



**Sociology
of Health**

NEWSLETTER

October 2024

A Message from the RC15 President

Dear RC15 members

A recently-affiliated member of our RC messaged us a few days ago, asking about how they could be involved in events and initiatives developed by our group. They even inquired as to whether there would be someone with whom they could discuss possible project participation. Anticipating these questions, we requested ideas for activities that would encourage exchanges and collaborations between us in our most recent Newsletter. Some suggestions were received and are included in this Newsletter, which we plan to implement shortly.

After publishing our May Newsletter, we began accepting submissions for the proposed sessions of the 5th ISA Forum of Sociology which will take place in Rabat, Morocco, from July 6-11 2025. We encouraged our RC members to submit session proposals, including in collaboration with other RCs in the format of joint sessions. This resulted in a total of 30 sessions: 13 sessions exclusive to our RC, 8 joint sessions hosted by us, and 9 joint sessions hosted by other RCs, namely, RC11 Sociology of Aging, RC22 Sociology of Religion, RC23 Sociology of Science and Technology, RC25 Language and Society, RC28 Social Stratification, RC31 Sociology of Migration, RC46 Clinical Sociology, RC49 Mental Health and

Illness, RC52 Sociology of Professional Groups, and TG12 Social Love and Solidarity.

We are currently in the abstract submission period, which closes on October 15th. We invite both members and non-members to submit their abstracts, and we publish the 30 sessions that have been chosen in this Newsletter. We kindly remind colleagues that remote participation in this Forum is not available, and abstracts for oral presentations are welcome for all sessions.

As the set of sessions shows, we are diverse and numerous. This is part of our social capital, which can certainly be improved as we develop more collaborations and share more research opportunities, viewpoints, experiences, and global-local breakthroughs.

Looking forward to meeting you in Rabat!

Nelson Filice de Barros

Mensagem do Presidente do RC15

Caros membros do RC15,

Dias atrás um membro recém filiado aos nosso RC enviou uma mensagem perguntando sobre como poderia participar de eventos e iniciativas desenvolvidas pelo nosso coletivo. Perguntou, inclusivé, se haveria alguém com quem conversar sobre projetos com potencial participação. Antecipando suas questões, na edição anterior da nossa Newsletter, fizemos uma consulta sobre sugestões de atividades que pudessem estimular trocas e colaborações entre nós. Tivemos várias sugestões, que são apresentadas nessa Newsletter e que pretendemos fazer acontecer em breve.

Após a publicação da nossa Newsletter em Maio, iniciámos o período de submissão de sessões para compor o programa do quinto ISA Forum de Sociologia em Rabat, Marrocos, de 6-11 Julho, 2025. Estimulámos o envio de sessões pelos membros de nosso RC,

inclusivé em colaboração com outros RCs no formato de sessões partilhadas, que resultou no total de 30 sessões: 13 sessões exclusivas do nosso RC, 8 sessões partilhadas e organizadas por nós, e 9 sessões partilhadas e organizadas por outros RCs, nomeadamente, RC11 Sociology of Aging, RC22 Sociology of Religion, RC23 Sociology of Science and Technology, RC25 Language and Society, RC28 Social Stratification, RC31 Sociology of Migration, RC46 Clinical Sociology, RC49 Mental Health and Illness, RC52 Sociology of Professional Groups, e TG12 Social Love and Solidarity.

Agora estamos no período de submissão de resumos até 15 de outubro. Incentivamos nossos membros a enviar resumos, e apresentamos as 30 sessões selecionadas nesta Newsletter. Lembramos que nesse Forum não haverá a possibilidade de participação remota, de forma que todas as sessões estão abertas para o recebimento de resumos para apresentações orais.

Como se vê no conjunto das sessões, somos diversos e muitos. Isso é parte do nosso capital social, que, certamente, pode ser potencializado na medida em que criamos mais estratégias de colaboração, com maior compartilhamento de oportunidades de pesquisa, perspectivas, experiências, e inovações globais-locais.

Esperando vê-los em Rabat!

Nelson Filice de Barros

Mensaje del Presidente del RC15

Estimados miembros del RC15,

Hace unos días, un miembro recién afiliado de nuestro RC envió un mensaje preguntando cómo podría participar en eventos e iniciativas desarrolladas por nuestro comité. Incluso preguntó si había alguien con quien podría hablar sobre la participación en posibles proyectos. Anticipándonos a sus preguntas, en la edición anterior de nuestro boletín consultamos sugerencias de actividades que podrían estimular intercambios y colaboraciones

entre nosotros. Nos propusieron varias sugerencias que presentamos en este boletín y que aspiramos hacerlas realidad en breve.

Tras la publicación de nuestro boletín en mayo, comenzamos el período de presentación de sesiones para formar el programa del quinto Foro de Sociología de la ISA en Rabat, Marruecos, del 6 al 11 de julio de 2025. Alentamos la presentación de sesiones por parte de miembros de nuestro comité, incluso en colaboración con otros grupos en formato de sesiones compartidas, lo que resultó en un total de 30 sesiones: 13 sesiones exclusivas de nuestro comité, 8 sesiones compartidas y organizadas por nosotros y 9 sesiones compartidas y organizadas por otros grupos, a saber: RC11 Sociology of Aging, RC22 Sociology of Religion, RC23 Sociology of Science and Technology, RC25 Language and Society, RC28 Social Stratification, RC31 Sociology of Migration, RC46 Clinical Sociology, RC49 Mental Health and Illness, RC52 Sociology of Professional Groups, y TG12 Social Love and Solidarity.

Ahora estamos en el período de envío de resúmenes que finalizará el 15 de octubre. Alentamos a nuestros miembros a enviar resúmenes; presentamos las 30 sesiones seleccionadas en este boletín. Tengan en cuenta que no habrá posibilidad de participación remota en este Foro, por lo que todas las sesiones están abiertas a recibir resúmenes para presentaciones orales.

Como se puede ver en todas las sesiones, somos diversos y muchos. Esto es parte de nuestro capital social, que ciertamente puede mejorarse a medida que creamos más estrategias de colaboración, con un mayor intercambio de oportunidades de investigación, perspectivas, experiencias e innovaciones globales-locales.

¡Espero verlos en Rabat!

Nelson Filice de Barros

Results of the RC15 Survey to Members (May-September 2024)

In our previous Newsletter, the RC15 community was invited to participate in a survey aiming to find out how you prefer to keep in touch, initiate collaborations, look for research opportunities, and help in the formation of younger scholars. In what follows, we present the survey results, compiled by Joana Almeida.

