

Newsletter

of the Research Committee on the Sociology of Health



Sociology
of Health

Letter from the President of RC15

CONTENTS

2 - 28

LIFE OF RC15

2018 Toronto XIX ISA
World Congress of
Sociology
RC 15 sessions final
programme

30 – 31

Recent activities

Annual conference of
the Japanese society of
health & medical
sociology

32 – 34

FUTURE EVENTS

35 – 38

PUBLICATIONS

39

MEMBERSHIP

Dear colleagues,

On the following pages we list all the Toronto Congress sessions organised by RC15 and some in conjunction with other RCs. I am sure you will agree with me that we have a very stimulating scientific program, testament to the vibrant RC15 research community. In what follows, I would like to draw your attention to a couple of events and new features of the program.

As they were a success in Vienna, we again have two roundtable sessions, on Monday, 16 July 2018, 17:30-19:20 and on Wednesday, 18 July 2018: 10:30-12:20, both in 501 MTCC South Building. We hope you will appreciate this format, which allows us to include more participants and stimulate small group discussions.

Please also mark your calendars for the business meeting on Wednesday July 18, 17:30-19:00 in 714B MTCC South Building to learn more about RC15 and its administration. We will be holding elections to the Board this year, so it's never too early to get involved!

Finally, I hope you will join us for our reception on Wednesday July 18 at 19:30 for what promises to be a delightful evening of socializing at the Mill St. Beer Hall in historic Distillery district (see p. 29 for more details). As in previous years, this event is held jointly with RC52.



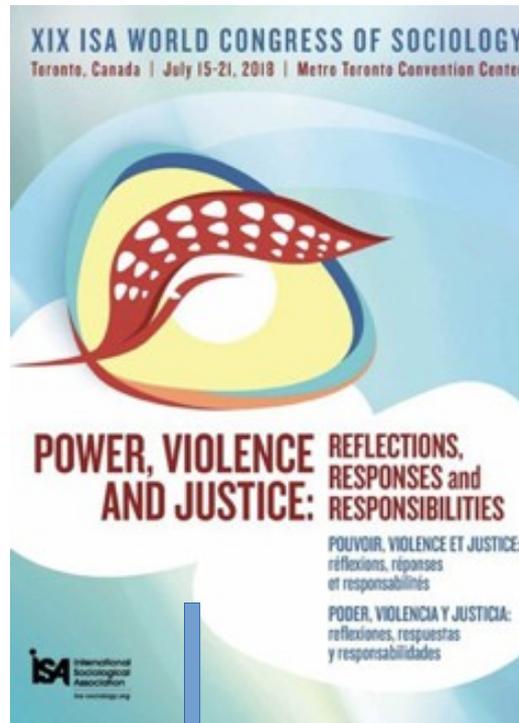
For the full online RC15 program, please consult <https://isaconf.confex.com/isaconf/wc2018/webprogram/Symposium452.html>.

I and other members of the Steering Committee are very much looking forward to meeting those of you who will be attending the Congress in Toronto and hope you enjoy what we expect to be a very memorable occasion.

Best wishes,

Professor Amélie Quesnel-Vallée
President RC15 Sociology of Health
Canada Research Chair in Policies and Health Inequalities, McGill University
Email: amelie.quesnelvallee@mcgill.ca

Life of RC15 - Sociology of Health



RC15 Sociology of Health

Program Coordinators:

Amélie QUESNEL-VALLEE (McGill University, Canada) and **Guido GIARELLI** (University 'Magna Graecia' - Catanzaro, Italy)

Final Programme

Monday, 16 July 2018

JS-1

Health Inequalities in Aging Populations: Canadian Contributions

Monday, 16 July 2018: 10:30-12:20

Location: 718A (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

RC11 Sociology of Aging

Language: English and French

The extension in high-income countries of systems of income support and access to health care for large, if not all segments of the elderly population undoubtedly counts as one of major successes of public policy over the past century (OECD 2013). It is perhaps not surprising then to note that today's elderly find themselves in much better health than their parents and grandparents did in

their older age (Crimmins et al., 2004). Indeed, relative to the past, older populations in developed countries have improved functioning and are afflicted with less disability on average (Wolf et al., 2005); however, these improvements may not have been equally gained across the elderly population (Taylor, 2008). Indeed, the body of literature regarding health inequalities among the elderly is growing, as the assumption that the older population is a rather homogeneous group in this regard is increasingly discarded (Grundy and Holt, 2001).

This notably raises the question of the current capacity of social policies to mitigate health inequalities among the elderly. As such, we propose here to review sociological theories that are most germane to health inequalities in older ages in developed countries, with an eye to their capacity to illuminate processes of social inequality driven by social policies. Then, we will critically examine the explicit intent and implicit capacity of current social policies to mitigate these inequalities among the elderly population. This invited session will focus on Canadian contributions in this area.

Session Organizers:

Amelie QUESNEL-VALLEE, McGill University, Canada and Anne MARTIN-MATTHEWS, Department of Sociology, The University of British Columbia, Canada

Co-chairs:

Amelie QUESNEL-VALLEE, McGill University, Canada and Anne MARTIN-MATTHEWS, The University of British Columbia, Canada

Oral Presentations

JS-1.1 Welfare State Support in Aging Populations

Daniel BELAND, University of Saskatchewan, Canada

JS-1.2 Caregivers and Health Inequalities in Aging Populations

Janice KEEFE, Department of Family Studies & Gerontology, Mount Saint Vincent University & Director, Nova Scotia Centre on Aging, Canada

JS-1.3 Caregiving: Global Implications

Ito PENG, University of Toronto, Canada

JS-1.4 Cumulative Advantage and Health Inequalities

Andrea WILLSON, University of Western Ontario, Canada

Monday, 16 July 2018: 15:30-17:20

Location: 716A (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

At a time when many western countries are experiencing increased prosperity, inequalities in healthcare remain and are even sustained. In this session, the sociology of Bourdieu will be used to illustrate how current trends in healthcare entrench health inequalities. While social inequalities in health have been documented in many studies of the Western world, inequality is defined by family socioeconomic background and social class status. There has been less focus on the relationships that create and reproduce social inequality in health; or the way that tensions and struggles within the healthcare field are also implicated in the shaping of inequality. At a time when corporatization and privatization of healthcare coexists or subsumes traditional bases of public provision we need new ways of explaining emergent structures of inequality. Papers in this session will draw on empirical work from a range of countries such as the US, UK, Australia, Denmark and Norway using Bourdieu to examine health inequality, with a particular focus on healthcare financing and care within institutions such as public and private hospitals, outpatient clinics, rehabilitation centers, and individual projects and investments towards health. The selected papers will highlight differing approaches to the use of key concepts such as capital, habitus and field in order to strengthen the theoretical grasp on the mechanisms of day to day production and reproduction of healthcare inequality.

Session Organizer:

Kristian LARSEN, University of Aalborg, Campus Copenhagen, Denmark, Denmark

Chair:

Grace KHUNOU, University of Johannesburg, South Africa

Oral Presentations

281.1 Through the Lens of Bourdieu: The Evolution of Responses to HIV and AIDS in South Africa

Katinka DE WET, University of the Free State, South Africa

281.2 Inequalities in Choice: Australian Accounts of Healthcare Preferences and Perceptions

Karen WILLIS, La Trobe University, Australia; Sophie LEWIS, University of Sydney, Faculty of Health Sciences, Australia

281.3 Healthcare Inequalities in Contemporary Clinical Encounters: The Lens of Cultural Health Capital

Leslie DUBBIN, University of California, San Francisco, USA; Jamie CHANG, University of California, San Francisco, USA; Janet SHIM, University of California, San Francisco, USA

281.4 Citizens' Engagement in the Health Sector Decision-Making across Europe

Silvia CERVIA, Pisa University, Italy

281.5 Dis-Embodied Habitus in a Disabling Field: A Tentative Framework for Thinking about the Complexity of Disability, Symbolic Violence and Ableism

Sasha SCAMBLER, King's College London, United Kingdom

281.6 Health Capital: An Empirical Study of Danish Healthcare Professionals' Bodily Investments

Kristian LARSEN, University of Aalborg, Campus Copenhagen, Denmark, Denmark; Ivan HARSLØF, HIOA University College, Norway; Karin HØJBJERG, Aalborg University, Denmark, Denmark; Anette HINDHEDE, Aalborg University, Denmark, Denmark

Distributed Papers

281.7 Understanding Behaviour Change in Context. the Role of Sociology in Social Marketing Health Programmes

Nadina LUCA, University of York, United Kingdom

282

Open Roundtable Session on the Sociology of Health - Part 2

Monday, 16 July 2018: 17:30-19:20

Location: 501 (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

This is a roundtable sessions featuring various topics of the sociology of health.

Session Organizer:

Amelie QUESNEL-VALLEE, McGill University, Canada

Chairs:

Cristina GOMES, Facultad Latinoamericana de Ciencias Sociales, FLACSO Mexico, Mexico, Joana ALMEIDA, Royal Holloway, University of London, United Kingdom, Jonathan GABE, Royal Holloway, University of London, United Kingdom and Katinka DE WET, University of the Free State, South Africa

Roundtables:

Gender and health

Chair:

Cristina GOMES, Facultad Latinoamericana de Ciencias Sociales, FLACSO Mexico, Mexico

Oral Presentations:

282.1 A Critique on Progress: The Sociology of Gay Men's Mental Health in a Period of Social Acceptance and Biomedical Advancement

Mark GASPARG, University of Toronto; Daniel GRACE, University of Toronto

282.2 Regional Healthcare Service Provision By Gynecologists and General Practitioners for Women 49 Years of Age and Older in Germany

Cornelia THIERBACH, Technische Universität Berlin; Lorena DINI, Charité - Universitätsmedizin Berlin

282.3 Women's Sexual Health and Gender Hierarchies: An Empirical Study of Menstruation in Hyderabad Slums

Ajailiu NIUMAI, Centre for the Study of Social Exclusion & Inclusive Policy, University of Hyderabad, Telangana, India

282.4 "I Asked for It": How Women Experience Stigma in Their Transition from Being Infertile to Being Mothers of Multiples through Assisted Reproduction Technologies

Navjotpal KAUR, Memorial University of Newfoundland; Rose RICCIARDELLI, Memorial University of Newfoundland

Distributed Papers:

282.5 Contested Medical Practices and Women's Body : Situating Precocious Puberty in South Korea

HeeYoung LEE, Sociology. Chung-Ang Univ.; Na-Young LEE, Sociology. Chung-Ang Univ.

Health behaviours

Chair:

Joana ALMEIDA, Royal Holloway, University of London, United Kingdom

Oral Presentations:

282.6 Fattening up Health: Embracing a Sociology of Health in Fat Studies Research

Kelsey IOANNONI, York University

282.7 French Configurations of the Promotion and Practices of Fasting: Emerging Tools of Reflexivity and Ongoing Blurring Boundaries between Conventional and Unconventional Medicine

Patrice COHEN, Université de Rouen Normandie; Laura BELLENCHOMBRE, Dysolab, EA 7476, Université de Rouen Normandie; François FÉLIU, University of Rouen - Dysolab

282.8 Paths of Rapid Dietary Transformation: Disaster, Military Occupation, and Migration of the Marshall Islanders

Jin Young CHOI, Sam Houston State University; Anthony WINSON, University of Guelph

282.9 Shaping Food Consumption on Instagram Among 18-34 Young Adults

Monique CARON BOUCHARD, UQAM (Université du Québec)

Distributed Papers:

282.10 Cultural Drivers of Health-Seeking Behaviours Among Black Sub-Saharan Africans Living with Type 2 Diabetes: Ethnographic Perspectives

Damilola OYEWOLE, Nottingham Trent University; Linda GIBSON, Nottingham Trent University

282.11 Functional Foods: The Proto-Medicalisation of Everyday Life and the Biopolitics of Prevention

Paulo MONTEIRO, Lisbon University Institute

Sociological Perspectives in Health Services Research

Chair:

Jonathan GABE, Royal Holloway, University of London, United Kingdom

Oral Presentations:

282.12 Sociologising Maternity Care to Inform Workforce Capability Investment and Maximize Health Gains for Urban Indigenous Families

Sophie HICKEY, Mater Research Institute-University of Queensland

282.13 Epistemic Injustices and Mental Health : Can Peer Support Workers Help Bridging the Hermeneutical Gap between Service Users and Health Practitioners ?

