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Centro Interdisciplinar de Ciências Sociais
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**European Sociological Association, Research Network 16 –
Sociology of Health & Medicine
Mid-Term Conference**
‘Health in the Anthropocene: Sociological Analysis, Reflections, and Implications’
CICS.NOVA.UÉvora, Universidade de Évora, Portugal
11-12 June 2025

CONFERENCE CHAIRS
Ana Patrícia Hilário, Catarina Delaunay

Several decades after the first warnings from the scientific community about the impact of climate and environmental changes on human health and well-being, the challenges posed by the Anthropocene era are evident. Crises such as climate change, biodiversity loss, and land-use changes are driving ecosystems into new and unstable configurations, with profound consequences for human health. The Covid-19 pandemic underscored the urgent need to protect public health and strengthen healthcare systems to better respond to future emergencies. Furthermore, global population growth could lead to food production and water resource management crises, ultimately impacting the health and well-being of human populations. Sociology has the potential to contribute with empirically-driven analyses of the health-environmental nexus as well as to inspire and inform policies to address health crises. The purpose of this conference is to stimulate academic discussions about the nexus of health and environment, and provoke debate about the contribution that sociology could have, as well as to share local, national, and global answers for this planetary emergency. We invite colleagues to submit their work to the sessions below.

Submission Process

Abstracts must be submitted in English and consist of:

- a) Title
- b) Keywords (maximum four)
- b) Abstract (max. 300 words)
- c) Author (s) name, affiliation, and email address
- d) Session number and name

Please note that each author can send a maximum of two abstracts (one as the first author).

The abstracts should be sent to rn16midtermconf@gmail.com and conference organizers Ana Patrícia Hilário (patriciahilario@gmail.com) and Catarina Delaunay (catarinadelaunay@fcs.unl.pt). **All abstracts should be submitted by the 30th of January.** Submitters will receive a response by the 20th of February 2025. The registration process will close at 15th of March 2025.

Fees (include registration, coffee breaks, lunch, and social dinner):

PhD Students – 149 Euros
ESA/RN16 Members – 199 Euros
CICS.NOVA Members – 199 Euros
Non-Members – 249 Euros

Keynote speakers will be announced in February 2025.



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CICS.NOVA.UÉvora

Table of Contents

Submission Process	1
Session 1: Epidemics and Pandemics in the Digital Age: ‘Contested knowledge’, Health and Vaccine Acceptance	3
Session 2: AI-driven healthcare: Exploring the sociological dimensions of lay experience .	4
Session 3: The Social Lives of Antibiotics and Beyond: Understanding Prescription Practices, Overdiagnosis, and the Dynamics of Drug Use	5
Session 4: Narratives and Emotions in a Changing World	7
Session 5: Toward an applied health sociology	8
Session 6: Healthcare systems in humanitarian and environmental challenged environments: investigations in the Global Health approach	9
Session 7: Medical expertise in the age of algorithms	10
Session 8: Sociology of Health and Illness in Portugal: themes, perspectives and approaches from an evolving field	11
Session 9: The Place of Narratives and Emotions in Sexual and Reproductive Health	12
Session 10: For a Sociology of Childbirth: Understanding the social and cultural dimensions of birth	13
Session 11: Critical grassroots perspectives and initiatives on sexual and reproductive health	14
Session 12: Coordination work and care practices in the use of telehealth in chronic care settings	15
Session 13: Children and young people in the Anthropocene Era: the role of visual, creative, and participatory methods to enhance their voice	16
Session 14: Disability and mental health during global health crises	17
Session 15: Caring experiences and supportive policies: the challenge of informal caregiving	18
Session 16: Global Challenges for Healthy Aging	19
Session 17: Resilient issues and emerging needs in palliative and end-of-life care. The perspective of health sociology	20
Session 18: Aging in Motion: Addressing Challenges and Opportunities for Migrant Older Adults	21
Session 19: Open session	22



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Session 1: Epidemics and Pandemics in the Digital Age: ‘Contested knowledge’, Health and Vaccine Acceptance

Session convener: Eve Dubé¹

¹*Laval University*

Abstract

Climate change, biodiversity loss, and ecosystem instability increase the risk of zoonotic pandemics. Currently, there is growing concern amongst public health agencies worldwide about the potential for an influenza A(H5N1) pandemic. New mRNA A(H5N1) influenza vaccines are under development, but achieving high vaccination acceptance to control outbreaks does not only rely on availability of safe and effective vaccines. Lack of vaccine acceptance is often attributed to online misinformation, but while substantial investments were made to combat online misinformation during the COVID-19 pandemic, very few strategies were shown effective and its volume continued to grow. This is in part due to limited evidence about how people obtain, assess, and use online information about vaccines and how this information influences their health decisions in real-life contexts. This session aims to explore the complex role of ‘contested knowledge’ in shaping health and vaccination decisions, in the context of (re)emerging epidemics and global pandemics. We will aim to move beyond "true/false" dichotomies to examine the complex interplay of information, trust, and agency in vaccine acceptance. We invite empirical and theoretical contributions that focus on the following themes:

- The narratives, fears, and motivations shaping individual and collective behaviors in response to vaccination campaigns during outbreaks and pandemics;
- How social media and online information are used by people to communicate, learn, and make decisions about vaccination;
- Methodological approaches to unpack online discourses (e.g., memes analysis, online ethnographies);
- The influence of mis- and disinformation on health more generally.

Keywords: vaccine hesitancy, misinformation, pandemics, online ethnographies.



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Session 2: AI-driven healthcare: Exploring the sociological dimensions of lay experience

Session convenor: Catarina Delaunay¹, Brígida Riso², Ana Patrícia Hilário³

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Abstract

The current era is marked by unprecedented environmental, social, and technological shifts, transforming how individuals engage with their health and navigate increasingly digital health systems. Among these shifts is the rapid integration of artificial intelligence (AI) and algorithmic tools in healthcare and public health management. Tools such as wearable devices, virtual health assistants, mental health chatbots, and medication management apps are transforming citizens' and patients' experiences in various ways, influencing how individuals understand, monitor, and manage their health and illness processes, while often challenging the limits between professional healthcare and personal lay responsibility. AI-driven tools may pave the way for developing new forms of agency and contribute to reducing or increasing health inequalities. These tools can also lead to the reconfiguration of healthcare practices. Sociological knowledge is therefore key for understanding the application of AI-driven tools in health settings.

This session invites sociological explorations of the societal implications of AI in healthcare from the citizen's and patient's perspective, including:

- The evolving role of AI in personal health management, shaping patients/users' decision-making, and sense of control and confidence.
- The psychological and social consequences of integrating AI tools into daily life, transforming how patients/users understand and engage with their health under continuous self-monitoring.
- How AI technologies impact patients' literacy and autonomy, enhancing or diminishing their ability to make informed choices about their health. Also, how these technologies reshape traditional patient-provider dynamics.
- Patients' responses to the strengths and limitations of AI-generated information and advice, especially the challenges of assessing the reliability and fairness of recommendations when outcomes are uncertain or contested.
- The implications of the use of black boxes in the development of algorithmic systems in healthcare in terms of public trust and perceptions of legitimacy regarding medical institutions and policies.
- How health policies integrate citizens' and patients' experience dimension regarding AI tools for health purposes.

This session invites papers adopting a critical theoretical and/or empirical approach, whether country-specific or internationally comparative, to examine the multifaceted transformative effects and societal implications of AI and robotic technologies in healthcare. Submissions should explore how AI integration reshapes patient-provider relationships, influences the emotional and psychological dimensions of care, and affects patients/users' perceptions of agency and inclusion in decision-making processes.

Keywords: patients and citizens' experience; healthcare; artificial intelligence; algorithmic tool



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Session 3: The Social Lives of Antibiotics and Beyond: Understanding Prescription Practices, Overdiagnosis, and the Dynamics of Drug Use

Session convenor: Jaroslava Hasmanova Marhankova¹, Ana Patrícia Hilário², Alice Scavarda³

¹ Charles University in Prague

² Universidade de Évora, Centro Interdisciplinar de Ciências Sociais (CICS.NOVA.UÉVORA)

³ Università di Torino

Abstract

Overprescription and overdiagnosis have emerged as significant global medical challenges, driving unnecessary healthcare interventions and contributing to long-term consequences for individuals and public health systems alike. These issues are particularly critical in the context of antibiotic resistance (AMR), where the overuse of antibiotics—often tied to inappropriate prescriptions—serves as one of the main drivers of drug-resistant pathogens. The World Health Organization has reported that bacterial AMR was directly responsible for 1.27 million deaths in 2019 and contributed to nearly 5 million deaths globally. Although AMR is a widespread phenomenon across the Globe, infection management and antibiotic decision-making are influenced by social, cultural, historical, economic, and political factors. Beyond antibiotics, patterns of overprescription reflect broader systemic and cultural issues in healthcare, including the influence of pharmaceutical marketing, patient expectations, and economic pressures on healthcare providers. Overdiagnosis, often fueled by advancements in diagnostic technologies and defensive medicine practices, compounds the problem by medicalizing normal variations in health and prompting unnecessary treatments. These dynamics not only strain healthcare resources but also amplify the misuse of medications, including antibiotics, accelerating the rise of AMR.