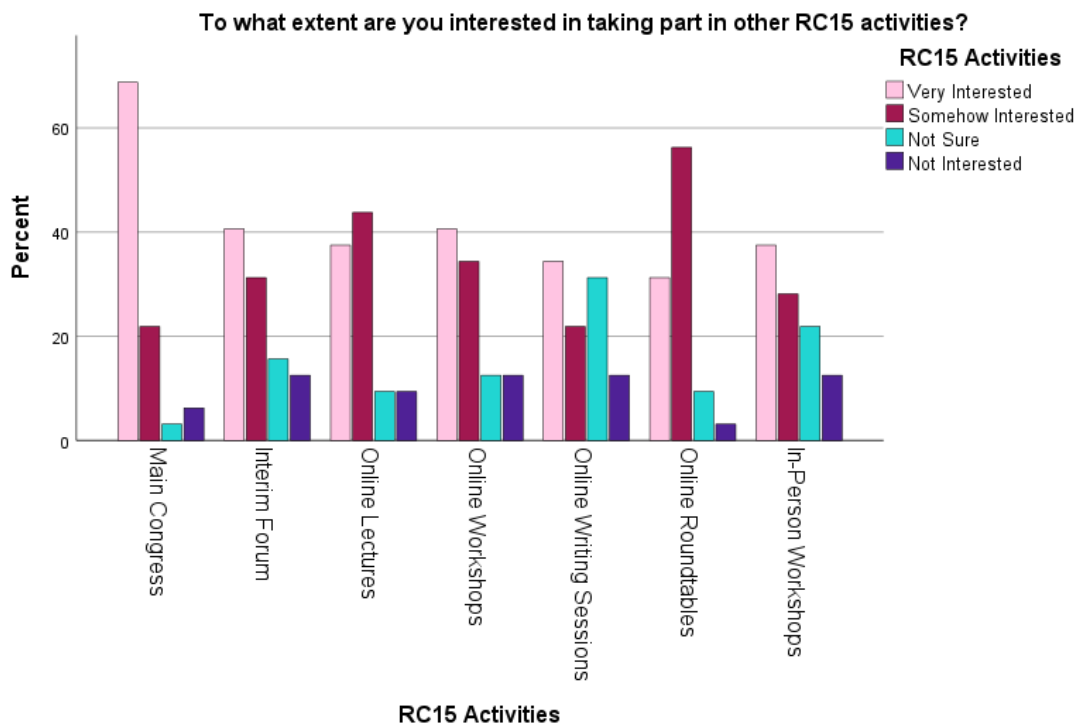
Thirty-two persons participated in the survey, with the vast majority (93.75%) being ISA RC15 members. The majority of respondents participated in last year's ISA Conference in Melbourne, Australia. Of those attendees, 50% joined online, 45.45% attended in person, and 4.55% participated in a hybrid format¹. Almost 30% of respondents are planning to attend the upcoming 5th ISA Forum in Rabat, Morocco, taking place from July 6-11, 2025.

There is a strong desire among RC15 members to stay connected with their peers, with an overwhelming 93.75% expressing the importance of maintaining communication and engagement within the group. This highlights a significant sense of community and the value members place on fostering relationships and staying informed through regular interactions. One effective way to enhance communication could be through our LinkedIn page: <https://www.linkedin.com/groups/8199252/>

¹ We acknowledge that there was a glitch in the survey, but it has been resolved, ensuring the accuracy of the results.

To gauge members' interest in participating in various RC15 activities, we inquired about their preferences for the following formats:

- Main Congress
- Interim Forum
- Online lectures
- Online workshops
- Online writing sessions
- Online roundtables
- In-person workshops



When combining the categories of 'Very interested' and 'Somewhat interested', the main Congress emerged as the top choice (90.63%), followed by online roundtables (87.5%), online lectures (84.38%), online workshops (75.01%), the interim Forum (71.88%), in-person workshops (65.63%), and online writing sessions (56.26%).

In response to the question, 'In what other ways do you think RC15 can support your academic endeavours?', all suggestions were grouped into four main clusters:

- Sharing and Access to Research
- Collaboration and Engagement
- Workshops, Lectures, and Networking
- Inclusivity and Support

Thank you very much for participating in the survey! In light of its results, we plan to launch activities to help strengthen our community.

RC15 Community Members met in the European Sociological Association in Porto, Portugal, 26-29 August 2024



ISA Members also got together for dinner at "Casa Agrícola" in Porto

RC15 in the Upcoming V ISA Forum of Sociology

We are looking forward to meeting in the upcoming Forum! The abstract submission deadline is October 15th, 2024. We encourage you to submit your abstract for one of our vibrant sections. For your convenience, they are listed below. You can submit your abstract [here](#)

1. "Intersectional Health and Wellbeing: Emphasizing Vulnerable Populations"

RC15 Sociology of Health (host committee)

Language: English, French and Spanish

Session Type: Oral

The proposed session for the Sociological Congress, titled "Intersectional Health and Wellbeing: Emphasizing Vulnerable Populations," aims to address the complex and multifaceted nature of health disparities among vulnerable groups through an intersectional lens. This session will delve into how overlapping social identities—such as race, gender, socioeconomic status, and disability—compound to influence health outcomes and perpetuate inequities.

By bringing together experts from public health, sociology, and policy studies, this session will provide a comprehensive examination of the systemic barriers that hinder equitable access to healthcare and overall wellbeing. The discussion will highlight case studies and empirical evidence to illustrate the real-world impacts of these disparities.

The session will also focus on actionable strategies and inclusive policies that can mitigate these health inequities. Participants will engage in interactive discussion to design interventions aimed at addressing specific health disparities, fostering a collaborative environment for the exchange of ideas and best practices.

Ultimately, this session seeks to promote a more profound understanding of the social determinants of health and advocate for a paradigm shift towards a more equitable healthcare system that prioritizes the needs of the most marginalized populations.

Session Organizer:

Maria BELDI ALCANTRARA, USP FM, Brazil, loubeldi@usp.br

2. Addressing Gentrification, Displacement, and Health Among Older Adults

RC11 Sociology of Aging (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

Gentrification, the transformation of neighborhoods from low to high value, is also known as urban renewal, urban redevelopment, neighborhood change, revitalization, redlining, or urban regeneration. As cities worldwide undergo gentrification infrastructure transformations and cost of living increases, older adults face unique challenges in maintaining their homes, social networks, and access to services (e.g., food security, transportation, housing, etc.). Gentrification affects a community's identity, reduces trust and reciprocal relationships facilitating neighbors helping neighbors, and leads to older adults' social isolation and inability to remain in place. Gentrification can be a place-based stressor associated with older adults' poorer health. Interdisciplinary perspectives can explore how these urban processes impact the physical, mental, and social well-being of older residents. Gentrification's impact varies by environment or place, social vulnerabilities, and intersectional statuses (e.g., socioeconomic status, race, ethnic or gender identity, sexuality, and migration status) differentially influencing health outcomes. Researchers globally have examined the impact of gentrification on older adults in neighborhood settings. Fullilove and Wallace (2011) highlight the "root shock" concept's detrimental effects on long-term residents' health in the United States. Buffel and Phillipson (2019) explore gentrifying neighborhoods in the United Kingdom, and Wiles et al. (2012) explore aging in place in New Zealand. This symposium hopes to expand upon existing research, incorporating multinational perspectives and community resistance strategies. We encourage research addressing gentrification and displacement in terms of older adults' health and well-being, relationship to social vulnerabilities/health disparities, age-friendly cities, and community solutions (e.g., advocacy, programs, policies, or interventions to protect older adults).

Session Organizers:

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Joyce WEIL, Towson University, Department of Health Sciences, USA,
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3. Addressing Healthcare Challenges for Migrant Populations

RC15 Sociology of Health (host committee)

RC31 Sociology of Migration

Language: English

Session Type: Oral

Migrants often encounter difficulties in receiving equal healthcare compared to native-born individuals. These discrepancies arise from various factors, including socio-economic position, legal barriers to accessing healthcare services, and issues related to trust, language, and discrimination that affect healthcare-seeking behaviour. With a focus on addressing healthcare challenges within diverse societies, this session invites presentations on migration and health, particularly emphasizing studies relevant for shaping policy, education, or training in healthcare systems. Topics may, for example, encompass migrant-healthcare interactions, socio-cultural differences in perceptions of illness and health, or initiatives aimed at promoting equal access to healthcare services. Both quantitative and qualitative studies are welcome.