Baptiste GODRIE, Montreal Research Center on Social Inequalities and Discriminations

282.14 Community Engagement and Building Institutional Resilience: Exploring Quarantine Ethics, Social Processes and Options for Nigeria

Ebunoluwa ODUWOLE, Department of Philosophy, Olabisi Onabanjo University, Ago-Iwoye, Ogun State, Nigeria; Isaac ADEDEJI, Department of Sociology, Olabisi Onabanjo University, Ago-Iwoye, Ogun State, Nigeria; S. Akinmayowa LAWAL, Department of Sociology, Olabisi Onabanjo University, Ago-Iwoye, Ogun State, Nigeria; Sunday ALUKO-AROWOLO, Department of Sociology, Olabisi Onabanjo University, Ago-Iwoye, Ogun State, Nigeria

282.15 Genetic Citizenship in Rare Diseases Policy: Patient's Participation for Genomic Science Research

Saori WATANABE, Meiji Gakuin University

Distributed Papers:

282.16 [Strategies of Health Care Functions in Japan: An Application of Parsons' Theory](#)

Masahiko KANEKO, National Defense Medical College

282.17 [How and When Do People Move between Traditional and Modern Medicine in Post-Disaster Settings?](#)

Yuko OTAKE, London School of Hygiene & Tropical Medicine

282.18 [A Sociological Analysis of the Doctor-Patient Relationship \(A qualitative study in the city of Ahvaz, Iran\)](#)

Masoumeh SHAFATI, PHD Candidate of Sociology University of Tehran; Mohamad Javad ZAHEDI, Faculty Member of Payame Noor University

Work and Health**Chair:**

Katinka DE WET, University of the Free State, South Africa

Oral Presentations:

282.19 [The Social Nature of Occupational Distress. Francophone Social Workers in a Minority Setting Faced with Structural and Institutional Changes in Healthcare in Ontario, Manitoba and New-Brunswick.](#)

Maude LÉVESQUE, University of Ottawa; Lilian NEGURA, University of Ottawa

282.20 [Stress Level Along Professional Groups and Educational Indicators](#)

Laura Isabel SCHOGER, University of Wuerzburg

282.21 [Activating the 'Inactive'. Employment Policy for Disabled People in Germany in a Comparative View](#)

Angela RAUCH, Institute for Employment Research; Regina KONLE-SEIDL, Institute for Employment Research

282.22 [Unemployment and Health in the Neoliberal Era: Towards a Political Economy of Widening Health Inequalities](#)

Faraz VAHID SHAHIDI, University of Toronto; Arjumand SIDDIQI, University of Toronto; Carles MUNTANER, University of Toronto; Ketan SHANKARDASS, University of Toronto; Carlos QUIÑONEZ, University of Toronto

Distributed Papers:

282.23 [Work Environment of Nurses in a Metropolitan and Suburban Hospital - a Comparative Study in West Bengal](#)

Tannistha SARKAR, University of Calcutta

282.24 [Morbidity with Temporary Work Incapacity in Russian Regions: Do Macrosocial Determinants Explain the Difference?](#)

Natalia LEBEDEVA-NESEVRIA, Federal Scientific Center for Medical and Preventive Health Risk Management Technologies; Mihail TSINKER, Federal Scientific Center for Medical and Preventive Health Risk Management Technologies

Social inequalities and health**Oral Presentations:**

282.25 [Design of a Qualitative Study of Health Inequality in Madrid Neighborhoods. Hhh Project.](#)

Jesus RIVERA-NAVARRO, University of Salamanca; Manuel FRANCO, Social and Cardiovascular Epidemiology Research Group. Universidad de Alcala, Madrid; Maria SANDIN, Social and Cardiovascular Epidemiology Research Group. Universidad de Alcala; Marta GUTIERREZ SASTRE, Salamanca University; Paloma CONDE ESPEJO, University of Alcala

282.26 [Youth Mental Health, Poverty, and Social Inequality: Youth, Parent & Service Provider Perspectives](#)

Brandi BELL, University of Prince Edward Island; Sarah GALLANT, University of Prince Edward Island

282.27 [Are the Self-Rated Health, Education and Economics the Best Indicators to Measure the Social Perception and Behaviour in a Public Health Survey?: A New Framework for Measurement Invisible Inequalities](#)

Giovanna GABRIELE, Health Inequalities Research Group (GREDS-Emconet), JHU-UPF Public Policy Center, Pompeu Fabra University, Barcelona; FocusHealth Research Institute, Barcelona, Spain

282.28 [Revisiting the Cost of Skin Color in African American Adolescents](#)

Patricia LOUIE, University of Toronto

Monday, 16 July 2018: 17:30-19:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

The historical forces of slavery, colonialism, and imperialism have culminated in a structural imbalance of power relations between erstwhile colonial masters and colonial states and this is still evident in virtually every aspect of the global south including healthcare services. One of the subtle, but profound philosophy for the imposition of western medicine as mainstream (and therefore dominant) healthcare system, is the labelling of non-western health systems as irrational, inferior, and retrogressive. In this session, we would like to challenge this widely adopted myth by not only exploring the historical antecedents that propelled the penetration of health corporate capitalism in the global south, with its underlying economic interests and cultural domination, but also by analysing the emergence of renewed interests in other forms of medicine. Non-western traditions of healing need proper and systematic engagement by scholars to explore their potential impacts on non-western societies and globally. Thus, this session is intended to attract the submission of abstracts by scholars to discuss:

1. The ideological and philosophical musings on power relations that underpin health policies in the global south and their impact on healthcare delivery;
2. The circumstances, challenges, and prospects of indigenous healing practices focusing on specific countries;
3. A reconsideration of the theoretical and epistemic assumptions of western and non-western medicines;
4. The ideological and economic factors that frame health policies in the global south;
5. Empirical research on non-western healing practices; and
6. The complexities, challenges, and opportunities that characterize non-western medicines in the global south and globally.

Session Organizer:

Alex ASAKITIKPI, Monash University South Africa, South Africa

Oral Presentations

283.1 Negotiation and Medicalization of Transgender Identities at a Thai NGO

Alyssa LYNNE, Northwestern University, USA

283.2 Health Rumours and Global-Local Knowledge: Science, Nonsense and Resistance

Sarah RUDRUM, Acadia University, Canada

283.3 Beyond Western Medicine: Interrogating Magun As a Cultural and Medical Reality

Aretha ASAKITIKPI, Osun State University, Nigeria

283.4 The Historical Entanglement with Power and Interest: Western Medicine Versus African Medicine.

Alex ASAKITIKPI, Monash University South Africa, South Africa

Distributed Papers

283.5 Discourses Associated with Reproduction in Movements for a Humanized Birth in Argentina

Raquel DROVETTA, National Scientific and Technical Research Council (CONICET), Argentina

283.6 Knowledge and Attitudes about Breast Cancer Among Women: A Wake-up Call in Nigeria

Tayo GEORGE, Covenant University, Department of Sociology, Nigeria, Nigeria; Tolulope ALLO, Covenant University, Nigeria; Tomike OLAWANDE, Covenant University, Nigeria

Tuesday, 17 July 2018

Tuesday, 17 July 2018: 08:30-10:20

Location: 718A (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

RC32 Women in Society

Language: English

This session seeks papers about gender, equity and reproductive rights in the context of transnational mobility and justice. We are particularly interested in theoretical and empirical studies that examine the gendered and justice dimensions of mobile bodies, mobile diseases and healthcare with a focus on women's sexual, reproductive and maternal health rights. The focus of this session is on the complex forms of border crossing and the ways transnationality shapes people's embodied experiences and the mobile diseases that affect them. For example, topics of interest include mobile diseases, such as the sexually transmitted diseases Human Papilloma Virus (HPV), Hepatitis B (HBV), HIV, and Zika; emergent infectious diseases such as Dengue fever and Ebola and the targeting of public health measures particularly on women's and their children's bodies; gendered issues related to the women's health care, imagery and social imaginaries of mobile bodies in cross border travel to receive medical care, escape violence, war and the collapse of nation states; or the provision of care in non-places (Augé), such as refugee camps, detention centers, ports of entry, and off-shore sites (e.g., Women on Waves).

Session Organizers:

Susan BELL, Drexel University, USA and Anne FIGERT, Loyola University Chicago, USA

Co-chairs:

Susan BELL, Drexel University, USA and Anne FIGERT, Loyola University Chicago, USA

Oral Presentations

JS-17.1 Transnational Health Flows and Local Inequalities: Medical Tourism and Transgender Rights in Thailand

Rebecca FARBER, Boston University, USA

JS-17.2 Victimization & Stigmatization of Newcomers: Approaches in Handling Female Genital Mutilation in Canada

Sally OGOE, University of Manitoba, Canada

JS-17.3 A Theoretical Analysis of How and Why British Citizens May Feel Forced to Access Transnational Care to Fulfil Their Reproductive Desires in Relation to Genetic Editing

Amarpreet KAUR, University of Cambridge, United Kingdom

JS-17.4 Sociology of Health and Women

Penny DOWEDOFF, York University, Canada

JS-17.5 Surrogacy Regulation Bill 2016, India: A Critical Analysis

Rajni BALA, Baring Union Christian College, Batala, India

Distributed Papers

JS-17.6 Cross-Border Reproductive Care: The Impact of the Opinion and the Attitudes of the Society Toward Surrogacy in Women's Reproductive Rights

María José RODRIGUEZ JAUME, University of Alicante, Spain; Diana JARENO RUIZ, University of Alicante, Spain

JS-26

Health Professions: Future International Directions. Part One

Tuesday, 17 July 2018: 10:30-12:20

Location: 718B (MTCC SOUTH BUILDING)

RC52 Sociology of Professional Groups (host committee)

RC15 Sociology of Health

Language: English

This session focuses on the health professions in a global context – including the global south as well as north. It particularly centres on likely future regulatory directions that may be taken by the healthcare labour force, based on historical and contemporary developments in the health division of labour. Key questions covered will include: How do we ensure that professional health regulation meets public interest concerns in considering power and justice in both dystopian and utopian futures? How best do we promote more expansive and inclusive public participation mechanisms for users in healthcare? What might be the future role in healthcare of currently high status, but besieged, professional groups like doctors? And what does the future hold for other health professions like nurses and other allied health professions? What too might their future links be to relatively unsung but vital support workers in the healthcare labour force that are more closely linked to the precariat? At a wider level, what might be the

effects of trends such as corporatization, deprofessionalization, hybridization and restratification on the health professions? And how important in shaping the future professional division of labour in health systems will be factors like knowledge, technology, and professional leadership? This session invites single country and comparative papers which consider these and other issues at an empirical and/or theoretical level – drawing out the implications where appropriate for policy development and practice in national, international and wider global settings.

Session Organizers:

Michael SAKS, University of Suffolk, United Kingdom and Mike DENT, Staffordshire University, United Kingdom

Chair:

Mike DENT, Staffordshire University, United Kingdom

Oral Presentations

JS-26.1 At the Social and Care Border : Redefining the Balance of Power in the Field of Elderly Care

Alexandra GARABIGE, Institut national d'études démographiques, France; Loïc TRABUT, National Institute of Demographic Studies, France

JS-26.2 Evolution of the Role of Family Physicians in the Context of Their Interprofessional Collaboration with Advanced Nurse Practitioners

Nancy CÔTÉ, Université Laval, Canada; Andrew FREEMAN, Université Laval, Canada; Emmanuelle JEAN, Université du Québec à Rimouski, Canada

JS-26.3 Contemporary Directions of the Brazilian Medical Professionalism in the Context of the Professional Governance in Health of SUS

Fabio ALMEIDA, Federal University of São Carlos, Brazil

JS-26.4 Who Does What ... and Where? Perceptions of Resident Physicians in Periphery Hospitals about the Contents of Their Residency Program and Their Implications

Paula FEDER-BUBIS, Ben-Gurion University of the Negev, Israel

Distributed Papers

JS-26.5 The Professionalization of Perinatal Support: “Doula” Work in a Canadian Context

Christina YOUNG, PhD Candidate, University of Toronto, Canada

JS-26.6 The Impossible Clinic: A Critical Sociology of Evidence-Based Medicine

Ariane HANEMAAYER, Brandon University, Canada

JS-29

Social Inequalities in Mental Health and Illness

Tuesday, 17 July 2018: 15:30-17:20

Location: 801B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

RC49 Mental Health and Illness

Language: French and English

Session Organizer:

Amelie QUESNEL-VALLEE, McGill University, Canada

Chair:

Cynthia CREADY, University of North Texas, USA

Oral Presentations

JS-29.1 Atypical Employment Forms and Health Inequalities – Multiple Job Holding As Mental Health Risk?!