To address these significant issues, it is essential to explore the social meanings associated with medical drugs, as they play a crucial role in shaping prescription and consumption patterns. Antibiotics, for example, may be seen as a "quick fix" or a symbol of advanced medical care, leading to patient demands and physician acquiescence. Similarly, other medications—such as painkillers, antivirals, or supplements—carry their own unique meanings and associations, reflecting cultural beliefs about health, wellness, and treatment priorities. Understanding these meanings is crucial for uncovering the motivations behind prescribing and consumption behaviors and designing culturally and socially informed interventions.

This session, therefore, welcomes contributions that examine the social meanings attached to various medical drugs (not limited to antibiotics) in different contexts. We are particularly interested in exploring the factors influencing these interpretations and how they impact prescription and consumption patterns. By delving into the social and cultural dimensions of drug use, we aim to shed light on the underlying drivers of overprescription and contribute to more effective strategies for addressing AMR and other pressing healthcare challenges. We invite contributions, whether theoretical or empirical, that examine the following themes:

- Cultural and symbolic dimension of drug use: how medical drugs, such as antibiotics, painkillers, and supplements, acquire cultural and symbolic meanings in different societies;
- Drivers of overprescription in healthcare systems: the role of pharmaceutical marketing, patient expectations, defensive medicine, economic pressures and healthcare system inefficiencies in prescribing practices;
- The social context of prescription practices: how gender, ethnicity, age, social class, and other vulnerabilities impact medical decision-making over antibiotic (and other drug) prescription;



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- Intersections of drug use and public health challenges: how overprescription contributes to broader health challenges, such as antibiotic resistance and opioid crises;
- Comparative studies on drug use and AMR: How knowledge, consumption and prescription of antibiotics (and other drugs) is produced in different cultural contexts and professional fields;
- Ethical dimensions of overdiagnosis and AMR policy and practice – exploring justice focused approaches to ensuring equitable access to medical drugs, antibiotics and preventing AMR.

Keywords: antibiotics, antibiotic resistance, drug use, overprescription



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Session 4: Narratives and Emotions in a Changing World

Session convenor: *Francesca Greco*¹

¹ *University of Udine, Italy*

Abstract

Decades after scientists first raised alarms about the environmental impacts on health and well-being, the challenges of the Anthropocene era are now undeniable. The environments we inhabit and the societies we build can either support or undermine health and well-being. Today's global crises — including population growth, pandemics, armed conflicts, forced migration, and climate change — create increasingly complex challenges for healthy living, profoundly affecting public health. Environmental factors and social inequalities form a powerful feedback loop, shaping behaviors, health risk exposures, lifestyles, and how individuals make sense of their experiences. Narratives have long been employed in the social sciences to understand the perspectives of social actors: the meanings they assign to their actions, their everyday lives, and their emotions. A wide range of qualitative and quantitative methods has been developed to analyze narratives and communication more broadly. In health contexts, these methods are gaining traction and have led to significant advancements. For instance, online communication has been effectively used to capture diverse trends related to health and disease, such as narratives about COVID-19 and sentiments toward vaccination. These studies illuminate the intricate relationships between socio-cultural systems and the environment in various contexts.

Understanding and addressing health narratives and global environmental and social challenges storytelling is vital to uncovering the social, structural, cultural, historical, and political factors that promote or hinder health and well-being. We invite contributions that explore these intersections, offering theoretical insights, innovative methodologies, or empirical research and case studies. Submissions that address how individuals and communities respond to global environmental and social challenges are particularly welcome.

Keywords: narrative, emotion, storytelling, global environmental and social challenges.



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Session 5: Toward an applied health sociology

Session Convenor: Mario Cardano¹ & Luigi Gariglio¹

¹ Università di Torino, Italy

Abstract

The aim of this session is to promote a critical discussion on the possibilities and limits of the applied versions of the sociology of health. The notion of applied underpinning the session's proposal is deliberately open, moving from the established idea of *contributing* to the design of health *organisations* and *institutions* to advocacy-oriented approaches. Participants are encouraged to explore case studies and empirical evidence that illustrate these applications in real-world settings.

Session's contributors are invited to reflect either on the theoretical and methodological implications of applied health sociology. This reflection could include examining new interdisciplinary approaches, and addressing the ethical considerations of applied research. Furthermore, the session will delve into how applied health sociology can bridge gaps between academia and healthcare practice, fostering collaboration across various stakeholders to build more equitable healthcare systems.

Keywords: applied health sociology, applied ethnography, public sociology.