Session Organizers:

Sigrun OLAFSDOTTIR sigruno@hi.is

Andrey TIBAJEV, Uppsala University, Sweden; Institute for Futures Studies, Sweden, andrey.tibajev@iffs.se

4. Aging and Issues of Illness, Medical Care and Wellbeing

RC11 Sociology of Aging (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

The categorisation of aging as a disease is a topic of debate, with different philosophical and scientific communities holding divergent views on the matter. Some argue that ageing should be considered a disease due to its implications for medical treatment and practical consequences. However, others contend that, despite being the root cause of age-related diseases, aging should not be categorised as a disease in itself. The discussion encompasses considerations of the meanings of 'ageing' and 'disease', highlighting linguistic distinctions and philosophical, ethical, ontological, pathophysiological, clinical and biological aspects. While some workshops and seminars have explored ageing as a clinically relevant entity, focusing on its causes and management, consensus remains divided on whether ageing should be formally categorised as a disease. The interaction between disease and medical care in the context of ageing is a complex one. An aging population faces challenges in accessing high-quality medical care due to the

prevalence of chronic diseases, treatment difficulties and increasing healthcare costs. Modern approaches in geriatrics and social policies aim to normalise ageing, focusing on autonomy and self-care as indicators of health. However, dichotomies between 'normal' and 'pathological' ageing persist, leading to targeted interventions for those unable to meet optimal health standards. It is of the utmost importance to provide healthcare and care for the elderly, given the rising number of older people globally. Various initiatives have been implemented to address this issue.

Session Organizers:

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5. Antimicrobial Resistance, Vulnerabilities and Justice in Healthcare

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

Antimicrobial resistance (AMR) is widely acknowledged as one of the top global public health threats. WHO recently reported that it is estimated that bacterial AMR was directly responsible for 1.27 million global deaths in 2019 and contributed to 4.95 million deaths. Although AMR is a widespread phenomenon across the Globe, infection management and antibiotic decision-making is influenced by social, cultural, historical, economic, and political factors.

Despite the established body of research on AMR, there is a pressing need to deepen our understanding of how diverse social contexts, healthcare settings, and justice considerations affect antibiotic use and resistance, with a particular focus on the vulnerabilities in both prescribing and consumption practices.

This session seeks to explore the multifaceted social dimensions of AMR, encompassing a broad array of topics related to social context, healthcare environments, and ethical considerations, particularly in the context of justice. We invite contributions, whether theoretical or empirical, that examine the following themes: how gender, ethnicity, age, social class, and other vulnerabilities impact medical decision-making over antibiotic prescription; the role of social and economic vulnerabilities in shaping individual and community exposure to AMR; how cultural beliefs and practices influence antibiotic use and perceptions of AMR (with a particular focus on comparative studies of antibiotic consumption and prescription practices in different cultural settings); how knowledge regarding antibiotic consumption and

prescription is produced and disseminated in different cultural contexts and professional fields; ethical dimensions of AMR policy and practice – exploring justice-focused approaches to ensuring equitable access to antibiotics and preventing AMR.

Session Organizers:

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6. Automated Futures and Challenges Facing the Healthcare Field: Provider-Patient Relations and the Patient Experience.

RC52 Sociology of Professional Groups (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

This session explores the impact of automation on healthcare service delivery, patient-practitioner encounters, and how patients make use of AI to manage their own healthcare needs. Research has begun to suggest that technology is altering encounters, interactions, and relationships between health professionals and patients. Patient's use of 'Dr. Google' or apps to diagnose their health issues, as well as interactions between professionals and patients on social media or apps, further promises to challenge and alter patient-practitioner relations. Papers in this session will consider the automated futures and challenges of healthcare professionals through a focus on patient-provider interactions, and/or patients' experiences with AI and other technologies when managing their health and illness needs.

Session Organizers:

Tracey ADAMS, Western University, Canada, tadams@uwo.ca

Joana ALMEIDA, University of Bedfordshire, United Kingdom,

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7. Caring for Healthcare Professionals

RC15 Sociology of Health (host committee)

RC52 Sociology of Professional Groups

Language: English

Session Type: Oral

Following structural, attitudinal, technological, and economic changes in the healthcare field, concerns about the impact of work and its organization on the lives of healthcare professionals became prominent. This impact was found

to affect not only the working sphere but also extend to the personal sphere. Feminization of certain medical fields, as well as generational differences further accentuate this impact. In light of this situation, health organizations and professional associations have been required to reorganize work hours and shifts, and initiated support systems and intervention programs to mitigate work burnout effects, ensure work/life balance, and ensure healthcare personnel maintenance. “Wellness” is extensively used to characterize the ends of these programs, but it often lacks sociological imagination regarding its definition, delineation, application and theoretical lens. Moreover, the link between wellness and health remains obscure in this field.

This session calls for papers focusing on healthcare professionals' wellbeing, or lack thereof; initiatives aiming to ameliorate healthcare professionals burnout, absenteeism, presentism; work/life (im)balance; healthcare working environments or conditions that impact professionals' wellbeing and health. We aim to deepen the discussion about the status of healthcare professional groups vis-à-vis their working conditions. We encourage presentations about fully trained healthcare professionals as well as those in their training phases. Contributions about empirical research as well as theoretical-focused ones are welcome.

Session Organizers:

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Tracey ADAMS, Western University, Canada, tadams@uwo.ca

8. Convalescent Blood Plasma Donations during COVID-19: Promises and Challenges

RC15 Sociology of Health (host committee)

TG12 Social Love and Solidarity

Language: English

Session Type: Oral

From a medical-scientific perspective, convalescent plasma donation is a practice that medicine has relied on recurrently whenever no established therapeutics or vaccines are available in front of emergent infectious diseases. From a sociological perspective, it invites examinations on a range of concerns in the discipline, including how risk, uncertainty, precarity, and liminality interplay with gift-making and how individuality and sociality co-produce and intersect with each other on multiple dimensions of humanity. Amid the urgency of the latest Covid-19 pandemic, numerous countries across the world instituted governmental and non-governmental drives to collect convalescent

plasma. Exact contours vary from one national context to another and from one donor to another, generating hopes and despairs alike, promises and challenges at once, and solutions and problems at once. This session hopes to put together the duly diverse observations from various corners of the globe at all levels/methods of analysis, from micro to macro and both quantitative and qualitative. To what extent can convalescent plasma donation reshape human suffering in future pandemics? We hope to start answering it.

Session Organizers:

Jae-Mahn SHIM, Korea University, South Korea, jaemahn.shim@gmail.com

Fabrizio MARTIRE, Sapienza, University of Rome, Italy, fabrizio.martire@uniroma1.it

9. Culture Matters: Taking into Account Cultural Context in Health Policy Making

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

In today's world, research is increasingly focused on the social aspects of public health organization in various countries and communities worldwide. One of the most significant social determinants in health care is culture, that determines behavioral patterns and attitudes toward self-preservation behavior. Cultural dimension of public health organization is a topic of interest at the highest international level today. In particular, since the pandemic, WHO has promoted the Behavioural and Cultural Insights (BCI) approach, where culture is an object of social science research and is a factor in determining individual's personal health behavior. In contrast to the classical biomedical approach, BCI explains health status of a population through cultural determinants that set the thinking, reactions, logic of behavior and actions of people in each community, including culture influences decision-making in public health, for example, in such areas as health education, social support for preventive measures, building regional palliative or psychiatric care services and many others. Sociology's expertise and its interdisciplinary synthesis with other social and behavioral sciences are crucial here. So, we see increase in the demand for scientifically proved and evidence-based social knowledge from researchers around the world.

This section focuses on discussing the principles of cultural approach in building health policy based on research data.

Preference will be given to papers with applied sociological and interdisciplinary social science research that explore the relationship between health policy and its implementation and the sociocultural context of a

particular region or community, as well as cross-cultural comparisons in this area.