Lena HÜNEFELD, Federal Institute for Occupational Safety and Health, Germany; Maria U. KOTTWITZ, Faculty of Psychology, Work and Organizational Psychology, Philipps University of Marburg, Germany; Steffen SCHUMMER, Faculty of Psychology, Work and Organizational Psychology, Philipps University of Marburg, Germany; Kathleen OTTO, Faculty of Psychology, Work and Organizational Psychology, Philipps University of Marburg, Germany

JS-29.2 Multigenerational Attainments and Mortality Among Older Men: An Adjacent Generations Approach

Joseph WOLFE, University of Alabama at Birmingham, USA; Shawn BAULDRY, Purdue University, USA; Melissa HARDY, Pennsylvania

State University, USA; **Eliza PAVALKO**, Indiana University, USA

JS-29.3 Struggling with Stigma: LGBTQ+ Student Mental Health Service Use across American Post-Secondary Institutions

Nicole MALETTE, The University of British Columbia, Canada

JS-29.4 Men and Distress: Help-Seeking, Coping and Daily Management

Alexandra VICKERY, Cardiff University, United Kingdom

JS-29.5 Cumulative Histories of Co-Occurring Childhood Adversities and Trajectories of Psychological Distress in Adulthood

Loanna HEIDINGER, University of Western Ontario, Canada

Distributed Papers

JS-29.6 Measuring Health Inequalities Among Migrant and Native Population in Greece at Times of Crisis.

Theoni STATHOPOULOU, National Centre for Social Research- EKKE, Greece; **Terje Andreas EIKEMO**, Norwegian University for Science and Technology, Norway

JS-29.7 Social Change and the Evolution of Gender Differences in Depression: An Age-Cohort Consideration

Andreea MOGOSANU, University of Toronto, Canada; **Laura UPENIEKS**, Department of Sociology, University of Toronto, Canada

JS-29.8 Religion and Mental Health Intervention in Ghana

Michael OKYEREFU, University of Ghana, Ghana; **Daniel FIAVEH**, University of Cape Coast, Ghana, Ghana

JS-29.9 Social Inequalities in Mental Health and Illness – the Significance of an Interconnecting, Multi-Factorial and Dynamic Approach

Carin NYMAN, Halmstad University, Sweden

Tuesday, 17 July 2018: 17:30-19:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

Social relationships have been widely recognized for their powerful effects on physical and mental health, as they have been associated with a broad variety of health outcomes, such as depression, heart disease, disability, cognitive functioning, longevity and survival. An explanation is that individuals access and capitalize a wide array of material and immaterial resources through their set of social relationships, called social network.

Previous research on health inequalities has shown that variations in health often base on differences in access to social capital from social networks. While much of this research has focused on the country and the neighborhood level, less is known about how differences in social networks emerge at the individual level. For example, socio-demographic factors including employment status, income, education, gender and ethnicity may partially drive individual inequalities in social capital and health.

More complicatedly, the individuals' ability to foster and maintain a resourceful network also depends on their physical and mental health, which in turn is linked to socio-demographic characteristics, so that inequality, social networks and health are strongly interwoven.

This session takes a closer look at social networks as drivers, modifiers and outcomes of health inequalities. There is no a priori focus on qualitative, quantitative contributions or theoretical concepts.

- There are the links between social networks and physical, mental health and risk behavior?
- What do we know about social networks with different social or socio-economic status (e.g., migrants, jobless persons, persons of older age). Do differences in their social networks relate to inequalities in health?

Session Organizers:

Markus GAMPER, University of Cologne, Germany, **Lea ELLWARDT**, University of Cologne, Germany, **Peter KRIWY**, Chemnitz University of Technology, Germany and **Andreas KLÄRNER**, Thünen Institute for Rural Studies, Germany

Chair:

Lea ELLWARDT, University of Cologne, Germany

Co-Chair:

Philip ADEBAHR, University of Technologie Chemnitz, Germany

Oral Presentations**284.1 Changes in Social Networks and Changes in Health: What Drives What?**

Martina BRANDT, TU Dortmund, Germany; **Christian DEINDL**, TU Dortmund, Germany

284.2 Distance Caregiving (DiCa): Care Potential across National Distances and International Boundaries

Annette FRANKE, EH Ludwigsburg, Germany; **Birgit KRAMER**, EH Ludwigsburg, Germany; **Pirkko Marit JANN**, EH Ludwigsburg, Germany; **Ulrich OTTO**, Careum Forschung, Switzerland; **Iren BISCHOFBERGER**, Careum Forschung, Switzerland; **Karin VAN HOLTEN**, Careum Forschung, Switzerland

285

Anti-Globalization and Inequality in Migrants' Health

Tuesday, 17 July 2018: 19:30-20:50

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

The recent phenomenon of the anti-globalism movement, which is observed in the USA and European countries, has inflated hate and physical and psychological violence—the inequality of health—against migrants who have settled in host countries. It may also affect either the flow or stagnation of migration between sending and receiving countries. Definitely, the inequality of migrants' health is an issue pertaining to individual migrants and relevant in the countries sending and receiving these people.

Therefore, to protect the human rights of migrants, sociologists must investigate the socio-cultural and economic background of the issue of inequality of health from a long term and broader perspective.

This session welcomes presentations on the status of migrants' health and inequality of health of countries and regions. A multi-disciplinary approach towards health and illness as well as the working and living environments of migrants is welcome, as it may provide a clear, objective, and practical vision of how to protect the human rights of migrants in an era characterized by anti-globalization movements.

Session Organizer:

Yuko HIRANO, Nagasaki University, Japan

Chair:

Yuko HIRANO, Nagasaki University, Japan

Oral Presentations**285.1 Occupational Injury and Experiences of Suffering Among Latino and Latina Immigrants in Los Angeles, California and Returnee Migrants in Mexico.**

Angel SERRANO-SANCHEZ, Universidad de Guanajuato, Mexico

285.2 National Origins, Social Context and Length of Time on the Physical and Mental Health of Caribbeans in and Outside Canada

Krim LACEY, University of Michigan-Dearborn, USA; **Anthony BRIGGS**, University of Toronto, Canada; **James JACKSON**, University of Michigan, USA

285.3 Sexual and Reproductive Health Needs of Female Labor Migrants from Central Asia in St. Petersburg, Russia

Victoria DUDINA, St. Petersburg State University, Russian Federation; **Elizabeth J. KING**, University of Michigan, USA

285.4 How Social Support Affect Co-Ethnic Elderly's Health in Mexico and in the United States

Yulin YANG, University at Buffalo, SUNY, USA

Wednesday, 18 July 2018

286

Making a Contribution – Sociological Theory and Method for Contemporary Healthcare Systems Research

Wednesday, 18 July 2018: 08:30-10:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

The changing landscape of health care systems requires new ways of thinking about health and healthcare. The potential for sociological research to contribute to national and international debates about power relations in healthcare is yet to be fully realised. This session builds on one held in ISA Vienna in July 2016 about sociological research in healthcare systems by focusing on the contribution sociology can make to understanding contemporary trends in financing of healthcare, effects of changes to the organization of health care (including the increase of private healthcare), and the responses of citizens to requirements to be active and responsible consumers of healthcare. This session will provide a forum for debating what the sociological contribution can, and should, be to understanding contemporary healthcare systems, with particular focus on how sociological theory and research could inform, or influence, policy and practice.

Session Organizer:

Karen WILLIS, Melbourne Helath, Australia

Chair:

Karen WILLIS, La Trobe University, Australia

Oral Presentations

286.1 Overdiagnosis and Overtreatment: A Sociological Perspective on a Contemporary Healthcare Systems Issue

Natalie ARMSTRONG, University of Leicester, United Kingdom

286.2 Bourdieu and Field: Theory and Method in the Australian Healthcare Sector

Fran COLLYER, The University of Sydney, Australia; Sophie LEWIS, University of New South Wales, Australia

286.3 The Contribution of Sociology to Theorising Patient Systems of Implementation

Anne ROGERS, University of Southampton, United Kingdom; Ivaylo VASSILEV, University of Southampton, United Kingdom

286.4 How Discourse Theories Can Critically Engage Identity Formation in Patient-Centered Care.

Anna HORTON, McGill University, Canada

286.5 Going Private in the Public Sector: Understanding Commissioning Decisions in the English NHS

Vid CALOVSKI, University of Kent, United Kingdom; Michael CALNAN, University of Kent, United Kingdom

286.6 Professional Insecurities: Examining the Relationship between Identity Safety, Moral Agency and Patient Safety

Kelly THOMSON, York University, Canada

Distributed Papers

286.7 Protección De Datos Personales En Salud En Argentina. Derechos y Desafíos En La Era De La Información Digital

Patricia SCHWARZ, Consejo Nacional de Investigaciones Científicas y Técnicas (CONICET), Argentina

Wednesday, 18 July 2018: 10:30-12:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

Illness narratives is already a well established field in the social sciences since Kleinman (1988) defined and explored it; and many field researches focused on how suffering and illness of the sick are shaped by cultural values, norms and social relations, and on how this affects their health behavior. However, still few studies have centered on healing as a relational process involving both the patient's and the professional's roles in different health care contexts (hospitals, clinics, home, etc.), for different problems (acute and chronic illnesses), and by different conventional and unconventional medicines (biomedicine, complementary and alternative medicines).

The aim of this session is to discuss the healing process according to the above different variables both at the theoretical level (concerning studies on the meaning of the art of healing according to different medical systems) and at the empirical level (by field researches applying a narratives approach to the study of the role of the professional in different health care contexts, for different problems and by various medical paradigms; on the patient-professional relationship and its role in the healing process; on the meaning of diagnosis, treatment and clinical care according to different medical systems).

Session Organizer:

Guido GIARELLI, DEPARTMENT OF HEALTH SCIENCES, UMG, Italy

Chair:

Guido GIARELLI, DEPARTMENT OF HEALTH SCIENCES, UMG, Italy

Oral Presentations

287.1 "It's like a Full Stop" Women's Healing Stories in Surgical Reconstruction after Breast Cancer.

Barbara MORSELLO, University of Roma Tre, Italy

287.2 Influence of Cultural Context on Healing Process :Analysis of a Japanese Undiagnosed Rare Disease Patient

Aya UENO, Osaka University, Japan

287.3 Sick Role Non-Identification and New Regime of Representation: Effects of the Non-Conventional Practice in the Type II Diabetes Treatment

Nelson BARROS, University of Campinas, Brazil; **Flávia Liparini PEREIRA**, UNICAMP, Brazil; **Silvana BARDINI**, UNICAMP, Brazil; **Elaine PALANDI**, UNICAMP, Brazil; **José Luís MIXTRO**, UNICAMP, Brazil; **Bianca RODRIGUES**, Unicamp, Brazil

287.4 The Effectiveness of Retelling One's Life Story to Increase Quality of Life - the Participants' Perspective

Sabine CORSTEN, Catholic University of Allied Sciences Mainz, Germany

287.5 Narratives of Opioids Users in Addiction Recovery Resources : A Preliminary Analysis.

Julien THIBAUT LÉVESQUE, University of Ottawa, Canada

Distributed Papers

287.6 Meanings and Values of Being at Risk: Collecting the Narratives of Hypertensive Patients

Beatriz XAVIER, Nursing School of Coimbra, Portugal

287.7 The Transition of Cancer Tobyoki (illness narrative) in Japan

Michiko KADOBAYASHI, Japan Women's University, Japan

287.8 Illness, Choice of Healers and Illness Doubts: An Empirical Study of Role of Illness Narratives in India

Mohammad AKRAM, Aligarh Muslim University, Aligarh, India

287.9 Towards a Person-Centered Healthcare System: Experience, Voice and Needs of People Living with Type 2 Diabetes Among the Black Sub-Saharan African Communities in the UK

Damilola OYEWOLE, Nottingham Trent University, United Kingdom

287.10 Living with Parkinson's Disease: Sociological Perspectives on Older Australians' Narratives

Johanne BRADY, University of Sydney, Australia; **Kate O'LOUGHLIN**, The University of Sydney, Australia

288

Open Roundtable Session on the Sociology of Health - Part 1

Wednesday, 18 July 2018: 10:30-12:20

Location: 501 (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: Spanish, French and English

Session Organizer:

Amelie QUESNEL-VALLEE, McGill University, Canada

Chairs:

Bentina MATHIAS, Nnamdi Azikiwe University, Nigeria, **Magdalena SZAFLARSKI**, University of Alabama at Birmingham, USA, **Monique CARON BOUCHARD**, UQAM (Université du Québec), Canada, **Karen WILLIS**, La Trobe University, Australia and **Michael CALNAN**, University of Kent, United Kingdom

Roundtables:

Sociology of Health in LMIC

Chair:

Bentina MATHIAS, Nnamdi Azikiwe University, Awka, Nigeria

Oral Presentations:**288.1 Demographic Variables and the Incidence of Hypertension in Ado-Ekiti, Ekiti State, Nigeria**

Beatrice ADEOYE, Federal University, Oye Ekiti, Ekiti State, Nigeria; Bolanle ORIOLA, Federal University, Oye Ekiti; Modupe FELE, Federal University, Oye Ekiti

288.2 Online Blame and Ebola. Exploring the Lay Public's Understanding of National and Global Health Authorities' Accountability in Times of Epidemics.