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Session 6: Healthcare systems in humanitarian and environmental challenged environments: investigations in the Global Health approach

Session Convenor: Clelia D'Apice¹ & Simone Baglioni²

¹ *Center for Cooperation, University of Parma*

² *Department of Economics and Management, University of Parma*

Abstract

The Anthropocene era, defined by environmental crises, sociopolitical instability, and escalating global challenges, presents unprecedented threats to healthcare systems worldwide. In this session, we explore healthcare systems from a sociological perspective, focusing on how these systems adapt to and respond within conflict-affected and environmental challenged settings. This session aims to investigate:

- The dynamics of global health partnerships in addressing the dual crises of environmental and health emergencies;
- The adaptation and innovation capacity of healthcare workers as a sociological lens for understanding system sustainability in times of crisis;
- The integration of the "One Health" and "Planetary Health" frameworks within conflict and post-conflict environments;
- The role of social narratives and systemic inequalities in shaping health governance and recovery in fragile contexts.

Grounded in empirical research, this session invites contributions that examine the sociological dimensions of global health in the Anthropocene. Special focus will be placed on the intersection of health narratives, migration, and social inequalities within unstable settings.

By fostering interdisciplinary dialogue, this session aims to deepen sociological understandings of healthcare resilience and inspire innovative approaches to addressing the interconnected crises of health, environment, and conflict.

Keywords: healthcare systems; global health; environmental challenges; conflict settings.



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Session 7: Medical expertise in the age of algorithms

Session convenor: Anastasia Novkuns kaya¹ & Daria Nikitina¹

¹European University at St. Petersburg

Abstract

New technologies are fundamentally changing the operations of healthcare organizations and the way individuals interact with their own health. Among medical professionals, the introduction of cloud computing, machine learning, and AI tools may raise concerns about potential job losses, lack of human control, and emerging ethical dilemmas. On the other hand, many see algorithmic technologies as new opportunities. Professionals view them as impartial assistants in their work and may use algorithmic platforms to deliver services. Policymakers see them as innovative tools capable of improving healthcare systems, and ordinary people may regard them as advisors on health matters and tools for continuous monitoring of their well-being.

In a context where clinical experience and the ability to make professional decisions are no longer seen as qualities exclusive to humans, the question of who makes expert medical decisions and how they are made is becoming increasingly important. This section aims to explore, from a sociological perspective, the following issues:

- What role do algorithmic technologies play in expert medical decision-making, and how do doctors, medical staff, patients, policymakers, and other actors interact with them at various stages of healthcare delivery?
- How do medical professionals perceive the development of new technologies: as an obstacle or a facilitator for their expertise? Do algorithms foster resistance or cooperation?
- Does the development of new technologies and algorithms make medical expertise more inclusive, in terms of participants whose voices can be heard and issues that were previously silenced?

In this section, we encourage participants to discuss not only issues of individual physical health but also mental well-being and collective health at the state level. We endorse both theoretical works that conceptualize the interaction of human and technological expertise, and empirical studies that illustrate how this interaction occurs in practice.

Keywords: healthcare, expertise, algorithms, technologies



Session 8: Sociology of Health and Illness in Portugal: themes, perspectives and approaches from an evolving field

Session convenor: Brigida Riso¹, Catarina Delaunay², Joana Zózimo³

¹ Instituto de Saúde Ambiental (ISAMB), Faculdade de Medicina da Universidade de Lisboa

² Centro Interdisciplinar de Ciências Sociais (CICS.NOVA), Faculdade de Ciências Sociais e Humanas (NOVA FCSH)

³ Pordata and SOCIUS/CSG-ISEG, Universidade de Lisboa

Abstract

In Portugal, the field of sociology of health and illness was inaugurated with a first piece of research, a hospital ethnography on medical power, more than 30 years ago. This work was a fundamental milestone, paving the way for a field that had been little explored. Today, the sociology of health is a well-established field of sociology in Portugal, tackling a multiplicity of themes, using multiple methodological approaches and travelling through different theoretical and epistemological proposals. Drawing on this evolving environment, this session will examine the current intersection of health, environment, and society within the Portuguese context and beyond. Our aim is to explore the contributions of Portuguese sociologists in understanding and addressing health challenges in contemporary society. In this session we invite scholars and professionals working outside of the academia to present:

- Original research work developed in Portugal
- Critical analysis of the trends and approaches of health sociology in Portugal
- Professional experiences in the field of health sociology outside of academia
- Particular contributions of health sociology for public policies

By showcasing empirical studies and theoretical advancements from Portugal, this session aims to highlight the global relevance of these contributions, fostering dialogue and collaboration between scholars and researchers from a non-academic background. Moreover, it will reflect on how Portuguese sociological perspectives, often informed by the country's unique history and social fabric, can enrich broader discussions on health that goes beyond addressing particular issues.