Session Organizer:

Ignat BOGDAN, *Research Institute for Healthcare Organization and Medical Management of Moscow Healthcare Department, Russian Federation*, bogdaniv@zdrav.mos.ru

10. Empowerment through Peer Support for People with Illnesses and Disabilities

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

In recent years, the status of patients in healthcare has been changing. One such change is that patients are not only recipients of healthcare, but are empowered to collaborate with healthcare providers, medical researchers, pharmaceutical companies, etc. This is known as peer support or "patient and public involvement (PPI)". Peer support is important because it allows patients to share experiences and knowledge and encourage each other to improve care and quality of life, while PPI indicates the need for patients and the general public to participate in medical research and drug development. A "patient" in this context is not just a recipient of health care, a research subject, or a client, but also a person who is an independent individual, a citizen, a consumer, or an active decision maker. The rise of such PPI and peer support can be attributed to changes in the social context in which patients and medical and health professionals are situated. It has been pointed out that these changes include criticism of the previous healthcare system and changing patient needs. Digitalization has also facilitated access to medical knowledge and increased connections between patients.

What is the patient in the Anthropocene? What should people's knowledge and skills about health and life look like? How do we view health and medical disparities in regions and countries? We would like to discuss with you what justice means in health and medical care.

Session Organizer:

Miwako HOSODA, *Seisa University, Japan*, miwhosoda@seisa.ac.jp

11. Existing and Not Belonging: Teaching Sociology for Healthcare Professionals

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

The teaching of sociology in undergraduate and postgraduate of healthcare professionals' education has gone from "nice to know" to "need to know" in

recent decades. However, teaching sociology to health professionals is an experience of existing and not belonging, that is, of participating in training and not belonging to their fields of practice. There are reports of structural impediments, such as the reduced number of professionals for teaching sociology, difficulties in developing activities in institutions that, for the most part, consider health sociology themes irrelevant and hidden curriculum practices that reproduce prejudices among health professionals. Additionally, it has become common practice to teach sociology under disguised names. The most striking fact regarding these difficulties is that they were identified decades ago and have not yet been overcome, on the contrary, in some cases they are intensifying. The objective of this session is to discuss experiences, challenges and opportunities of teaching sociology in the training of healthcare professionals. The aim is to discuss the teaching of sociology to: understand the social aspects of health, illness and care; the construction of a sociology with health, based on sociology in medicine and sociology of medicine; and the participation of sociology in the training of critical-reflective health professionals on the processes of medicalization and pharmaceuticalization and others. Also welcome are reports about estrangements, assimilations, embarrassments, ambivalences and other notable events in the experience of teaching sociology to healthcare professionals.

Session Organizers:

Nelson FILICE BARROS, University of Campinas, Brazil, filice@unicamp.br

Paula FEDER-BUBIS, Ben-Gurion University of the Negev, Israel, federbub@bgu.ac.il

12. Experiences of Working on and Working with Artificial Intelligence: Automated Futures and Challenges Facing the Healthcare Field and Healthcare Professions

RC15 Sociology of Health (host committee)

RC52 Sociology of Professional Groups

Language: English, French and Spanish

Session Type: Oral

Artificial Intelligence (AI) is being used more and more in many spheres of life, and research on its application in healthcare has also increased. Jointly organised with RC52, this session examines issues and challenges of those working on as well as those working with AI. This includes (but not limited to): challenges faced by workers who operate behind the scenes labelling or moderating data; the impact of AI on the work of healthcare professionals, including how they engage with AI and whether they trust it; the extent to

which AI can replace healthcare professionals in providing healthcare services; and the ways in which AI can improve the efficiency of the delivery of healthcare services (such as, but not limited to, patient data management and precision medicine).

Session Organizers:

Farah PURWANINGRUM, *Taman Chrysan, Indonesia; The University of Sydney, Australia, fara.arum@gmail.com*

Alan PETERSEN, *School of Social Sciences, Monash University, Australia, Alan.petersen@monash.edu*

Tracey ADAMS, *Western University, Canada, tladams@uwo.ca*

13. Global Transformations in Substance Use

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

During the 21st century, transformations in substance use policies and consumption have occurred. Some substances, such as cannabis, have experienced policy liberalization toward legal markets in diverse locations such as the U.S., Canada, Uruguay, Thailand, and Germany. While tobacco control efforts reduced traditional tobacco use in many regions, the emergence of vaping and alternative nicotine products expanded the scope of tobacco markets. In addition, opioids – both as desired drugs and adulterants – drastically affected mortality in North America, while stimulant use increased in the Global South. Simultaneously, distribution routes have evolved in ways that affect those throughout the production chain, with the emergence of new drug-producing countries and shifts in supply chains within traditional drug-producing countries. In this session, we are interested in the broad implications of these global transformations for patterns of use, drug markets, and the wider implications for population health and well-being. We encourage papers that explore the effects of global transformations both for people who use drugs as well as those involved in production and distribution of drugs. For example, papers might consider how laws and policies affect prevalence of use and mortality, how global supply chain and drug trend changes have affected drug-producing farmers and communities' livelihoods, innovations in treatment and harm reduction, and challenges for healthcare and treatment in nations with zero-tolerance drug policies. We seek papers from diverse scholars across the globe to highlight the transnational nature and global interconnectedness of drug markets and their implications for individual, community, and societal health.

Session Organizers:

Michael VUOLO, *The Ohio State University, USA, vuolo.2@osu.edu*

Brian KELLY, *Indiana University, USA, bckelly@purdue.edu*

14. Health, Religion, and Spirituality. Interstices in a Complex Field of Knowledge.

RC22 Sociology of Religion (host committee)

RC15 Sociology of Health

Language: English and Spanish

Session Type: Oral

The relationship between health, religion, and spirituality has existed in various contexts worldwide since ancient times. However, this relationship has been eroded through processes of colonization. These have privileged biomedical perspectives and marginalized other knowledge about health, illness, care, and well-being. This has given rise to the configuration of legitimization strategies by biomedicine, from which a system of institutions, specialists, and hegemonic knowledge has been established in the complex health field. Following Good (1994) and Kleinman (1973), biomedicine can be understood as a cultural system and, as such, is intertwined with subjectivity. Therefore, we can identify a power arena in the health field where diverse understandings about health, illness, and wellbeing co-exist, some of them carrying a religious and spiritual component. We argue that several interstices persist, and new ones emerge where health, religion, and spirituality overlap. This session proposes to discuss the different forms and fields in which such interstices are configured. This can include but is not limited to papers focused on analyzing legitimization strategies where the relationship between health and religion is institutionalized; the study on the configuration of therapeutic assemblages either in the illness trajectories of some social groups or by the treatment provided by specialists; religious and spiritual practices as coping strategies for emotional and mental wellbeing; and the growing expansion of healing rituals and practices related to new spiritualities.

Session Organizers:

Olga OLIVAS HERNANDEZ, *CONAHACYT/ El Colegio de la Frontera Norte, Mexico, olivas@colef.mx*

Lorena NUNEZ CARRASCO, *University of the Witwatersrand, South Africa, Lorena.Nunezcarrasco@wits.ac.za*

15. Immigrant Health through the Life Course: Exploring Pre-Migration Influences and Post-Migration Outcomes

RC15 Sociology of Health (host committee)

RC31 Sociology of Migration

Language: English

Session Type: Oral

Understanding the health outcomes of immigrant populations requires a comprehensive approach that considers the entire life course, including conditions and experiences in the country of origin. This session is motivated by the need to explore how pre-migration factors shape health trajectories post-migration, providing a holistic view of immigrant health disparities.

This session invites submissions that investigate the role of pre-migration characteristics—such as socioeconomic status, educational attainment, cultural practices, and institutional exposure—in determining health outcomes after migration. Papers employing various methodological approaches, including quantitative, qualitative, and mixed methods, are encouraged. Research addressing different aspects of health, such as physical, mental, and social well-being, is particularly welcome.