Melissa ROY, University of Ottawa

288.3 Exploring Barriers to Health Care of People Living with Disabilities in Anambra State, Nigeria

Peter EZEAH, Department of Sociology & Anthropology; Nneka OKAFOR, Nnamdi Azikiwe University, Awka; Adaeze OLISA, Chukwuemeka Odimegwu Ojukwu University, Igbaram

288.4 Health As Performance and Performance As Health: A Phenomenology of Life with HIV in Kenya

George Evans OWINO, Kenyatta University

Gender Diversity and LGBTQ Issues**Chair:**

Magdalena SZAFIARSKI, University of Alabama at Birmingham, USA

Oral Presentations:**288.5 "It's Not What They Actually Do to You but the Shame You Would Feel By Going." Young Men's Reflections on Shame and Stigma Around Sexual Health Services.**

Sally BROWN, Edinburgh Napier University; Nick WHEELHOUSE, Edinburgh Napier University

Distributed Papers:**288.6 Attitudes Toward Sex and Risky Sexual Behavior Among Caribbean Female Adolescents**

Sasha DRUMMOND-LEWIS, University of Michigan-Flint

Sociologie de la santé - Session en français**Chair:**

Monique CARON BOUCHARD, UQAM (Université du Québec), Canada

Oral Presentations:**288.7 Les Trajectoires De Douleur Des Personnes Utilisatrices De Drogues [Pain Trajectories Among People Who Use Drugs]**

Lise DASSIEU, University of Sherbrooke

288.8 Instagram Et Santé : Le Champ Lexical Des Étiquettes d'Instagram Et Le Concept Santé.

Monique CARON BOUCHARD, UQAM (Université du Québec)

288.9 Articuler Les Modèles Classiques De Stress Professionnel Aux Grilles D'analyse Des Perceptions De Justice Au Travail

Samantha VILA, Université de Montréal

288.10 Power and Violence in ER: Analysis of Conflictual Interactions between Patients and Caregivers in the Emergency Room of a Local Hospital in Northern France

Déborah RIDEL, Université d'Artois

Social inequalities and health**Oral Presentations:****288.11 Protective Effect of Marriage on Health: Instant or Cumulative, Short- or Long-Term?**

Malgorzata MIKUCKA, Université catholique de Louvain, Belgium; Oliver ARRANZ BECKER, Martin Luther University Halle - Wittenberg; Christof WOLF, GESIS Leibniz-Institute for the Social Sciences

288.12 The Association of Parents' Health and the Health of Their Children in Early Adulthood

Kim SHUEY, University of Western Ontario; Andrea WILLSON, University of Western Ontario; Travis HACKSHAW, University of Western Ontario

288.13 Distribute Public Benefits within and Outside Public Hospitals: Healthcare Professionals' Practices and Social Justice
Camille FOUBERT, *Ecole des Hautes Etudes en Sciences Sociales*

288.14 Social, Economic and Racial/Ethnic Influences on the Health of Canadians
Krim LACEY, *University of Michigan-Dearborn*; **Anthony BRIGGS**, *University of Toronto*; **Jungwee PARK**, *Statistics Canada*; **James JACKSON**, *University of Michigan*

Chronic disease, disability and health

Chair:

Michael CALNAN, *University of Kent, United Kingdom*

Oral Presentations:

288.15 The Association between Caregiver Burden and Affiliate Stigma Among Caregivers of Persons with Intractable Epilepsy
Barbara HANSEN, *Henderson State University*; **Magdalena SZAFIARSKI**, *University of Alabama at Birmingham*

288.16 Single-Minded or Stuck in the Middle of Nowhere. Experiences in Vocational Rehabilitation Measures from Adults with Disabilities.
Angela RAUCH, *Institute for Employment Research*; **Silke TOPHOVEN**, *Institute for Employment Research*

288.17 Medicalizing or Demedicalizing? : Evaluating the Impact of Diagnosis and Undiagnosis on Individual Patients' Lives.
Hiroshi YAMANAKA, *Osaka University*

288.18 Do Health Problems Have an Effect on Students' Plans for International Mobility?
Andreas SARCLETTI, *German Centre for Higher Education Research and Science Studies*; **Sonja HEISSENBERG**, *German Centre for Higher Education Research and Science Studies*; **Jonas POSKOWSKY**, *German Centre for Higher Education Research and Science Studies*

Distributed Papers:

288.19 The Ladder of Wellness: Relating Happiness, Subjective Well-Being, and Flourishing
Adam GREARSON, *McMaster University*

289

New Developments in Measurement of Social Inequalities in Health

Wednesday, 18 July 2018: 15:30-17:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

The description and explanation of social inequalities in health are affected by the quality and availability of data on health and social processes. These challenges are compounded in cross-national studies attempting to make inferences across social contexts, where issues of data harmonization loom large. Presentations in this session will tackle questions such as: Which concepts are suitable to collect data that are pertinent, cost effective and easy to integrate in general surveys? Which approaches produce data that are less affected by selection effects (e.g., survivor bias)? Which social mechanisms produce biases in health data? What contribution may physical or biologic measures of health conditions (biomarkers) be able to provide for sociological inquiry? To which extent are mortality data suitable for health analysis? What barriers remain in gaining access to administrative or register databases in different countries?

This session invites both theoretical and empirical studies that investigate topics of measuring social inequalities in health. Comparative studies as well as national approaches are welcome.

Session Organizers:

Peter KRIWY, Chemnitz University of Technology, Germany, Amelie QUESNEL-VALLEE, McGill University, Canada and Lisa STROHSCHNEIN, Canadian Population Society, Canada

Chair:

Peter KRIWY, Chemnitz University of Technology, Germany

Oral Presentations

289.1 Biological Influences on Health-Ratings: The Relationship of Biomarkers and Self-Rated Health and How It Differs across Groups

Patrick LAZAREVIC, TU Dortmund University, Germany

289.2 Income Inequalities in Health: A Latent Class Growth Mixture Model Approach

Andreea MOLDOVAN, University of Essex, United Kingdom; Michaela BENZEVAL, University of Essex, United Kingdom; Paul CLARKE, University of Essex, United Kingdom

289.3 Neighborhood Context and Health: Highlighting the Role of a Neighborhood's Physical Environment

Kate CHOI, University of Western Ontario, Canada; Eugena KWON, University of Western Ontario, Canada

289.4 What Do You Mean By Gay? Measuring Sexual Orientation and Gender Identity in Public Health Studies

Alex MULLER, University of Cape Town, South Africa; Kristen DASKILEWICZ, University of Cape Town, South Africa

289.5 Understanding the Health Inequality Paradox: A Meta-Analysis of the Effect of Study Design on Health Inequality Outcomes and Welfare Regime Patterns in Comparative Health Inequality Research.

Arline RAVE, Bremen International Graduate School of Social Sciences, Germany

Distributed Papers

289.6 Intergenerational Mobility in Relative Educational Attainment and Health-Related Behaviours in Europe

Alexi GUGUSHVILI, University of Oxford, United Kingdom; Yizhang ZHAO, University of Oxford, United Kingdom

289.7 The Interplay between Maternal Resources and Environmental Stressors: The Effects of an Earthquake on Birth Outcomes

Héctor CEBOLLA-BOADO, UNED, Spain; Leire SALAZAR, UNED, Spain

289.8 Social Class and Health in Canada: Can Sociological Theory Inform Data Collection?

Katrina FUNDYTUS, University of Calgary, Canada; Cheyanne STONES, University of British Columbia, Canada; Jenny GODLEY, University of Calgary, Canada; Peter PELLER, University of Calgary, Canada; Lindsay MCLAREN, University of Calgary, Canada

289.9 The Disability Tax: A Novel Tool for Supporting the Implementation of the UN Convention on the Rights of Persons with Disabilities

Sarah SHICK, Case Western Reserve University, USA

290

RC15 Business Meeting

Wednesday, 18 July 2018: 17:30-19:20
 Location: 714B (MTCC SOUTH BUILDING)
 RC15 Sociology of Health (host committee)

Thursday, 19 July 2018

291

Healthcare Governance in Sociological Context

Thursday, 19 July 2018: 08:30-10:20
 Location: 714B (MTCC SOUTH BUILDING)
 RC15 Sociology of Health (host committee)

Language: English

For the World Health Organization '... beyond the formal health system, governance means collaborating with other sectors, including the private sector and civil society, to promote and maintain population health in a participatory and inclusive manner.' Each country has its own healthcare challenges; some nations have a super-aging society while others are trying to implement the Universal Healthcare Coverage or establish basic healthcare units in various regions. The basics of governance within healthcare systems, are understood and discussed through related subjects such as healthcare policy, national budgets, demographical analyses, and peoples' choice of national design. The phrase 'good governance' has been tossed around in health care circles over the last decade as if it was a panacea implying that everything is fine. However, the crucial aspects of governance and the methods of applying an integrated governance system are complicated, and need to be considered empirically with regard to each country's cultural and social context.

Session Organizer:

Miwako HOSODA, Seisa University, Japan

Chair:

Miwako HOSODA, Seisa University, Japan

Oral Presentations

291.1 'Good Governance' and Stakeholder Involvement: Why We Need a Context-Sensitive Approach

Ellen KUHLMANN, Goethe-University Frankfurt, Germany; Viola BURAU, Aarhus University, Denmark

291.2 Women in Healthcare Leadership Roles: Contributions to Healthcare Governance

Ivy BOURGEAULT, University of Ottawa, Canada

291.3 The Organisation of Welfare Services on Quasi-Markets - a Study of Elderly Care in Sweden

Henrik LOODIN, Lund University, Sweden

291.4 Regional Health Governance in the Ebola Outbreak: The Need for African Solutions to African Problems

Oluwatobi NJOAGUANI, Covenant University, Nigeria; Sheriff FOLARIN, Covenant University, Nigeria

291.5 The People's Health Movement: Understanding a Transnational Network's Contribution to Global Health Governance

Su-ming KHOO, National University of Ireland, Galway, Ireland; Rita O'CONNELL, MA Public Advocacy and Activism, Ireland

Distributed Papers

291.6 The Changing Objects of Government: Malaria Eradication, Political Power and the Jewish National Home

Omri TUBI, Northwestern University, USA

291.7 Prison in the Time of Fentanyl

Kevin HAGGERTY, University of Alberta, Canada; Sandra BUCERIUS, University of Alberta, Canada

291.8 Models of Governance in the Local Health Districts. Real Actors and Processes of Some Italian Regions

Carmine CLEMENTE, UNIVERSITY OF BARI, Italy

291.9 'Children of a Common Mother': Strengthening Health Workforce Migration to Australia and Canada*Stephanie SHORT, The University of Sydney, Australia; Kanchan MARCUS, The University of Sydney, Australia***JS-59****Creating a Sustainable and People-Centred Health Workforce: Connecting Global and Local Perspectives***Thursday, 19 July 2018: 10:30-12:20**Location: 718B (MTCC SOUTH BUILDING)*

RC15 Sociology of Health (host committee)

RC52 Sociology of Professional Groups

Language: English

The importance of a sustainable and people-centred health workforce is now well recognised. International organisations and many countries have taken action to improve health workforce governance. However, it remains unclear how health workforce policies can be translated into practice, which policy levers exist to enhance effective policy implementation, and what role professional associations play. There is also very little knowledge about the importance of health systems and governance for creating a people-centred health workforce and the possibilities for translating health workforce models from one country to another. The proposed workshop aims to connect health workforce research from different countries and regions, to contribute new knowledge on how to respond to major health workforce challenges, and to foster comparative research and policy learning. Major themes include: a review of the composition and changing skill mixes of the health workforce, the development of integrated education models, improved coordination of data sources, and the governance of mobile health workers to improve equity between and within countries and reduce 'brain drain' effects. We invite contributions that address these topics from different perspectives. We are especially interested in comparative research, but also welcome in-depth single country or regional research.