The session invites scholars and non-scholars working on the field of health to consider how interdisciplinary sociological approaches can address critical health issues in an era of profound environmental and social transformations. It seeks to inspire new pathways for research and action, demonstrating the essential role of sociology in building equitable and resilient health systems for the future.

Keywords: sociology of health and illness; medical sociology; Portugal



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Session 9: The Place of Narratives and Emotions in Sexual and Reproductive Health

Session convenor: Violeta Alarcão¹, Maria Madalena d’Avelar¹, Mariana Anginho Évora¹, Sónia Pintassilgo¹

¹*Centro de Investigação e Estudos de Sociologia (CIES-Iscte), Iscte-Instituto Universitário de Lisboa*

Abstract

The sociological analysis of narratives and emotions can be considered a critical science approach to sexual and reproductive health (SRH) as it examines how people experience, shape, and narrate events that are not solely biographical but embedded in socio-cultural structures. Narratives and emotions about issues such as access to maternity care, abortion services, and sexual pleasure can offer a window into diverse experiences, reveal structural inequities, and illustrate the intersectionality of factors that shape sexual and reproductive agency.

This emphasis on narratives and emotions can also help to disrupt power relations and ultimately inform policy and practice by highlighting the complexities of individual narratives within broader social contexts, and together promote sexual and reproductive justice.

Topics of Interest:

- Narratives and Identities: How do personal stories around sexual and reproductive desires, identities and behaviors reflect and influence broader cultural and social contexts?
- Emotions and Experiences: What role do emotions play in shaping SRH experiences, and how do these emotional narratives, including feelings of empowerment, shame, joy, regret, or fear, impact mental health and well-being?
- Social and Structural Influences: How do power dynamics, issues of consent, and access to resources manifest in personal SRH narratives and emotions? How do gender dynamics affect these emotions and experiences?
- Intersectionality: How can an intersectional approach help understand the effects of multiple identities such as gender, class, and race/ethnicity in emotions related to SRH narratives?
- Cultural Context: How do cultural narratives and taboos influence individual experiences and societal attitudes toward SRH?
- Policy and Practice: How can understanding SRH narratives and emotions inform more effective and equitable policies and clinical practices?

This session invites contributions from sociology, psychology, anthropology, public health, and gender studies. We particularly welcome presentations exploring ethical and methodological issues related to confidentiality, consent, and emotional well-being, as well as methodological rigor and reflexivity.

Keywords: narratives; emotions; lived experience; sexual and reproductive justice



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Session 10: For a Sociology of Childbirth: Understanding the social and cultural dimensions of birth

Session convenor: Mariana Anginho Évora¹, Dulce Morgado Neves¹, Sónia Pintassilgo¹, Mário JDS Santos¹

¹ Centre for Research and Studies in Sociology (CIES-Iscte)

Abstract

In contemporary European societies, where the medicalisation and institutionalisation of childbirth is predominant, new practices, perspectives, and paradigms are gaining relevance, calling for classical and innovative contributes from the Sociology of Childbirth, in articulation with those from the Sociology of Health and Illness. In this context, childbirth is more than the moment of delivery. It stands as a complex process, with several layers, produced and reproduced long before the moment of birth itself, allowing for an analysis of a set of devices, norms, and social practices that mark and regulate reproduction, the body, and the female body, in particular (Oakley, 2016). It is essential to address this topic within the wider concept of modernity, individualization, of changing fertility patterns, and the broader medicalisation of societies. Such approach allows us to understand how the social organization of the childbirth process has evolved, its defining characteristics, its outcomes at various levels, the institutions and agents involved, and its process of social legitimation (Neves et al., 2022). This panel, proposed by the permanent team of the Laboratory of Social Studies on Childbirth - *nascer.pt* (CIES-Iscte, Portugal), invites for a theoretical and empirical discussion on human reproduction, pregnancy, childbirth, and the transition to parenthood as social processes. We particularly welcome research in the following topics:

- The social space of birth, including its agents, processes, and rituals
- The cultural dimensions of birth
- The social conditions and the demographic characteristics of childbirth
- Medicalisation and institutionalization of birth
- Non-normative reproductive trajectories, such as homebirth
- Assisted Reproductive Technologies (ART), or queer pregnancy and childbirth
- Obstetric and gynaecological violence
- Family planning, contraception, and abortion
- Fecundity and fertility dynamics
- Reproductive rights and justice

We encourage submissions from diverse research approaches, whether qualitative or quantitative, and at in any stage of development.