This session expects empirical findings linking pre-migration conditions with post-migration health outcomes while exploring the mechanisms through which early-life experiences influence health across the lifespan. Research should ideally highlight policy implications and propose interventions aimed at promoting health equity among immigrant populations, while fostering interdisciplinary dialogue and collaboration among researchers studying immigrant health from a life course perspective.

The session aims to generate a deeper sociological understanding of the long-term health disparities faced by immigrant populations. By integrating insights from diverse studies, it seeks to identify critical points of intervention that can mitigate adverse health outcomes. The session is expected to contribute to a deeper understanding of immigrants' health, bringing a life course perspective into the understanding of how immigrants' health is shaped beyond the event of migration itself and the characteristics of the host country.

Session Organizer:

Ariel AZAR, *Purdue University, USA, ariel.azar@gmail.com*

16. Insights Gained from Academic-Community Partnerships for Socially-Vulnerable Older Adults Participating in Community-Engaged Research

RC11 Sociology of Aging (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

Increasingly community-engaged research, characterized by collaborations between researchers and community partners, is recognized as an important part of translating research into improved health outcomes and reduced health disparities for community participants. Training community participants to engage in some or all aspects of this research, particularly focusing on socially-vulnerable (e.g., racial and ethnic minority and low income) older adults, highlights the need to understand community engagement's opportunities and challenges. With this symposium, submissions will discuss and reflect on community-engaged and community-based participatory research approaches to community-academic partnerships with socially-vulnerable older adults. Presentations may consider strategies for developing and sustaining partnerships; funding; recruitment, retention, and training of community members and community advisory boards; health education outreach and engagement to improve health outcomes; improved data collection; co-publishing with community members; opportunities, challenges, and implications of community-academic partnerships with socially-vulnerable older adults; etc.

Session Organizer:

Ronica ROOKS, *University of Colorado Denver, USA*,
ronica.rooks@ucdenver.edu

17. Language on Health, Disease and Treatment after COVID-19 Pandemic

RC25 Language and Society (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

The COVID-19 pandemic has left a huge impact to our lives in every social and personal sphere since its outbreak. We are almost free from the stern restrictions that was adopted officially by the government and health authority but there remains some fear among the people who are in the vulnerable situation or who have a chronic disease which may worsen the damage of infectious disease. Also, we still remember a strong vaccination campaign promoted the government and health authority and huge waves of anti-vaccination discourse in the midst of the pandemic. Those events have changed people's attitude toward health, disease or infection prevention to some extent.

We have encountered a lot of counter-discourse claiming that the officially recommended measures to prevent the spread of infection are not merely ineffectual but also harmful to people's health, which is often referred as "conspiracy theory". It sometimes brings the breakups of intimate relationships

such as family, friends, and community. We understand, therefore, that the pandemic has affected our physical, mental, and relational health thoroughly. In this perspective, we invite scholars and practitioners to submit paper proposals on topics related to, although not limited to, the following topics:

- the role of language to help people keep themselves safe and healthy,
- official language accepted and refused by lay people,
- discourse of media covering pandemic,
- discourse about infection in daily life,
- discourse in SNS about infection and prevention
- infodemic and daily practices, etc.

Session Organizers:

Keiji FUJIYOSHI, *Otemon Gakuin University, Japan, fjosh524@hotmail.com*
Miwako HOSODA, *Seisa University, Japan, miwhosoda@seisa.ac.jp*

18. Médecine Et Société à l'Épreuve De La Maladie Chronique

RC15 Sociology of Health (host committee)

RC49 Mental Health and Illness

Language: English and French

Session Type: Oral

Le Maroc a connu une importante transition épidémiologique, caractérisée par la régression des maladies infectieuses et l'accroissement des maladies chroniques. Suite aux progrès médicaux, au développement socio-économique et à l'évolution marquée des modes de vie chez la population marocaine, des pathologies autrefois aiguës et souvent mortelles se sont transformées en maladies chroniques, comme c'est le cas des maladies cardiovasculaires, du sida, de l'hépatite C, de certains cancers, de l'insuffisance rénale, de certaines affections psychiatriques, ou encore du diabète et de ses complications.

Si l'intervention médicale s'est avérée efficace dans le diagnostic et la prise en charge des maladies aiguës, ce n'est pas le cas quand il s'agit des pathologies marquées par le sceau de la chronicité. Ces dernières modifient le cadre traditionnel de la relation duale soignant-soigné et nécessitent l'intervention de plusieurs spécialistes et thérapeutes dans le processus de soin dans lequel le médecin n'est que le maillon d'une chaîne. De fait, Ainsi, les réponses sociales mobilisées face aux maladies aiguës deviennent inopérantes ce qui reflète une situation sociale encore mal définie pour tous les acteurs impliqués dans la prise en charge de la maladie.

L'objectif de cette session est d'esquisser une réflexion transversale sur la maladie chronique, d'explorer les défis émergents auxquels elle expose aussi bien le système et les politiques de santé que les professionnels de soins,

d'analyser les enjeux éthiques et moraux, ainsi que les conséquences de la maladie chronique sur le vécu du malade et de son entourage.

Session Organizer:

Khadija ZOUITNI, Mohammed V University, Morocco,
zouitnikhadija1@gmail.com

19. On the Move? Migration and (Im)Mobility Among Healthcare Professionals

RC15 Sociology of Health (host committee)

RC52 Sociology of Professional Groups

Language: English

Session Type: Oral

Globalization has increased mobility for health professionals. Today, internationally educated nurses and physicians comprise a significant portion of the global health workforce. More than one quarter of physicians in the US, UK, Sweden, and Australia are internationally educated. Across 22 OECD countries 14.5% of the nurse workforce is comprised of internationally educated nurses. In addition to these professionals, in 2023, care workers accounted for 58% of the healthcare workforce in the UK who were sponsored for skilled work visas. Across 31 OECD countries, 12.5% of long-term care workers have a fixed-term contract and are subjected to poor working conditions, including low pay, high physical and mental risks, and little recognition. We seek papers that focus on the structural, ethical, policy, and/or individual dimensions of the global health workforce. Topics may include factors that push health professionals from their countries of origin and pull them to their destination country; policy initiatives in destination and source countries, including those that lead to brain drain and brain waste; issues of professional status and professional integration; precarious status and mental health; gender, race/ethnicity, and intersectionality; forced migration; licensure constraints; health professional migration and COVID-19; cultural, linguistic, and intercultural competence; health professions education, credentials, and mobility.

Session Organizers:

Susan BELL, Drexel University, USA, Susan.Bell@drexel.edu

Joana ALMEIDA, University of Bedfordshire, United Kingdom,
Joana.Almeida@beds.ac.uk

20. Planetary Health - Challenges to Social and Health Disparities in the Context of Global Health

RC46 Clinical Sociology (host committee)

RC15 Sociology of Health

Language: English and French

Session Type: Oral

We are living in the era of the 'Anthropocene', a time of dramatic expansion of human activity and rapid socio-economic and environmental change. Humanity is having a negative impact on the planet. Climate change has become a pressing issue in global society. In recent decades, the global burden of infectious diseases has decreased thanks to sanitation and prevention and control efforts. However, new types of infections, such as COVID19 pandemic, show how they remain a major threat to global health. The climate crisis in particular continues to have a myriad of impacts on the spread of disease and our response to it. Global health directly and indirectly affects people's health and is strongly mediated by environmental and social determinants of health. In the short to medium term, the health impacts of climate change will be determined primarily by population vulnerability, resilience to current climate change rates and the extent and pace of adaptation. In the longer term, the impacts will depend on the extent to which transformative action is taken now. For us sociological researchers, thinking about the environment and people's health on this global scale is an urgent issue. It is hoped that much discussion will take place.