Session Organizers:*Ellen KUHLMANN, Goethe-University Frankfurt, Germany and Viola BURAU, Aarhus University, Denmark***Oral Presentations****JS-59.1 Human Resources for Health Policies and Power Dynamics: Perspectives of Policy Makers, Professional Associations and of Researchers in Portugal and Brazil***Isabel CRAVEIRO, Institute of Hygiene and Tropical Medicine, UNL, Portugal; Virginia HORTALE, ENSP - FioCruz, Brazil; Gilles DUSSAULT, Instituto de Higiene e Medicina Tropical, Portugal***JS-59.2 Feminization of the Primary Care Medical Workforce: A Systematic Review and Case Study of Implications for Pay-for-Performance for Chronic Disease Management in Context of Universal Health Coverage***René LAVALLÉE, Government of New Brunswick, Canada; Neeru GUPTA, University of New Brunswick, Canada; Holly AYLES, University of New Brunswick, Canada***JS-59.3 Peer Workers As the Health Workforce in Japan: Broadening the Concept of "Health Workforce" and Current Challenges***Takuya MATSUSHIGE, National Institute of Public Health, Japan***JS-59.4 Sustaining a People Centered Health Workforce: The Mental Health Experiences of Health Professions***Ivy BOURGEOULT, University of Ottawa, Canada***JS-59.5 Reversing Re-Engineering: The Failure of the Community Health Worker Program in the Free State Province, South Africa***Katinka DE WET, University of the Free State, South Africa***JS-59.6 Les Usages Sociaux De La Barrière Linguistique Par Les Professionnel. Le.s De Santé De Services Hospitaliers Français Et Québécois***Camille FOUBERT, Ecole des Hautes Etudes en Sciences Sociales, France***JS-64****Health Professions: Future International Directions. Part Two***Thursday, 19 July 2018: 15:30-17:20**Location: 718B (MTCC SOUTH BUILDING)*

RC15 Sociology of Health (host committee)

RC52 Sociology of Professional Groups

Language: English

This session focuses on the health professions in a global context – including the global south as well as north. It particularly centres on likely future regulatory directions that may be taken by the healthcare labour force, based on historical and contemporary developments in the health division of labour. Key questions covered will include: How do we ensure that professional health regulation meets public interest concerns in considering power and justice in both dystopian and utopian futures? How best do we promote more expansive and inclusive public participation mechanisms for users in healthcare? What might be the future role in healthcare of currently high status, but besieged, professional groups like doctors? And what does the future hold for other health professions like nurses and other allied health professions? What too might their future links be to relatively unsung but vital support workers in the healthcare labour force that are more closely linked to the precariat? At a wider level, what might be the effects of trends such as corporatization, deprofessionalization, hybridization and restratification on the health professions? And how important in shaping the future professional division of labour in health systems will be factors like knowledge, technology, and professional leadership? This session invites single country and comparative papers which consider these and other issues at an empirical and/or theoretical level – drawing out the implications where appropriate for policy development and practice in national, international and wider global settings.

Session Organizers:

Michael SAKS, University of Suffolk, United Kingdom and Mike DENT, Staffordshire University, United Kingdom

Chair:

Mike DENT, Staffordshire University, United Kingdom

Oral Presentations

JS-64.1 [Governing Complementary and Alternative Medicine in Brazil and Portugal](#)

Joana ALMEIDA, Royal Holloway, University of London, United Kingdom; Pamela SIEGEL, State University of Campinas, Brazil; Nelson BARROS, University of Campinas, Brazil

JS-64.2 [Shifting Ground? Government Influence in Health Professional Governance in Australia](#)

Fiona PACEY, The University of Sydney, Australia; Stephanie SHORT, The University of Sydney, Australia

JS-64.3 [How and Why Do Doctors and Nurses Leave the Profession? - Transition and Retirement Patterns for Health Professionals in the Nordic Region](#)

Karsten VRANGBAEK, university of copenhagen, Denmark

JS-64.4 [TRUST and the Regulation of the Medical Profession in the Health System in India](#)

Michael CALNAN, University of Kent, United Kingdom; Sumit KANE, NOSSAL INSITUTE FOR GLOBAL HEALTH < UNIVERSITY OF MELBOURNE, Australia

JS-64.5 [Scoping the Workforce of the Future: The Role of Personal Support Workers in the Healthcare Division of Labour](#)

Katherine ZAGRODNEY, University of Toronto, Canada

Distributed Papers

JS-64.6 [The Clinician Scientist in the Field of Translational Research: A Future Profession in Medicine?](#)

Barbara HENDRIKS, Humboldt University Berlin, Germany

JS-64.7 [The State and Future of Medical Regulation in Pakistan: Self-Regulatory Corruption in the Aftermath of Colonization](#)

Humayun AHMED, University of Toronto, Canada; Saleem AHMED, Jinnah Post-Graduate Medical Centre, Pakistan; Sohaib AHMED, University of Toronto, Canada; Sophia GLISCH, University of Toronto, Canada

Tuesday, 17 July 2018: 19:30-20:50

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

The recent phenomenon of the anti-globalism movement, which is observed in the USA and European countries, has inflated hate and physical and psychological violence—the inequality of health—against migrants who have settled in host countries. It may also

affect either the flow or stagnation of migration between sending and receiving countries. Definitely, the inequality of migrants' health is an issue pertaining to individual migrants and relevant in the countries sending and receiving these people. Therefore, to protect the human rights of migrants, sociologists must investigate the socio-cultural and economic background of the issue of inequality of health from a long term and broader perspective.

This session welcomes presentations on the status of migrants' health and inequality of health of countries and regions. A multi-disciplinary approach towards health and illness as well as the working and living environments of migrants is welcome, as it may provide a clear, objective, and practical vision of how to protect the human rights of migrants in an era characterized by anti-globalization movements.

Session Organizer:

Yuko HIRANO, Nagasaki University, Japan

Chair:

Yuko HIRANO, Nagasaki University, Japan

Oral Presentations

285.1 Occupational Injury and Experiences of Suffering Among Latino and Latina Immigrants in Los Angeles, California and Returnee Migrants in Mexico.

Angel SERRANO-SANCHEZ, Universidad de Guanajuato, Mexico

285.2 National Origins, Social Context and Length of Time on the Physical and Mental Health of Caribbeans in and Outside Canada

Krim LACEY, University of Michigan-Dearborn, USA; Anthony BRIGGS, University of Toronto, Canada; James JACKSON, University of Michigan, USA

285.3 Sexual and Reproductive Health Needs of Female Labor Migrants from Central Asia in St. Petersburg, Russia

Victoria DUDINA, St. Petersburg State University, Russian Federation; Elizabeth J. KING, University of Michigan, USA

285.4 How Social Support Affect Co-Ethnic Elderly's Health in Mexico and in the United States

Yulin YANG, University at Buffalo, SUNY, USA

292

Mental Health and the Courts

Thursday, 19 July 2018: 17:30-19:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

Mental health diagnoses carry different power in different sites; none may be more problematic than within the legal system. Diagnoses of schizophrenia or substance use disorder can impact ones access to employment, self determination, and parental rights. Other conditions, such as personality disorders may be less well-understood by courts and less impactful, regardless of empirical evidence of their relevance. Nonetheless, diagnoses can be used as labels or accusations for the purposes of name-calling, or disregarded entirely by a system untrained in their sometimes relevance. This session will focus on the intersection of mental health diagnoses and legal systems, with an emphasis on the power dynamics and consequences for various actors. Research which addresses children's rights, intersectional inequalities or offer empirical or theoretical insights will be especially welcomed, though the call is open to all related topics.

Session Organizer:

Sandra SULZER, Utah State University, USA

Chair:

Jaqueline NEID-AVILA, Utah State University Extension, USA

Oral Presentations

292.1 Borderline Personality Disorder: Effects on Children, Custody, & Protective Services Encounters

Sandra SULZER, Utah State University, USA

Distributed Papers

292.2 A Criminalization of the Mind: Mental Health, Sexuality & Relationships of People Living with HIV Under the Context of HIV Criminalization in Canada

Chris TATHAM, University of Toronto, Canada

292.3 The Tale of Two Acts: Disability v. Mental Health Policy (and Activism) in Ghana*Essya NABBALI, Independent scholar, Canada***292.4 Violence, Injustice and Discrimination in the Management of People Living with Mental Illness in Nigeria***Tomike OLAWANDE, Covenant University, Nigeria; Ayodele Samuel JEGEDE, University of Ibadan, Nigeria; Patrick EDEWOR, Covenant University, Nigeria; Lukman Tunde FASASI, University of Ibadan, Nigeria; Charles IRUONAGBE, Covenant University, Nigeria; Olasunkanmi Samuel OLAWANDE, Covenant University, Nigeria*

Friday, 20 July 2018

JS-72

Sociology of the Better Dying

Friday, 20 July 2018: 08:30-10:20

Location: 718A (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

RC11 Sociology of Aging

Language: English

The medicalization of death and dying in contemporary society has increased our anxieties around dying within institutional settings. Death and dying have become depersonalized, and appear to focus more on the convenience of the hospital or nursing home staff than on the dying person or family. As a society we have forgotten that dying is part of the human process and we find ourselves uncomfortable in the presence of those approaching life's end. Consequently, those who are dying find often find themselves alone, isolated and afraid. This session will deal with the problems arising in the final stage of life. We will look for ways to utilize social relationships and structures which will allow us to 'have a good death.' We invite both qualitative and quantitative research as well as case studies that provide fresh insight into death and dying. Regional and or community studies are welcome. Of particular interest is the use of volunteers in improving the experience of the dying both in medical or hospice settings.

Session Organizer:*Ken TAKENAKA, Kyushu University of Nursing and Social Welfare, Japan***Panelist:***Roberta SASSATELLI, university of Milan, Italy***Discussant:***Maria GIANNOTTI, Canadian Catholic Bioethics Institute, Canada***Oral Presentations****JS-72.1 Pioneering a New Way Forward: Windsor – Essex County's Compassionate Care Community***Maria GIANNOTTI, The Hospice Windsor Essex County, Canada***JS-72.2 Meaning of Meaninglessness: Operational Logic of Hospice Care in Taiwan***Hsiao-Mei JUAN, National Chung Cheng University, Taiwan***JS-72.3 The Quest for a Good Death: (Re)Creating Natural Death in Hospital Settings***François-Xavier GOUDOT, Avicenne Hospital, Bobigny, France; Sandrine BRETONNIERE, Ecole des Hautes Etudes en Sciences Sociales, France***JS-72.4 Cancer and End of Life – a Perspective from within the Oncologist-Patient Relationship***Sandrine BRETONNIERE, Ecole des Hautes Etudes en Sciences Sociales, France***JS-72.5 Euthanasia in the Canadian Context: How Experience of Death Shapes Moral Views of Medically-Assisted Dying in Canada***Carmen GRILLO, York University, Canada***JS-72.6 The End at the Very Beginning: Perinatal Loss and Better Dying***Iva SMIDOVA, Masaryk University, Faculty of Social Studies, Sociology Dpt., Czech Republic***Distributed Papers****JS-72.7 Conflicts for Supporters of Aid in Dying: Comparative Study Among Three States in the U.S.***Shizuko KATAGIRI, Kagoshima University, Japan*

JS-72.8 Old People and Suicide: An Empirical Study in France*Cherry SCHRECKER, Université Grenoble Alpes, France***JS-72.9 Commercializing Death and Appropriating Mourning. Negotiating Bereavement Scripts Among Italian Families and Funeral Service Workers.***Elisa ARFINI, University of Milan, Italy; Roberta SASSATELLI, university of Milan, Italy***JS-72.10 Possibility of Developing Volunteer Activities during the Dying Process: Evaluation of a Few Japanese and Canadian Case Studies.***Ken TAKENAKA, Kyushu University of Nursing and Social Welfare, Japan***JS-72.11 Muerte Asistida y Gestión Del Morir En Chile***Pilar DIEZ YENSEN, Universidad Diego Portales, Chile*

293

Towards a Sociological Critique of Digital Health

Friday, 20 July 2018: 10:30-12:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

Today, a new generation of mobile digital technologies, such as smartphones, tablet computers, and wearable watches are increasingly embedded into the organisation and practices of healthcare, particularly in the context of the ever-expanding 'self-care' agenda. Being the products of the Web 2.0 era, these technologies offer novel means of patient-provider communication, new opportunities for monitoring bodily conditions and health behaviours and remote and instant access to personal health data. Medical sociologists are currently studying these technological advances and investigating how they create new realities where 'active patients' are demanded and new conceptions of health, illness and care emerge. This session invites theoretical and empirical contributions that provide a critical sociological analysis of the nature and consequences of digitised healthcare.

Contributions may address the following questions:

-How is the generation and production of health knowledge affected by datafication and quantification?

-How do digital care pathways affect the relationships between patients and health professionals?

-How do digital devices create new regulatory regimes to control patients' health behaviour?

-How do patients experience digital health technologies and what emotions and identities do they create?

-How are digital technologies utilised in healthcare provision and how do they affect work practices and professionals' roles?

By bringing together a set of papers from researchers working on these issues the session aims to contribute towards a sociological critique of digital health.