Keywords: sociology of childbirth, reproductive health, medicalization of birth

References:

- Oakley A. (2016). The sociology of childbirth: an autobiographical journey through four decades of research. *Sociology of Health and Illness*, 38(5):689-705. <https://doi.org/10.1111/1467-9566.12400>
- Neves, D. M., Pintassilgo, S., Santos, M. (2022). Parto y maternidad desde una perspectiva transdisciplinar: nascer.pt - Laboratorio de Estudios Sociales sobre el Nacimiento. *Revista [Con]Textos – revista d'antropologia i investigació social*, 10: 101-108. <https://revistes.ub.edu/index.php/contextos/article/view/38388>



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Session 11: Critical grassroots perspectives and initiatives on sexual and reproductive health

Session convenors: Braida Nicole¹, Elisa Muntoni², Chiara Paglialonga³

¹ *University of Turin*

² *University of Turin/ University of Florence*

³ *University of Milano-Bicocca*

Abstract

While the world grapples with concerns about overpopulation, Europe is witnessing a paradoxical resurgence of pronatalist policies, often with strong nationalist undertones. The progressive dismantling of public healthcare systems, accelerated by neoliberalism, is coupled with an increasingly reactionary political climate that seeks to restrict the rights of women, LGBTQI+ individuals, migrants, and people with disabilities in the name of defending “traditional values”. The COVID-19 pandemic exposed the structural weaknesses of healthcare systems worldwide, exacerbating inequalities in access to health services. At the same time, it sparked the emergence of new grassroots initiatives and self-organized efforts to address these challenges. In a context marked by climate, health, and social crises, there is an urgent need to radically rethink the neoliberal approach in the management of care systems and as a model of development. This call aims to gather contributions that challenge hegemonic epistemologies on sexual and reproductive health through intersectional feminist, queer, anti-ableist, and decolonial perspectives. In particular, our interest is directed both at:

- collective claims that arise from embodied experiences that propose narratives, knowledges and approaches to medical care alternative to the biomedical and neoliberal paradigm;
- grassroots experiences that provide (health)care to marginalized individuals and communities, placing bodily autonomy, self-determination and social justice at the center.

A non-exclusive list of issues we would like to welcome includes:

- HIV and other STIs prevention;
- access to abortion, self-managed abortion and reproductive justice;
- contested and invisibilized illnesses;
- menstrual justice;
- intersex rights and depathologization;
- transgender experiences and depathologisation;
- dis/abilities, neurodivergences and chronic illnesses;
- psychiatry and mental health;
- eco-feminist analysis

Keywords: sexual health, reproductive health, community-led, critical perspectives



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Session 12: Coordination work and care practices in the use of telehealth in chronic care settings

Session convenors: Barbara Sena¹, Ivan Galligani¹, Giampietro Gobo²

¹ *University of Bergamo*

² *University of Milan*

Abstract

Telehealth or telemedicine is now globally recognised as a strategic approach to support healthcare systems to deal with the challenges of an ageing population, increasing chronic diseases, relative shortage of staff and steadily rising healthcare expenditure (WHO 2010; Hashiguchi 2020). It should: facilitate access to care services, particularly in remote or rural areas, reduce care delivery costs (bringing down travel requirements), shorten waiting times and filter improper access to hospital facilities, thus qualify itself as one of the pillars for strengthening territorial care and primary care. Nevertheless, the spread of telemedicine services is still extremely fragmented, in terms of geographical areas (even within the same Country), pathologies involved, and therapeutic applications; and in most cases these services are still ‘in the process of consolidation’. To explain this situation, the literature highlights a multiplicity of barriers and hindering factors situated at various operational levels (Carrasqueiro et al. 2017; Hashiguchi 2020; Saigi-Rubiò et al. 2022). One of the principal reasons for the delay of telehealth uptake lies in the poor recognition that the adoption of a new technological service requires ‘artful integration’ (Karasti & Syrjänen 2004) by the users, with the joint and coordinated activation of institutional, medical, social, organisational, individual and family processes and practices as well.

Theoretical and empirical papers are invited to unpack telehealth processes (within the broader field of e-health), focusing on their enactment in practice, drawing on, particularly, but not exclusively, on issues such as:

- How behaviour and attitudes in medical and professional practice, patient-doctor relationships and inter-professional communication, change with the use of telemedicine, especially in primary and integrated care services.
- How policies of telemedicine have favoured or, conversely, hindered the development of bottom-up telehealth services;
- How health services change their practices and approach to care with the introduction of telemedicine services.