Session Organizers:

Surichai WUNGAEO, Chulalongkorn University, Thailand,
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Maria Aurora T.W. TABADA, Visayas State University, Philippines,
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21. Qualitative Methodologies in Health Sociology: Exploring Health through Sociological Lenses

RC15 Sociology of Health (host committee)

Language: English and Spanish

Session Type: Oral

This regular session will have maximum five 20-minutes presentation. The session would include more presentations and reduce the time of presentations for each one in case that more than five participants wanted to participate at this session. The session aims to provide a comprehensive examination of the qualitative methods conducted in health sociology, including innovative and classic ones. By exploring the contributions of qualitative research in advancing knowledge on health sociology, this session aims to contribute to the advancement of sociological knowledge and practice, and will be useful to put in common research from different countries. This session also aims to demonstrate the power of qualitative methodologies to illuminate the complex realities of health and illness, which ultimately can be useful to

informing more effective health interventions and policies. This session will showcase the depth and breadth of qualitative research, emphasizing its critical role in understanding the importance of health within societal contexts. The session will highlight how qualitative methods can uncover the experiences of individuals and communities, providing a richer understanding of the social dynamics that influence health outcomes. Each presentation will be followed by a moderated discussion, allowing for an interactive exchange of ideas and experiences between participants and the audience. Presentations in this session will include strong methods section, results section with either verbatims, photos or other data allowing the audience to engage in the discussion and contributions to either improve public policies or create new ones.

Session Organizers:

Ignacio de Loyola GONZALEZ-SALGADO, *Universidad Pablo de Olavide, Spain, ilgonsal@upo.es*

Jesus RIVERA-NAVARRO, *Salamanca University, Spain, jrivera@usal.es*

22. Rethinking Public Health Governance for a Pandemic Age

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

According to many public health experts, we are now living in an age of recurrent pandemics. This session will consider the adequacy of current public health planning and preparedness for future pandemics—ones of equal or greater magnitude to the COVID-19 pandemic. The latest pandemic highlighted many failures of pandemic governance, including risk management and the generation of global inequalities; for example, in access to vaccines and other resources needed to manage infections and prevent disease and death. The session will draw lessons from COVID-19 and other pandemics and epidemics for public health in the future, including the adequacy of international bodies such as the WHO and the UN whose failures were all too evident in the three years of COVID-19.

Session Organizer:

Alan PETERSEN, *School of Social Sciences, Monash University, Australia, Alan.petersen@monash.edu*

23. Science, Health, and Religion: Intersections in the Field of Assisted Reproductive Technologies (ART)

RC22 Sociology of Religion (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

In recent decades, significant global transformations in reproductive health have emerged due to scientific developments, expanding reproductive possibilities. These changes vary across local settings. Users' experiences offer perspectives on sexuality, reproduction, and parental projects within different sociocultural contexts. Transformations in kinship relationships and the construction of parental projects challenge views on parenthood, gestation, identity, and the relationship with biology and genetics. This session examines the historical, cultural, ethical, religious, and policy implications of assisted reproductive technologies (ART) and emphasizes the role of religious beliefs in shaping ART users' perceptions and experiences, providing a comparative analysis of diverse ART practices among different settings. It aims to analyze global discourse on ART, exploring how gender, religion, and national policies intersect to shape reproductive experiences and ethical repertoires. The session also delves into the sociocultural history of the human embryo and examines beliefs and attitudes toward embryos produced via ART, highlighting the negotiation between science and religion in different contexts.

We welcome theoretical and empirical approaches on the following areas:

Public policies and regulations in reproductive health.

Relationships between science, technology, and reproduction.

Kinship relationships and new reproductive technologies.

Religious conservatism and reproductive health.

Ethical and bioethical perspectives in reproductive health.

Perspectives of professionals, experts, or users in reproductive health.

Ontological debates on cryopreserved human gametes and embryos

Session Organizers:

Gabriela IRRAZABAL, CONICET-University of Buenos Aires, Argentina,
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Rosa MARTINEZ CUADROS, Universitat de Barcelona, Spain,
rosamartinezcuadros@uab.cat

María Cecilia JOHNSON, CONICET, National University of Córdoba, Argentina,
cecilia.johnson@unc.edu.ar

24. Social Determinants and Consequences of Early Life Health

RC28 Social Stratification (host committee)

RC15 Sociology of Health

Language: English

Session Type: Oral

Health in early life is an important underlying driving factor of the intergenerational transmission of socioeconomic status, and by extension likely plays a role in how social inequalities are reproduced or disrupted over time.

On the one hand, children's health early in life is shaped by social conditions during the prenatal period and by parents' social conditions. On the other hand, early life health is also a determinant of developmental and socioeconomic outcomes across the life course. This session seeks papers that address the role of early life health in the stratification system. Of particular interest are (1) early life health and intergenerational transmission; (2) the experience and management of early childhood health; (3) social determinants of childhood health; and (4) consequences of early health conditions over the life course.

Session Organizers:

Han LIU, University of Texas at San Antonio, USA, han.liu2@utsa.edu

Jonathan GABE, Royal Holloway, University of London, United Kingdom, j.gabe@rhul.ac.uk

25. Social Networks and Health

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

Traced back to the very beginning of sociology as a discipline, the social network perspective has empowered researchers to identify various network-based concepts and to theorize and analyze their relationships with diverse health outcomes. The purpose of this proposed session is to critically celebrate and reflect on the long research tradition on social networks and health. It will bring together innovative and cutting-edge research papers on how social networks are associated with health. It will help scholars share up-to-date knowledge, discuss the contributions and limitations of the existing literature, and identify crucial new research directions.

Session Organizer:

Lijun SONG, Vanderbilt University, USA, lijun.song@vanderbilt.edu

26. Stigma of Mental Illness

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

Dating back to Goffman's foundational work, sociologists have been interested in stigma associated with various conditions. Individuals and groups can be stigmatized due to multiple factors, including mental illnesses. Previous work has shown that stigma of mental illness is related to various factors, including type of illness, who is experiencing the illness, the attributed causes of the condition and personal experience of mental health problems. In this

section, we welcome papers that focus on explanations and experiences of stigma within and across countries. We particularly invite papers that explore intersectionalities in stigma experiences, both in terms of the identity of the person who is stigmatized as well as in whether and how certain coexisting conditions may increase stigma. We are also interested in papers with practical and policy implications, in particular papers where attention is paid to how our scientific knowledge about stigma processes may be translated into stigma reduction programs within and across societies.

Session Organizer:

Sigrun OLAFSDOTTIR sigruno@hi.is

27. Teaching Health Sociology in Southern Countries

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

Teaching health sociology in southern countries offers a unique opportunity to incorporate diverse perspectives and address global health inequalities. Existing literature highlights the importance of integrating social medicine into global health education, emphasising pedagogical innovation, cross-collaboration with practitioners from the global south, and structural humility. It is further argued that Latin American health sociology has valuable lessons to offer the wider field, particularly in understanding the impact of social inequality on health and disease processes and in addressing the epidemiological profiles of the region. Despite historical challenges related to health system structures and the power of medical schools, the interface between sociology and health has expanded, indicating a growing recognition of the importance of teaching and researching health within the social and human sciences in Southern countries. The teaching of health sociology in Southern countries differs from traditional approaches by emphasising the importance of incorporating local, national and regional perspectives. Southern theory emphasises the need to move beyond metropolitan thinking and to include marginalised voices in order to deconstruct theoretical concepts and expose power relations in their creation. This shift challenges the dominance of knowledge developed in Western Europe and North America and advocates a more inclusive approach that considers alternative cultural experiences and indigenous knowledge. The interface between sociology and health has expanded in countries such as Brazil and the United Kingdom, reflecting new forms of health-related teaching and research within the social and human sciences, despite continuing difficulties related to the structure and orientation of the health system.

