of appointment):

**Amélie Quesnel-Vallée**, *President*

(2010-2018)

[Amelie.quesnelvallee@mcgill.ca](mailto:Amelie.quesnelvallee@mcgill.ca)

**Guido Giarelli**, *Vice-President, Newsletter Editor*

(2010-2018)

[guido\\_giarelli@tin.it](mailto:guido_giarelli@tin.it)

**Stephanie Short**, *Secretary-Treasurer*

(2010-2018)

[stephanie.short@sydney.edu.au](mailto:stephanie.short@sydney.edu.au)

**Jonathan Gabe**, *Past-President*

(2006-2016)

[j.gabe@rhul.ac.uk](mailto:j.gabe@rhul.ac.uk)

**Masahira Anesaki**

(2010-2018)

[anesaki\\_m@yahoo.co.jp](mailto:anesaki_m@yahoo.co.jp)

**Jennie Jacobs Kronenfeld**

(2010-2018)

[Jennie.Kronenfeld@asu.edu](mailto:Jennie.Kronenfeld@asu.edu)

**Ellen Kuhlmann**

(2010-2018)

[Kuhlmann@em.uni-frankfurt.de](mailto:Kuhlmann@em.uni-frankfurt.de)

**Alex Asakitikpi**

(2014-2022)

[alex.asak@yahoo.com](mailto:alex.asak@yahoo.com)

**Michael Calnan**

(2014-2022)

[m.w.calnan@kent.ac.uk](mailto:m.w.calnan@kent.ac.uk)

**Miwako Hosoda**

(2014-2022)

[miwhosoda@seisa.ac.jp](mailto:miwhosoda@seisa.ac.jp)

**Mike Saks**

(2014-2022)

[M.Saks@UCS.AC.UK](mailto:M.Saks@UCS.AC.UK)