Keywords: telehealth, telemedicine, care practices, implementation



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Session 13: Children and young people in the Anthropocene Era: the role of visual, creative, and participatory methods to enhance their voice

Session convenors: Ana Patrícia Hilário¹, Fábio Rafael Augusto² Alexandra Batista¹,

¹ Universidade de Évora, Centro Interdisciplinar de Ciências Sociais (CICS.NOVA.UÉvora)

² Instituto de Ciências Sociais, Universidade de Lisboa

Abstract

Children are often underrepresented in the public and private discourse concerning the challenges related to the Anthropocene era. This session seeks to explore and foster reflection on research experiences—spanning theoretical, empirical, and methodological perspectives—with children and young people, emphasizing approaches that actively engage them as central participants in the production of knowledge. Building on the assumption that children and young people provide unique insights, it is essential to listen to their voices and ensure their perspectives are integrated into social research, particularly when exploring their experiences of health and illness in the context of the Anthropocene—a period marked by profound environmental, social, and health challenges shaped by human activity. We take as a point of departure that the use of visual, creative, and participatory methods will be key for enhancing children's and young people's experiences. These methods offer the possibility for children and young people to be recognized as experts, allowing them a space to freely express their experiences. We invite contributors to discuss the use of innovative and collaborative approaches with children and young to gain knowledge on their experiences in the Anthropocene Era. We are also interested in papers that discuss the ethical and methodological aspect, as well as challenges of using these approaches in research conducted with children and young people. We invite contributions that focus (but not limited to) on the following topics:

- Collaborative research with children and young people.
- Designing innovative and creative research methodologies for engaging children and young people.
- Navigating the complex dynamics of engagement with children and young people.
- Advocating for ethical symmetry between researchers and participants.
- Addressing ethical challenges in research involving children and young people.

Keywords: children, young people, visual, creative, and participatory methods



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Session 14: Disability and mental health during global health crises

Session convenor: Angela Genova¹, Alice Scavarda²

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Abstract

The session aims to discuss the transformations that the health and economic crisis resulting from the Covid-19 pandemic has brought to the disability and mental health sectors, both in terms of opportunities for inclusion and in terms of the extension of old inequalities and the production of new ones. We will provide a space to critically discuss the impact of this recent global health and economic crisis on international and national policy frameworks; on regional or local policies, services or practices; on families, people with disabilities and disability professionals. International, national and local studies of tensions, barriers, boundaries, spaces and practices of care for and by people with disabilities and mental health problems are welcome. The Covid-19 pandemic highlighted the health-environment nexus and the impact of climate change on public health issues by raising awareness of the importance of sustainable health policies and practices to prevent future crises. People with disabilities and mental health problems were disproportionately affected by this global health emergency, both in terms of health risks, social isolation and economic inequalities. However, they also experienced new forms of support and benefited from the collective discussion on the need to strengthen health systems and protect ecosystems in line with the One Health approach. The pandemic provides a fruitful opportunity to reflect collectively on social vulnerability to health crises and climate change, and to inform policy responses to these challenges.

In order to address the multifaceted empirical dimensions of the topic, this call for papers is intended to solicit both theoretical and empirical contributions. We welcome papers from all theoretical and methodological perspectives. Quantitative, qualitative, creative and artistic methods are welcome.

We invite papers that address the following and other related issues

- The possible transformations of the Covid-19 pandemic on the everyday lives and social opportunities of people with disabilities and mental health problems;
- How national and local disability and mental health policies interpret preparedness for future crises;
- How national and local disability and mental health services and professionals define and implement sustainable health practices;
- How national and local disability and mental health policies and services interpret and address social vulnerability to health emergencies;
- The ways in which people with disabilities and mental health problems express their voices and demands;
- The social practices and technological solutions introduced in the aftermath of the pandemic to support people with disabilities and address their potential social vulnerability to health and economic crises;
- Other relevant issues will also be considered.

Keywords: disability, mental health



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Session 15: Caring experiences and supportive policies: the challenge of informal caregiving

Session convenor: Cristina Calvi¹, Stefania Fucci²

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Abstract

Informal, non-professional care, often provided free of charge by family members or persons caring for an ill or dependent loved one on a voluntary basis, is crucial for the management of chronically ill persons and the backbone of the Long-Term Care systems in many European countries. The caring tasks taken on by family members, despite the structural changes affecting families, can be interpreted as an effect of the neo-liberal drive both to reduce public spending and to shift care responsibilities “from the state to the market and from the collective to the individual” (Peterie & Broom 2024). The growing attention of policy makers towards this phenomenon stems from the fact that informal caregiver can be considered as a structural response to the lack of availability of formal care services, as is the case in many European countries, albeit with specificities related to different welfare systems (Recard & Llana-Nozal 2022). At the same time, the economic, social, and health consequences of the caregiver’s assumption of care tasks are becoming increasingly evident (Bauer & Sousa-Poza 2015, Keating & Eales 2017). Indeed, caring has an impact on the present biography of the carer (e.g. through loss of work or time taken away from relationships or studies in the case of young carers), but it also has an impact on the future biography of the caregiver (in terms of economic problems, health, weakening of social networks, etc.). This session is interested in gathering contributions that address informal care both from a macro perspective, i.e. policies to support informal carers, and from a micro perspective, addressing the impact of care on informal caregivers’ biographies. Both theoretical and empirical papers contributing to the debate on these issues are welcome.