Session Organizers:

Bouchta EZZIANI, *Université Sidi Mohamed Ben AbdiAllah Fes Morocco, Morocco, bouchta.ezziani@gmail.com*

Ahmed SELIM, *University of Kent, United Kingdom, Aams5@kent.ac.uk*

Ouafae ELARABI ouafaeelarabi01@gmail.com

28. The Marginality of Complementary and Alternative Medicine and the Prospects of Integrated Healthcare: The Influence of Knowledge, Power and Interests

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

What is typically referred to as 'complementary and alternative medicine' (CAM) is becoming increasingly popular across the globe, including in the form of traditional indigenous medicine as supported by the World Health Organization. However, although there are some notable exceptions, its exponents are often marginalised by the state through punitive exclusionary measures compared to biomedical practices. As such, CAM is frequently subject to anything from voluntary rather than statutory regulation to more oppressive systems of heretical control – with all the consequences for the standing of its practitioners and access by clients. This regular session asks whether this is because of its arguably weaker, less scientific and often incommensurable knowledge base compared to that of orthodox biomedicine or more invidious factors such as the exercise of medical power and interests. This raises the question as to whether integrated healthcare will ever be truly possible in terms of the interplay of practitioners and their organisations on both the unorthodox and orthodox sides of the divide. Papers in this session are welcome addressing these issues from a historical and/or contemporary perspective – as well as examining how far the integration of such therapies may be facilitated to public benefit in future by policy change, further research and greater rapprochement between the parties concerned. Papers should be centred on a single society or clusters of societies and focused specifically or generically in terms of the therapeutic approaches considered.

Session Organizers:

Michael SAKS, *University of Suffolk, United Kingdom, m.saks@uos.ac.uk*

Joana ALMEIDA, *University of Bedfordshire, United Kingdom, Joana.Almeida@beds.ac.uk*

Nelson FILICE BARROS, *University of Campinas, Brazil, filice@unicamp.br*

29. The Regulation of Health Practitioners: Diversity and Impact

RC15 Sociology of Health (host committee)

Language: English

Session Type: Oral

Currently the World Health Organization is establishing guidance for regulating health practitioners in the Global North as well as the Global South. It is therefore opportune for this regular session to consider the diversity of regulatory systems for health practitioners comparatively and in particular societies. The focus is on doctors, nurses and other health professionals, but also includes health support workers who form the largest and most invisible part of the healthcare workforce. The main aim of the session is to understand different regulatory regimes for the broad range of health practitioners, how they have developed and their impact on ensuring the quality of the workforce, the protection of patients and enhancement of the wider society. From a neo-Weberian perspective health professions can be seen to have effected exclusionary social closure in the market based on registers centred on minimum educational credentials and competence levels, underpinned by legal statute. However, even here there is much variation including the specific definitions of insiders and outsiders and whether they are linked to federal or state/provincial boundaries. The position of health support workers meanwhile ranges from voluntary regulation and oversight by fully-fledged health professions to no direct regulation at all other than through general legislation. There are also questions over how far any regulatory provision is implemented on the ground for both health professions and support workers. Papers are invited that explore the regulatory health practitioner landscape, including the implications for users, public safety and the broader health system.

Session Organizer:

Michael SAKS, *University of Suffolk, United Kingdom, m.saks@uos.ac.uk*

30. Ways of Vaccination: Production, Allocation, Utilization, and Atonement for Side-Effects

RC15 Sociology of Health (host committee)

RC23 Sociology of Science and Technology

Language: English

Session Type: Oral

Covid-19 has renewed sociological interest in vaccines and vaccination, overseeing a number of studies so far largely focused on the utilization side (e.g., vaccine hesitancy). This session hopes to expand this interest by identifying the remaining, unanswered key questions requiring further exploration in the sociology of vaccines, not only recounting the recent

experiences of Covid-19 vaccination where global urgency heightened the sociological concerns unprecedentedly but also revisiting experiences in the past. We invite studies on vaccines not only against the risk of viruses but vaccines themselves as risk and uncertainty that need to be lived out. Studies may adopt the theoretical perspectives of risk/uncertainties, conflicts of interest, power, and inequality in vaccine production, allocation/utilization, and post-vaccination responses (e.g., reparation for the controversial side-effects among vaccine-takers). Who is paying for the costs at these varying stages? What are the (il)legitimate ways to do so? These are only a few questions that the due sociology of vaccines needs to address.

Session Organizers:

Jae-Mahn SHIM, Korea University, South Korea, jaemahn.shim@gmail.com

Michael CALNAN, University of Kent, United Kingdom, m.w.calnan@kent.ac.uk

For further information about the Forum take a look at

<https://www.isa-sociology.org/en/conferences/forum/rabat-2025/5th-isa-forum-call-for-abstracts>

Some potential attendees have expressed concerns regarding the selection of Morocco for the location of our 2025 ISA Forum, based on the country's historical record of policies concerning LGBTQIA+ groups. Here is a link to the ISA statement in response:

<https://www.isa-sociology.org/en/conferences/forum/rabat-2025/5th-isa-forum-venue/statement-lgbtqia-attendees-concerns>

Conferences and Workshops

Yale University

“Revisiting Biomedicalization: Toward a Technology-Focused Approach”

New Haven, CT USA: 28 February 28 - 1 March 2025

Deadline for extended abstracts: 31 October 2024

Conveners:

Alka Menon, Department of Sociology, Yale University

Melanie Jeske, Center for Medical Ethics and Health Policy, Baylor College of Medicine

Questions can be directed to both melanie.jeske@bcm.edu and alka.menon@yale.edu

We invite submissions that offer empirical investigations of contemporary biomedical and health technologies. We especially encourage submissions that focus on issues of power and inequality in the design and/or implementation of technologies. Extended abstracts (2-3 pages) should be submitted by 31 October 2024 to this form (requires Google sign-in). Abstracts should include a clear description of data/sources and methods. Submitting authors will be notified of acceptance by December 1, 2024. Partial funding will be available to defray travel costs and accommodation. Full working papers are expected to be circulated to attendees by February 15.

The London Centre for Interdisciplinary Research

<https://www.lcir.co.uk/> has posted calls for participation in five hybrid conferences:

International Conference on Medical Humanities

London/Online: 8-9 March 2025

Deadline for proposals: 31 October 2024

Conference website: <http://medhumconf.lcir.co.uk>

International Conference on Gender Studies "Gender and Power"