Session Organizers:

Benjamin MARENT, University of Brighton, United Kingdom and Flis HENWOOD, University of Brighton, United Kingdom

Chair:

Benjamin MARENT, University of Brighton, United Kingdom

Oral Presentations**293.1 [Initiation and Discussion of Information from the Internet in GP Consultations: Managing and Negotiating the Boundary between inside and Outside the Clinic](#)**

Fiona STEVENSON, University College London, United Kingdom; Maureen SEGUIN, University College London, United Kingdom;

Laura HALL, University College London, United Kingdom; Catherine POPE, University of Southampton, United Kingdom; Sue

ZIEBLAND, Oxford university, United Kingdom; Geraldine LEYDON, University of Southampton, United Kingdom; Rebecca BARNES, University of Bristol, United Kingdom

293.2 The Vaccination Debate in the Post-Truth Era: Examining Social Media As Sites of Multi-Layered Reflexivity

Dino NUMERATO, Department of Sociology, Faculty of Social Sciences, Charles University, Prague, Czech Republic; Alena MACKOVÁ,

Department of Sociology, Faculty of Social Sciences, Charles University, Prague, Czech Republic; Václav ŠTĚTKA, Department of

Sociology, Faculty of Social Sciences, Charles University, Prague, Czech Republic; Lenka VOCHOCOVÁ, Department of Media Studies, Faculty of Social Sciences, Charles University, Prague, Czech Republic

293.3 The Psycho-Social Lives of Diagnostic Algorithms

China MILLS, University of Sheffield, United Kingdom; Eva HILBERG, University of Sheffield, United Kingdom

293.4 Enter Your Mood. Mood Disorders in the Era of Mobile Digital Technologies**Fernando VALENZUELA**, *Universidad Andres Bello, Chile*; **Daniel LOPEZ GOMEZ**, *Universitat Oberta de Catalunya, Spain***293.5 Data Mining in the Cloud? Revisiting the Sociology of Digital Health Platforms****Catherine WILL**, *University of Sussex, USA*; **Rosalind WILLIAMS**, *University of Sheffield, United Kingdom*; **Kate WEINER**, *University of Sheffield, United Kingdom*; **Flis HENWOOD**, *University of Brighton, United Kingdom***293.6 Constructing and De-Constructing Patient Experience Via Big Data and Small Data****Caroline SANDERS**, *University of Manchester, United Kingdom*; **Papreen NAHAR**, *University of Manchester, United Kingdom*; **Nicola SMALL**, *University of Manchester, United Kingdom*; **Damian HODGSON**, *University of Manchester, United Kingdom***Distributed Papers****293.7 How Do Medical Apps Form Healthcare Practices? a Case Study from Diabetes Care in Denmark****Loni LEDDERER**, *Aarhus University, Denmark*; **Viola BURAU**, *Aarhus University, Denmark***293.8 Digitised Swasthya: Technology and Healthcare As Sociotechnical Ensembles in Rajasthan, India****Mayurakshi CHAUDHURI**, *Indian Institute of Technology Jodhpur, India***293.9 Outcomes of E-Word-of-Mouth Use in the Health Domain: Are the Physicians-Patients Boundaries Blurring?****Esther BRAININ**, *Ruppin Academic Center, Israel*; **Keren LANDSMAN**, *Levinski Health Care Clinic - Israel Ministry of Health, Israel***293.10 ICT Adoption By People with Disabilities – Findings of a Repeated Cross-Sectional Study – 2003-2015****Sabina LISSITSA**, *Ariel University, Israel*; **Galit MADAR**, *ARIEL UNIVERSITY, Israel***293.11 The Impact of Social Media on the Relationship between Patients and Health Professionals: The Use of Whatsapp in the Chronic Disease Management****Gea DUCCI**, *University of Urbino Carlo Bo, Italy*; **Lella MAZZOLI**, *Università di Urbino Carlo Bo, Italy*

294

Education and Health: Research Findings and Methodological Obstacles*Friday, 20 July 2018: 15:30-17:20**Location: 714B (MTCC SOUTH BUILDING)**RC15 Sociology of Health (host committee)*

Language: English

This session broadly discusses specific as well as methodological aspects of teacher and pupil health. Teachers and pupils daily interact in a quite complex system – the classroom. Teachers need to give emotional and instructional support, need to organize the classroom and, with physically handicapped children, they might need to give active support as e.g. lifting. Pupils need to fulfill their tasks and need to be self-organized. Altogether, this results in a demanding workplace that affects not just pupils' achievements and teachers' job performance and job satisfaction, but also their long-term physical, mental and social health. However, the complexity of classroom settings, the variety of school types and systems within and across countries, as well as personal factors of teachers and pupils challenge the research in this field.

Note that to round up the focus of this session, more general studies on education and health are also featured.

Session Organizers:

Kathrin BOGNER, *Institute of Teachers' Health at the Institute of Occupational, Social and Environmental Medicine at the University Medical Center of the Johannes Gutenberg University of Mainz, Germany, Germany* and **Dirk-Matthias ROSE**, *Institute for Teachers' Health, University Medical Center of the Johannes Gutenberg University Mainz, Germany*

Chair:

Kathrin BOGNER, *Institute of Teachers' Health at the Institute of Occupational, Social and Environmental Medicine, Germany*

Oral Presentations**294.1 School: A Healthy Workplace? Health Promotion and Prevention in the Teaching Profession****Christina MOGG**, *University of Vienna, Austria***294.2 Supervision for Teachers As a Measure of Health Promotion – an Evaluation Study Using a Mixed Methods Approach****Christina MOGG**, *University of Vienna, Austria*

294.3 Workplace Conflicts of German Teaching Staff – Prevalence, Work-Related Aspects and Health Issues of a Burdened Sample

Till BEUTEL, Institute of Teachers' Health at the Institute of Occupational, Social and Environmental Medicine at the University Medical Center of the Johannes Gutenberg University of Mainz, Germany; **Stephan LETZEL**, Institute of Teachers' Health at the Institute of Occupational, Social and Environmental Medicine at the University Medical Center of the Johannes Gutenberg University of Mainz, Germany

295

Sociology, Theory and Complementary and Alternative Medicine

Friday, 20 July 2018: 17:30-19:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

Sociological research on traditional/indigenous medicines (TMs) and complementary and alternative medicines (CAMs) has grown into a thriving field, particularly in the last 15-20 years. Empirical studies on the use, practice and organisation of TM/CAM across different geographical areas and within different sectors of the health system have flourished, but theoretical frameworks have generally been limited and underdeveloped.

In this session, we invite submissions that address and deepen theoretical understandings of TM/CAM, illustrated where appropriate by empirical case studies. These may include, but are not limited to:

- broader macro-political issues in TM/CAM, such as the possibilities of integration or the development of hybrid medical forms
- linking embodied experiences (of patients and practitioners) to social movements and trends
- the relationship between TM/CAM and the state and international organisations (such as WHO), including regulatory forms, governance arrangements and the power/legitimacy of heterodox medical forms
- TM/CAM and its relationship to late/post-modernity
- TM/CAM practices and experiences through the lens of the new materialism
- Cross-cultural comparison and theoretical frames for understanding TM/CAM practice as it moves across cultural boundaries.

Session Organizers:

Nelson BARROS, University of Campinas, Brazil, *Caragh BROSINAN*, University of Newcastle, Australia, *Nicola GALE*, University of Birmingham, United Kingdom and *Michael SAKS*, University of Suffolk, United Kingdom

Chair:

Nelson BARROS, University of Campinas, Brazil

Oral Presentations**295.1 Complementary and Alternative Medicine: Theories of Marginality and Precarity**

Michael SAKS, University of Suffolk, United Kingdom; *Joana ALMEIDA*, Royal Holloway, University of London, United Kingdom

295.2 Conversions and Erasures: Colonial Ontologies in Canadian Traditional, Complementary and Alternative Medicine Integration Policies

Cathy FOURNIER, Wilson Centre, Canada; *Robin OAKLEY*, Dalhousie University, Canada

295.3 Traditional Chinese Medicine (TCM) As "Authoritative Practice": Practitioners and Users' Perspectives of TCM Evidence in Canadian Contexts

Ana NING, King's University College at Western University, Canada

295.4 Conceptualisations of Healing in Traditional, Complementary and Alternative Medicine; An Outback Australian Study.

Aqua HASTINGS, University of Newcastle, Australia

295.5 'Integrative Health' As a Political Project: Institutional Arrangements Towards CAM at the Federal Level in the U.S.

Geoffroy CARPIER, Université de Rouen, France; *Patrice COHEN*, Université de Rouen Normandie, France

Distributed Papers**295.6 Cyberspace and Postmodernization of the Medical Arena (Case Study: Music Therapy)**

Atefeh AGHAEI, Phd Candidate of Communicatin, Iran; *Masoumeh SHAFATI*, PHD Candidate of Sociology University of Tehran, Iran

295.7 From Acupuncture to Ozone Therapy: Exploring Uses of Complementary and Alternative Medicines in Elite Sport

Catherine COVENEY, De Montfort University, United Kingdom; *Jonathan GABE*, Royal Holloway, University of London, United Kingdom

Kingdom; **Alex FAULKNER**, Global Health, Sussex University, Brighton, United Kingdom

295.8 Concurrently 'Traditional' and 'Complementary': The Hybrid Professions of Chinese Medicine and Homeopathy in Ontario, Canada

Nadine IJAZ, University of Toronto, Canada; **Heather BOON**, University of Toronto, Canada

Saturday, 21 July 2018

JS-81

Social Epidemiology of Aging

Saturday, 21 July 2018: 08:30-10:20

Location: 718A (MTCC SOUTH BUILDING)

RC11 Sociology of Aging (host committee)

RC15 Sociology of Health

Language: English

Social Epidemiology is the study of the social distribution and social determinants of states of health, including diseases, disorders, behaviors, disability, injuries, violence, well-being, mortality, etc. It focuses on population health to improve the average health expectancy and reduce the risk inequalities within a population across various social statuses, including: race, ethnicity, gender, socioeconomic status, sexuality, etc. The Social Epidemiology of Aging merges the studies of social inequalities, health, and aging as cumulative experiences over the life course at a population-level from a Sociological perspective. This session addresses empirical and theoretical research on aging, seeking papers that focus on the life course perspective and/or social and environmental contextual-level influences on health. Papers may identify and interpret the reasons for changing population health patterns, better understand the pathways connecting the prior contexts to population health, or incorporate these patterns and pathways into prevention or intervention programs for middle-aged and older adults. Papers may use quantitative, qualitative, or mixed methods.

Session Organizer:

Ronica ROOKS, University of Colorado Denver, Department of Health and Behavioral Sciences, USA

Oral Presentations

JS-81.1 A Comparative Perspective on Later-Life Employment and Health

Ignacio MADERO-CABIB, Universidad de Chile, Chile; **Laurie CORNA**, King's College London, United Kingdom

JS-81.2 Healthy Retirements Begin at School: Education Predicts Health Outcomes of Early Transitions.

Kasim ALLEL, Universidad Diego Portales, Chile; **Ursula STAUDINGER**, Robert N. Butler, Columbia Aging Center, USA; **Esteban CALVO**, Robert N. Butler Professor of Sociomedical Sciences Columbia Aging Center, USA; **Ana Sofia LEON**, Universidad Diego Portales, Chile

JS-81.3 Retirement Status, Retirement Conditions, and Sleep Quality Among Older U.S. Adults: Findings from the Health and Retirement Study

Dana AUDEN, University of North Texas, USA; **Cynthia CREADY**, University of North Texas, USA

JS-81.4 The Effect of City-Level Changes in Home Prices upon the Well-Being of Older Americans

Jason SETTELS, University of Toronto - Department of Sociology, Canada

JS-83

Older Adults Health: Community Care and Disability Management

Saturday, 21 July 2018: 10:30-12:20

Location: 718A (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

RC11 Sociology of Aging

Language: English

Many seniors fail to report health problems, delay seeking health care, and/or do not manage their chronic conditions to clinical standards. Health care services are often less personal, siloed, and do not consider patients' active roles in their health care. There is an urgent need to reduce health care costs for seniors, potentially by developing cost-effective, community-based programs.

Research shows that seniors' participation in reciprocity-focused community activities reduces loneliness and helps them age-in-place, but there is limited literature as to whether and how seniors' involvement in these community groups helps to maintain or improve their health outcomes. This session will examine whether community-based groups for seniors, such as support groups, time-banks, village models, naturally-occurring retirement communities (NORCs), senior centers, or other community-capacity building strategies (aka social capital), are effective in addressing chronic condition management (e.g., depression or mental health disorders, mild cognitive or physical functioning difficulties, etc.), perhaps compared to the usual standard of care via medical or pharmaceutical interventions. Papers may focus on community-based groups and seniors' connections and reciprocity among neighbors to reduce social isolation, improve self-care/management practices or health behaviors, improve self-reported health or well-being, or lower health care use, costs, medications, or hospitalizations. Papers may use quantitative, qualitative, or mixed methods.