London/Online: 1-2 March 2025

Deadline for proposals: 10 December 2024

Conference website: <https://genderstudies.lcir.co.uk>

"Somewhere in Between: Borders and Borderlands" International Conference

London/Online: 5-6 April 2025

Deadline for proposals: 10 October 2024

Conference website: <https://borders.lcir.co.uk>

"Violence and Society" International Conference

London/Online: 17-18 May 2025

Deadline for proposals: 20 January 2025

Conference website: <http://violence.society.lcir.co.uk>

"Discourses on Motherhood" International Conference

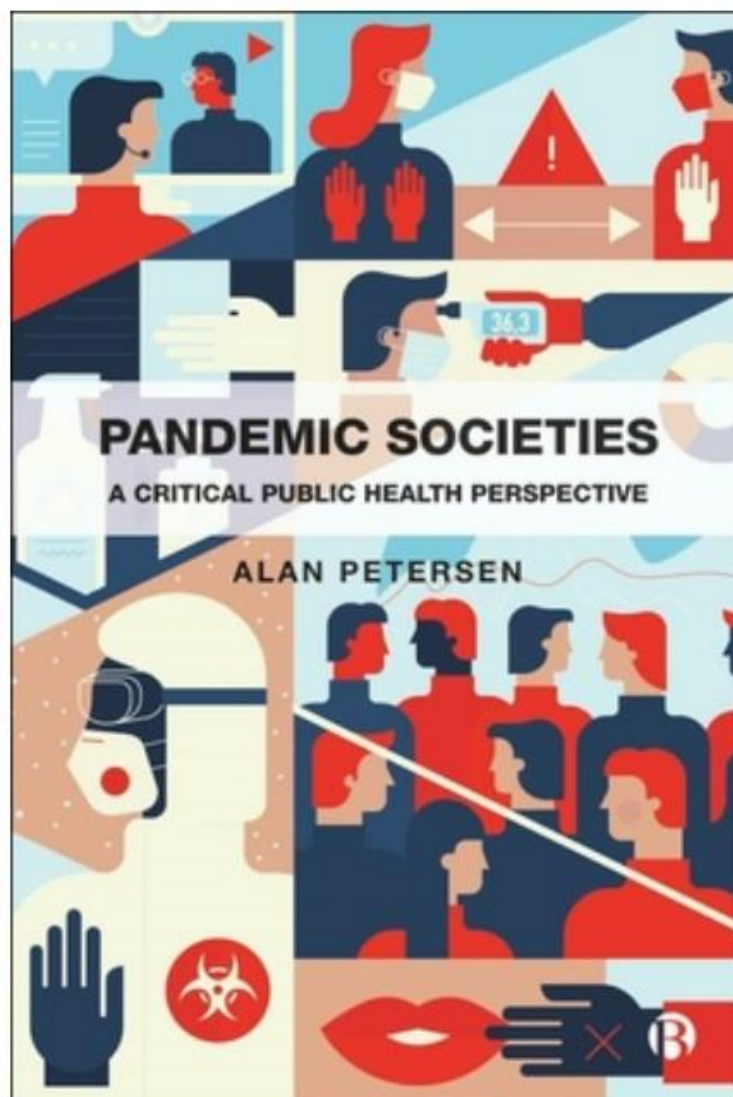
London/Online: 28-29 June 2025

Deadline for proposals: 20 January 2025

Conference website: <https://genderstudies.lcir.co.uk>

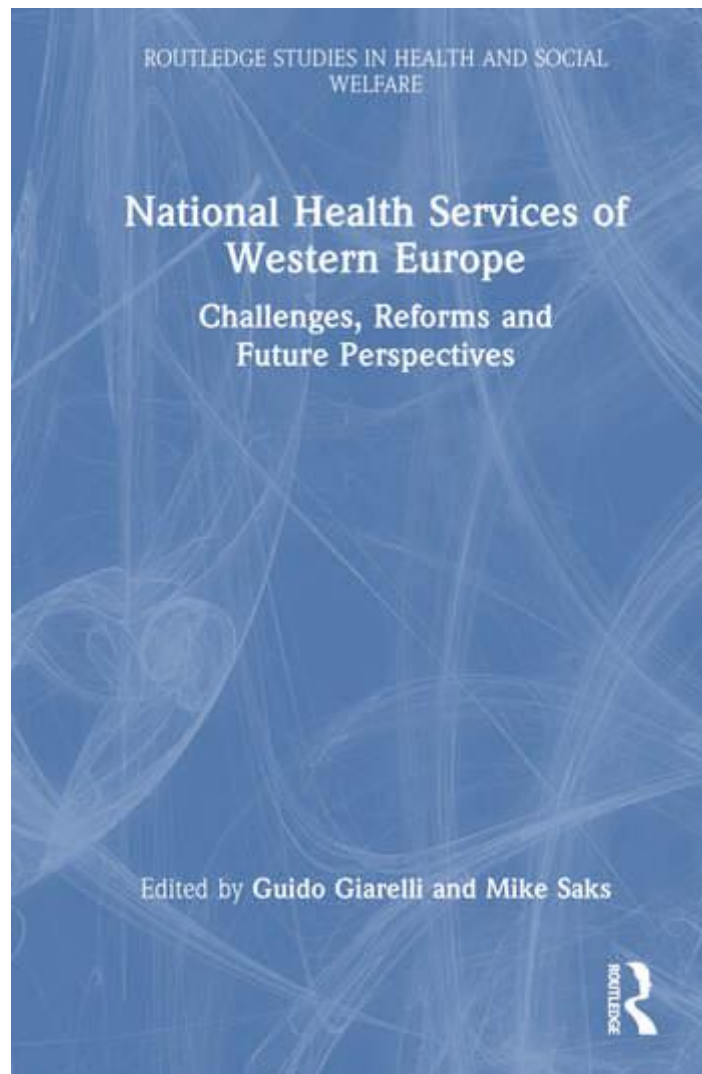
New Publications by RC15 Members

We are happy to announce **Alan Petersen's *Pandemic Societies: A Critical Public Health Perspective***, published by Bristol University Press, October 2024 (Paperback, EPUB, Kindle, Hardback), 208 pages. <https://bristoluniversitypress.co.uk/pandemic-societies>



RC15 congratulates **G. Giarelli and M. Saks**, who edited ***National Health Services of Western Europe: Challenges, Reforms and Future Perspectives***, published by Routledge, 2024.

<https://www.routledge.com/National-Health-Services-of-Western-Europe-Challenges-Reforms-and-Future-Perspectives/Giarelli-Saks/p/book/9780367689599>



Call for Submissions

[Journal of Critical Public Health](#) is seeking submissions. The journal, previously titled Critical Public Health, has undergone a revamp following the [resignation of its editorial board](#) from the Taylor and Francis publication.

JCPH is a fully peer-reviewed scholarly journal that publishes empirical research and debate that consider submissions from any discipline or perspective, so long as authors *engage critically* with the theory, practice or implications of public health. It recognises that both 'public health' and 'critical scholarship' are contested concepts and is particularly interested in submissions which: take power seriously; provide innovative perspectives; have implications for policy and practice; and/or question taken-for-granted concepts.

Graduate Programs

The University of Alabama at Birmingham (USA) PhD in Medical Sociology Program is recruiting its next cohort for Fall 2025. Priority deadline for funding consideration and for international students is January 15, 2025. Learn more about the program here:

<https://www.uab.edu/cas/sociology/phd>



The University of California San Diego (USA) MA in Global Health (MAGH) degree will soon be accepting applicants for the 2025-26 academic year. UC San Diego's Master of Arts (MA) in Global Health is a one-year degree interdisciplinary program that provides training for students to examine, understand, and address pressing issues concerning wellbeing, illness, and healing across global contexts. The MA in Global Health focuses on social determinants of health and illness, health equity, global health policy, social epidemiology, global health research methods, and medical anthropology. This program prepares students for careers in the field of global health working for NGO or governmental agencies, pursuing training in medicine (M.D.) and allied health professions, or pursuing doctoral training (Ph.D.) in academic fields that contribute to the interdisciplinary field of global health.

Application Deadline: Wednesday, February 5th, 2025. Learn more about the program here:

<https://globalhealthprogram.ucsd.edu/graduate/overview.html>

Questions? Email ma-globalhealth@ucsd.edu

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RC15 in LinkedIn

Let's stay in touch! Join the RC15 LinkedIn group. Our LinkedIn group is officially named "**Research Committee on Sociology of Health RC15, International Sociological Association.**" Post your new publications, honours, awards, conference announcements and other activities to connect us virtually and develop our RC15 community. Our link is <https://www.linkedin.com/groups/8199252/>

International peace feels like an ever more distant prospect. The ISA was founded, in part, to unite sociologists globally in promoting research that is crucial to building a peaceful world order. In this spirit, the RC15 wants to emphasize the importance of working together in the Sociology of Health.