Session Organizer:

Ronica ROOKS, University of Colorado Denver, Department of Health and Behavioral Sciences, USA

Chair:

Mohammad AKRAM, Aligarh Muslim University, Aligarh, India

Oral Presentations

JS-83.1 Sport, Physical Activity and Rehabilitation. the Impact of Parkrun to Health and Body Wellness. an Exploratory Study in Italy
Loredana TALLARITA, University Kore of Enna, Italy

JS-83.2 Local Health Promoted Groups and Health in Old Age: A Case of Genki Stations in Yokohama
Daisuke WATANABE, Seikei University, Japan; Shino SAWAOKA, The Dia Foundation for Research on Ageing Societies, Japan

JS-83.3 Japanese Community-Based Senior Groups and the Role of the University
Miwako HOSODA, Seisa University, Japan

JS-83.4 Time-Banking and Health: Is It a Suitable and Sustainable Social Capital Building Model for Seniors?
Ronica ROOKS, University of Colorado Denver, Department of Health and Behavioral Sciences, USA; Sarah MCCARTHY, Fairhill & Company, USA

JS-83.5 Governing Healthcare Safety at the Margins: The Challenges of Good Governance in the Care Home 'Hinterlands'
Emily GARTSHORE, University of Nottingham, United Kingdom; Stephen TIMMONS, University of Nottingham, United Kingdom

Distributed Papers

JS-83.6 Unequal By Condition: Medicare's Planned Neglect of Chronic Care in Home Health
William CABIN, Temple University, USA

JS-86

Languages of Victims: Toward Advocating Contemporary Social Sufferings

Saturday, 21 July 2018: 12:30-14:20

Location: 718A (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

RC25 Language and Society

Language: English

It has passed just 50 years since *Linguistic Turn* edited by Richard Rorty was published in 1967. For human and social scientists, linguistic activities such as narrative and discourse have been the most important resources and topics to clarify and understand social world. Various theories and methods to analyze peoples' talks and narratives have been invented and elaborated. On the other hand, patient-centered clinical method is one of the most significant trends in contemporary medicine. Patients' talks and narratives consist of the essential components of contemporary medical practices. The developments of pharmaceutical industries and medical practices have entailed the unintended consequences such as adverse effects of medicine, drug-induced sufferings, medical malpractice, medical drug lag, and device lag. Without paying attention to the voice of patients and victims, it is difficult for us to discover such sufferings, to analyze the features of problems, and to realize social justice in health fields. This session aims not only to clarify and understand the social sufferings and problems related to health and medicine, but also to offer the measures to advocate them through the analysis of their narratives and discourses.

This session welcomes sociological discussion of how language analyses influence the understanding and the care of

--The victims of drug-induced sufferings

--The victims of medical malpractices

--The patients of incurable disease who faced with social exclusion

--The victims of drug lag and device lag
 --And those who live with other social sufferings related to health and medicine

Session Organizers:

Keiji FUJIYOSHI, Otemon Gakuin University, Japan and Masahiko KANEKO, National Defense Medical College, Japan

Chair:

Keiji FUJIYOSHI, Otemon Gakuin University, Japan

Oral Presentations

JS-86.1 Discourse Analysis of Drug-Induced Sufferings in Japan

Akihiko SATO, Kwansei Gakuin University, Japan

JS-86.2 Disputes about the Reality of a Health Trouble

Aymeric LUNEAU, Muséum National d'Histoire Naturel, Paris, France

JS-86.3 Socio-Cultural Conception of Albinism and Albinos' Access to Modern Healthcare Services: Narratives from the Field in South-West Nigeria

Adediran IKUOMOLA, Adekunle Ajasin University, Akungba-Akoko Ondo State, Nigeria; Emmanuel OGUNODE, Adekunle Ajasin University, Nigeria

JS-86.4 Becoming Victims of Drug-Induced Suffering (DIS): The Case of Japanese Hemophiliacs with HIV

Masatake HONGO, Wakayama Medical University, Japan; Tomiaki YAMADA, Matsuyama University, Japan

JS-86.5 Ageism and Narratives: Negative Images of Aging and Stories in Later Life

Tomoko TAMARI, Goldsmiths, University of London, United Kingdom

JS-86.6 Language of Victims in the HIV Tainted Blood Product Incident in Japan in Early 1980s

Tomiaki YAMADA, Matsuyama University, Japan

Saturday, 21 July 2018: 14:30-16:20

Location: 714B (MTCC SOUTH BUILDING)

RC15 Sociology of Health (host committee)

Language: English

Medicalisation has been a major theme in medical sociology since the 1970s. Personal and increasingly also social problems such as poverty and unemployment are defined in medical terms and thus become subject to medical and pharmaceutical interventions. A renewed interest in medicalisation can be observed in recent years. It may stem from the change in the driving forces of medicalisation that Conrad and Clarke have suggested: Rather than the medical profession, market (e.g., companies) and state (e.g., health policy) actors seem to be the engines behind medicalisation in the 21st century. While companies in globalised capitalism use medicalisation to gain profits, states' rationales to engage in medicalisation are more complex. However, the resonance of medicalising (and thereby individualising) social problems with neoliberal reform and welfare state restructuring might be one important underlying mechanism. Unlike medicalisation processes that are driven by social movements and consumers, medicalisation through markets and the state reinvigorate questions of power and social control as well as the association of medicalisation with social stigma.

This session invites both theoretical and empirical studies that investigate the role of markets and states in the medicalisation of personal and social problems. Considerations on the individual level discussing the power of professionals or patients' adherence are also of interest. Comparative studies and studies from the Global South are particularly welcome.

Session Organizers:

Nadine REIBLING, University of Siegen, Germany, Peter KRIWY, Chemnitz University of Technology, Germany and Sigrun OLAFSDOTTIR, Boston University, USA

Chair:

Peter KRIWY, Chemnitz University of Technology, Germany

Oral Presentations

296.1 The Medicalisation of Social Problems Relating to an Increase in Absent Workers with Depression in Japan

Shoko OKUDA, Kindai University, Japan

296.2 Contested Medicalization, Fundamental Questions and Fragmented Responsibility: Governing Non-Invasive Prenatal Testing (NIPT) in Germany

Sabine KÖNNINGER, Berlin-Brandenburg Academy of Sciences and Humanities, Germany; Kathrin BRAUN, Institute for Political Sciences, University of Hanover, Germany

296.3 Trends in Medical and Psychological Explanations for Unemployment in German Parliamentary Debates

Mareike ARIAANS, University of Siegen, Germany

296.4 ADHD Goes Global: Notes on Variations in Medicalization and Responses to a Diagnosis in 16 Countries

Meredith BERGEY, Villanova University, USA; Peter CONRAD, Brandeis University, USA

296.5 Ageing and Performance: From Medicalization to Pharmaceuticalization

Noémia LOPES, Instituto Universitário de Lisboa (ISCTE-IUL) - Egas Moniz, Centro de Investigação Interdisciplinar (CiiEM), Portugal

Distributed Papers

296.6 The Medicalisation of Reproduction, Reproductive Timing and the Labor Market - the Israeli Experts' Debate on Social Egg-Freezing

Nitzan RIMON-ZARFATY, Department of Medical Ethics and History of Medicine, University Medical Center Göttingen (UMG), Germany

296.7 Dramas of Medicalization in Everyday Social Network Life

Martin HARBUSCH, university of Kassel, Germany; Michael DELLWING, university of kassel, Germany



TORONTO ISA RECEPTION

Once again, we are delighted to invite RC15 and RC52 members to join us for an evening out to enjoy light food and drinks in good company.

Time: Wednesday July 18, 19h30

Location: The Mill St. Beer Hall, Distillery District, 21 Tankhouse Lane, Toronto, Ontario, M5A 3C4

RSVP at <https://fr.surveymonkey.com/r/GNHVJ6L> before July 16 for a complimentary drink (ask for a token from one of the organizers (Amélie Quesnel-Vallée or Helena Serra) onsite at the event)

Mill Street Brewery was East Toronto's first commercial micro-brewery to open in more than 100 years. It is set in an original tank house within the historic Gooderham & Worts distillery complex. Built in the late 1870s, the building is a well-preserved example of classic Victorian industrial architecture. Using a sophisticated draught beer delivery system, the beer hall offers a selection of Mill St. beers pumped through copper encased beer lines. Their on-site brewery still produces a great number of small batch seasonals, so you can take witness the brewing in action.

It is set in the Distillery District, which was designated a National Historic Site of Canada in 1988. Located due east of the Convention Center, most its brick-paved streets are restricted to pedestrian and bike traffic, and it contains numerous cafés, restaurants, and shops housed within heritage buildings of the former Gooderham and Worts Distillery. The 13 acres (5.3 ha) district comprises more than forty heritage buildings and ten streets, and is the largest collection of Victorian-era industrial architecture in North America.



RECENT ACTIVITIES

Report on the 44th

Annual Conference of the Japanese Society of Health & Medical Sociology

'Health Governance & Local Communities'

Seisa Dhoto University in Hokkaido

19-20 May 2018

The 44th Annual Conference of the Japanese Society of Health & Medical Sociology was attended by 140 Sociologists, junior, mid-career and senior, from a diverse range of insitutions in Japan, with the plenary speaker, Professor Stephanie Short from the Unbiversity of Sydney in Australia and a roundtable discussion chaired by A/Prof Rie Suzuki from the University of Michigan-Flint in the United States. The scientific convenor was Professor Miwako Hosoda, from Seisa Univeristiy in Japan.

The two-day Conference was conducted in Japanese language, however the plenary address was translated from English and the roundtable discussion was conducted in English. The plenary address by Professor Stephanie Short, the University of Sydney, was entitled 'Health Workforce Governance: Problems, Priorities, and Policy Recommendations. Her presentation outlined problems that lend themselves to sociological analysis and research, most notably recruitment, development, training and retention of the health workforce locally, nationally and globally in the context of the international mobility of the health workforce and Sustainable Development Goals (SDGs). Stephanie Short's presentation considered future directions for health sociological research and global health workforce governance. Her presentation emphasised the value of cross-national studies that are solution-oriented and in which sociologists collaborate with colleagues from other academic disciplines such as economics, law and epidemiology, and with health professional colleagues in medicine, nursing, dentistry and the allied health professions who share a comitment to public health principles such as the right to health and universal health coverage (UHC). This focus on health systems and policy was quite novel in the context of Japanese health sociology that has tended to focus on the micro level, ethnomethodology, conversation analysis and so on.

The main symposium was entitled 'The future of health and local community' and four speakers who had been involved in community health activities in different ways made presentations about their own activities and experiences and discussion as a whole.

Future directions for health and medical sociology in Japan were discussed in another symposium. Three speakers shared their ideas and research experience: A/Professor, Hiroshi Yamazaki, Shinshu University, presented on the present condition of the grounded theory approach in the Japanese research context; and

Professor Hiroki Maeda, Rikkyo University, pointed to a higher possibility for ethnomethodology in medical sociology research. Professor Yoshikazu Fujisawa, Miyagi University and Tokyo Medical University, emphasised that it would be important for researchers working in health and medical fields to be aware of the different goals and audiences for their research, in that the concerns of many researchers in this field are very practical, and address problems to be solved. This symposium acted as a kind of forerunner for the Conference to be held next year when the Society will reach its 30th anniversary from its establishment. The Conference in 2019 will be a milestone in which to develop directions for the future of this discipline in Japan.

The next JSHMS Conference will be held from 18-19 May 2019 in Jikei Medical University in Tokyo. Further information can be obtained from the Japanese Society of Health and Medical Sociology.

Website: <http://square.umin.ac.jp/medsocio/>

Telephone: +81 285587511

Email: jshms45-office@umin.ac.jp



FUTURE EVENTS



Health Workforce Research section



Pre-Conference to the 11th European Public Health Conference

Ljubljana, 28 November 2018

Working together for a people-centred health workforce

EUPHA ‘Health Workforce Research’ (HWR) section and the TO-REACH Project in collaboration with ASPHER, EHMA, European Observatory on Health Systems and Policies, and WHO Regional Office for Europe Chairs: Ellen Kuhlmann EUPHA HWR and representative TO-REACH

Background. Changing patterns of health and illness with growing multi-morbidity and ageing societies create new demand for health and social care services and professional competences. The societal challenges of creating a sustainable and people-centred health workforce are increasingly recognised in Europe and globally. Health systems and stakeholder organisations have taken action to respond to new demand for health workforce development. However, it is not well understood how to make a future health workforce happen that is people-centred and community-oriented as well as sustainable, adaptive and cost-effective. New competences and integrated models of care are needed, which call for major transformations in healthcare systems, service provision and professional development. There is an urgent need for innovation and research evidence to identify what works how and why in creating, managing and sustaining a people-centred health workforce and to transfer and translate knowledge between countries and communities.

Organisation and aims of the pre-conference. This Preconference will be organised jointly by the EUPHA 'Health Workforce Research' section and the EU project 'Towards a joint European research programme on health systems – TO-REACH' (<https://to-reach.eu/>, funded as Horizon 2020 project) in collaboration with the Association of Schools for Public Health in the European Region (ASPHER), the European Health Management Association (EHMA), the European Observatory on Health Systems and Policies and the WHO Regional Office for Europe. The aim is to align major stakeholders in the field of health workforce development and exchange knowledge on how to innovate the health workforce in Europe to respond to population needs effectively. More specifically, the Preconference seeks to (1) to enhance opportunities for building capacity across stakeholder organisations and strengthen public health, and (2) exchange research evidence and innovation to create, manage and sustain a people-centred health workforce and transfer knowledge between countries and communities.

Policy relevance. The Preconference will stimulate innovation and create new knowledge for better health workforce governance and professional development for integrated care provision which is responsive to the needs of the population and communities. The event will align stakeholders and will strengthen capacity building and networking. In particular, the connection with the To-Reach project will facilitate translation of research evidence into policy and practice and will explore new ways of transferring and translating knowledge across countries and communities.

Format. The Preconference will present latest health workforce research in Europe and connect different stakeholder views. The sessions are built around two major themes: to align stakeholders and build capacity (session 1 and 2), and to improve research evidence and innovation and explore knowledge transfer across countries (session 3 and 4). The Preconference applies an interactive workshop style with a mix of session formats and sufficient time for discussion. Session 1 opens the box with an expert panel, followed by a break-out in Session 2. Session 3 includes short keynote statements on latest research findings, including from the TO-REACH project and methodological innovation developed by the European Observatory on Health Systems and Policies. A break-out in Session 4 concludes with working groups and summing-up statements. The moderated break-out sessions will broaden the expertise and knowledge exchange through active involvement of all participants in the discussion.

Programme

Wednesday, 28 November 2018

9.00 – 10.30 Session I

Aligning stakeholder, building capacity for a people-centred health workforce

Session I opens the debate with an expert panel comprising different stakeholder groups. What is the evidence for a people-centred and community-based health workforce, and which policy frameworks are available to enhance workforce innovation? What is the evidence of health labour markets and monitoring systems? How does public health respond to new demand for competences and innovation? The session will promote critical debate about stakeholder collaboration and how to effectively build capacity and strengthen innovation.

9.00-10.30 Session I

Aligning stakeholders, building capacity
for a people-centred health workforce

2

Panelists

- Hans Kluge, WHO Regional Office for Europe

- Robert Otok, ASPHER
- Gaetan Lafortune, OECD
- Walter Riccardi, TO-REACH project
- Natasha Azzopardi Muscat, EUPHA

Plenary discussion

11.00 – 12.30 Session II

Break-out session

Session II is built on facilitated working groups to critically review the evidence presented in Session I and deepen the understanding of how to align stakeholders and strengthen capacity building for a people-centred health workforce.

13.30 – 15.00 Session III

Exchanging research evidence, enhancing innovation and cross-country learning

Session III uses latest results from the TO-REACH project to explore how research evidence can be translated into practice and enhance innovation across countries. This includes the presentation of survey results on policy needs for health workforce development and of innovation in practice and management and in methodology of health workforce development. The session also highlights the need for establishing a research agenda for building a future health workforce in Europe. The discussion will improve knowledge exchange on health workforce innovation and explain whether and how to translate innovation between countries.

Key note statements

- What do countries need? Priorities in health workforce research to enhance cross-national learning, Johan Hansen, TO-REACH Project
- How to manage the health workforce effectively? Usman Khan, EHMA
- How to innovate methodology to support health workforce development? Matthias Wismar, European Observatory on Health Systems and Policies
- How to promote health workforce innovation through research? Ellen Kuhlmann, EUPHA section Health Workforce Research

Plenary discussion

13.30 – 15.00 Session IV

Break-out session and summing-up

Session IV is built on facilitated working groups to critically review the results of the previous sessions. It will move the debate over people-centred health workforce development further and suggest ways of how to strengthen research evidence and innovation and improve knowledge translation between countries. Summing-up the results will bundle evidence and novel solutions to help countries in Europe to respond to the health workforce challenges more effectively.

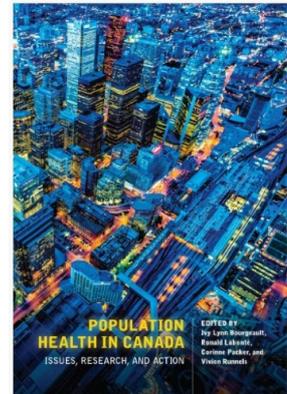
17.00 Closing comments, EUPHA HWR and TO-REACH project

PUBLICATIONS

[Population Health in Canada Issues, Research, and Action](#)

Edited by Ivy Lynn Bourgeault, Ronald Labonté, Corinne Packer and Vivien Runnels

This contributed volume includes papers from the Population Health Improvement Research Network (PHIRN) of Ontario and offers a focused analysis of the social and economic determinants of health that impact the health status of populations in Ontario as well as the conditions that can improve the health status of populations across Canada. The different sections address health policy theories, research methods, program interventions, and strategies for knowledge translation. Population Health in Canada is appropriate for use in upper-year undergraduate health sciences, social sciences, and political science programs, and for graduate study on the multi-disciplinary, interdisciplinary, and trans-disciplinary nature of population health research.



[The Social Dimensions of Health and Health Care in Canada](#)

Authors Terrance J Wade, Ivy Lynn Bourgeault, Elena Neiterman

The Social Dimensions of Health and Health Care in Canada challenges readers to move past commonly held beliefs about health and health care to broaden their understanding of how our social world influences health and illness. In doing this, readers are introduced to a broad array of health and health care issues from different perspectives. This text aims to provide students with a better understanding of the social influences on health and health care with a particular focus on the Canadian context.

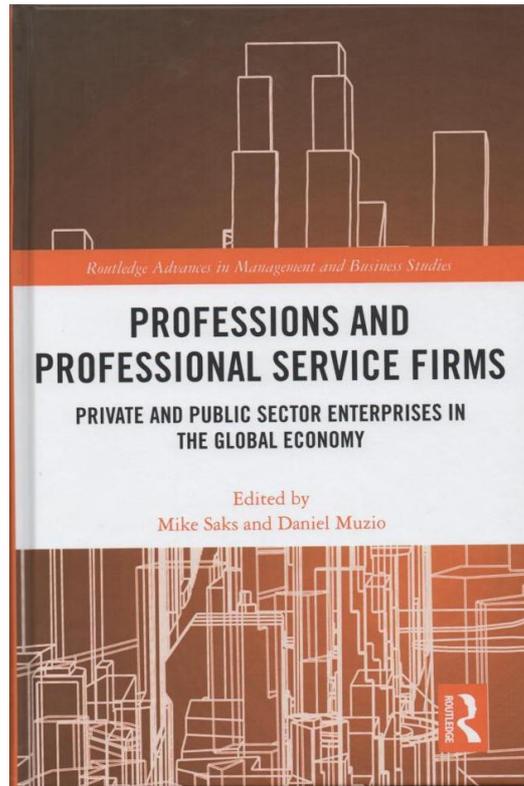
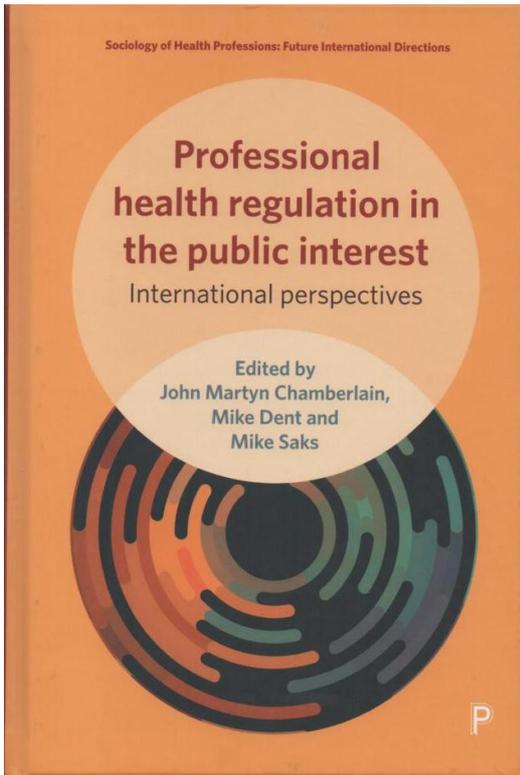


[Canadian Society Sociology of Health \(CSSH\) / La société canadienne de sociologie de la santé](#)

The Canadian Society for the Sociology of Health/Société Canadienne de Sociologie de la Santé is a nascent organization dedicated to the promotion of the sociological study of health, illness and health care issues in Canada in both our official languages.

We began in 2008 with hosting the Interim Conference of the Research Committee on Medical Sociology of the International Sociology Association in Montreal. Since then we have held biennial conferences in 2010, 2012, 2014 and 2016. Our most recent conference in 2016 had a variety of different sessions including sessions on Gender & Health, Mind the (Care) Gap, Gendered Health Practices, Population Health and Power and hierarchy among actors in healthcare practice and research.





Critical Gerontology Comes of Age

*Advances in Research and Theory
for a New Century*

Edited by
Chris Wellin

 Routledge
Taylor & Francis Group
NEW YORK AND LONDON

OTHER PUBLICATIONS:

Meredith Bergey, Peter Conrad, Angela Felipe and Ilina Singh (eds.), *GLOBAL PERSPECTIVES ON ADHD: SOCIAL DIMENSIONS OF DIAGNOSIS AND TREATMENT IN 16 COUNTRIES* (Johns Hopkins University Press, 2018).

Contains all fresh sociological materials of the migration, construction and treatment of ADHD in individual chapters in a global context. The country by country presentations are fascinating.

Peter Conrad and Valarie Leiter (eds.), *SOCIOLOGY OF HEALTH AND ILLNESS: CRITICAL PERSPECTIVES*, 10th edition (Sage, 2018).

The newest edition of the best selling text-reader. Revised with 20 new selections and new sections on globalization of health, the Internet and illness, and pharmaceuticalization, among others. Has been a top text for generations of medical sociology students.

Increased impact factor for *Health Sociology Review*

Joanne Bryant and Christy Newman, UNSW Sydney

Health Sociology Review is an international peer-reviewed journal for high quality conceptual and empirical research in the sociology of health, illness and medicine. The journal has a longstanding association with The Australian Sociological Association (TASA), and is published in partnership with Taylor and Francis.

2018 is the final year of our four-year term as joint Editors-in-Chief, during which we oversaw the transition of the journal to this much higher profile publisher. While the journal has had a long history in Australia, it has had an increasingly international scope, and with this new publisher we sought to showcase the best and most current work in health sociology from around the world.

We are pleased to announce that the **impact factor almost doubled in 2016**, increasing to 0.913 (from 0.446 in 2014). This also moves the journal up a quartile in the Scimago journal rankings. We are thrilled with this outcome as we believe this demonstrates that the journal will play an increasingly important role in promoting contemporary research and debate regarding the sociological aspects of health and illness.

We believe that one of the ways in which we have succeeded in increasing the impact of the journal is through some important special issues: please visit our website to read more about our 2017 special issues on 'Self-tracking, health and medicine', edited by Professor Deborah Lupton (University of Canberra, Australia), and on 'Latin American Health Sociology', edited by Associate Editor Fernando De Maio, (De Paul University, USA), Ignacio Llovet (Universidad de Lujan, Argentina) and Graciela Dinardi (Universidad de Tres de Febrero, Argentina).



We continue to encourage the submission of high quality manuscripts 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 this end, we have been able to maintain an **average time to first decision of 4 weeks**, which is shorter than most of comparable journals.

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.

Membership

Membership

Dues USD 60 (USD 20 discount) for a 4 year period.

ISA membership registration form is available on <https://isa.enoah.com/Sign-In>.

Board 2014-2018

President	Amélie QUESNEL-VALLEE, McGill University, Canada, amelie.quesnelvallee@mcgill.ca
Vice-President	Guido GIARELLI, University Magna Graecia, Italy
Secretary/Treasurer	Stephanie SHORT, University of Sydney, Australia, stephanie.short@sydney.edu.au
Newsletter Editor	Guido GIARELLI, University Magna Graecia, Italy, guido_giarelli@tin.it
	Masahira ANESAKI, Nihon University School of Medicine, Japan
	Alex ASAKITIKPI, Monash University, South Africa (to December 2022)
	Michael CALNAN, Kent University, United Kingdom (to December 2022)
Board members at large	Miwako HOSODA, Seisa University, Japan (to December 2022)
	Jennie Jacobs KRONENFELD, Arizona State University, USA
	Ellen KUHLMANN, IWAK, Medical School Hannover, Germany
	Mike SAKS, University of Suffolk, United Kingdom (to December 2022)