Keywords: informal care, supportive policies, biographies

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Session 16: Global Challenges for Healthy Aging

Session convenors: Guido Giarelli¹, Francesca Greco²

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Abstract

The WHO envisions that every person, in every country, should have the opportunity to live a long, healthy life. However, the environments and the society in which we live can either promote or undermine health. Current global crises — such as pandemics, war, forced movements of refugees, and climate change — are contributing to a world that presents growing challenges for healthy aging, with profound impacts on public health. Decades after scientists first sounded alarms about environmental effects on health and well-being, the challenges of the Anthropocene era are now undeniable. Environments on one side and social inequalities on the other constitute a powerful causal circle which strongly influences our behaviors, our exposure to health risks (e.g., air pollution or violence), our access to services (e.g., health and social care), and the quality of opportunities available as we age. The global population of individuals aged 60 and older is growing rapidly, from 1 billion in 2019 to an estimated 2.1 billion by 2050. This demographic shift is occurring at an unprecedented rate and will continue to accelerate in the coming decades. It demands broad-based societal adaptations, from health to social care, from lifelong learning to working retirement, and beyond. Making the world more age-friendly is essential and urgent given the environmental and social challenges the evolving demographics faces. Identifying and addressing social, structural, cultural, historical, and political factors that support or hinder healthy aging is key to enhancing the well-being of older adults. We invite contributions that delve into these factors by advancing theoretical insights, proposing innovative methods, or presenting empirical research and case studies. Submissions that address social challenges or suggest strategies for creating age-friendly environments are especially welcome, as we work together to build a more supportive world for all stages of life.

Keywords: healthy aging, global social and environmental challenges, health, promotion



Session 17: Resilient issues and emerging needs in palliative and end-of-life care. The perspective of health sociology

Session convenors: Barbara Sena¹, Enrico De Luca², Sandra Rossi¹

¹ University of Bergamo

² University of Birmingham

Abstract

Although there have been significant contributions to sociological analysis regarding the management of dying patients and the concept of a 'good death' (e.g., Glaser and Strauss, 1965; Sudnow, 1967; Kaufman, 2005; Broom, 2015), these topics continue to be critical clinical, ethical, and sociological issues. Recent interest in palliative care emphasizes a person-centred and holistic approach to pain management and end-of-life care. The World Health Organization (2018) stressed the importance of integrating palliative care in situations where humanization of patient care and treatment often falls short due to limited resources, high mortality rates, and health facilities' and professionals' inability to provide adequate end-of-life care (Sena & De Luca, 2022). Furthermore, healthcare policies and ethical guidelines worldwide have a very low number of models that support spiritual care and incorporate pro-spiritual environments to increase teamwork and patient safety (Doram, 2017). The implementation of spirituality in biomedical settings still needs improvement, even though it is recognized as an essential element in palliative and end-of-life care approaches (Puchalski et al. 2016).

This session invites theoretical, empirical (quantitative, qualitative, or mixed methods), and innovative end-of-life and palliative care research approaches. All types of papers are welcome, particularly (but not exclusively) sociological works on the following themes:

- health professionals' perception of palliative and end-of-life care management;
- palliative care models and health policies in different health systems and their effectiveness (or ineffectiveness) in promoting and disseminating holistic and interdisciplinary approaches;
- Integration of spirituality in end-of-life management and its impact on medical, professional or dying patient practice;
- choices, needs and behaviour of patients and caregivers in end-of-life management.

Keywords: end-of-life care, palliative care, holistic approach, spirituality.

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Session 18: Aging in Motion: Addressing Challenges and Opportunities for Migrant Older Adults

Session convenors: Ana Carolina Santos¹, Adrian Stanciu¹

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Abstract

The intersection of aging and migration presents unique challenges and opportunities for promoting the health and well-being of older migrants. This session will explore the experiences and needs of this demographic, highlighting barriers such as limited healthcare access, language and cultural differences, as well as insufficient social support. The session will provide insights into how aging and migration processes intersect, shaping the well-being of migrant seniors from diverse socioeconomic and cultural backgrounds.

A key issue is the lack of comprehensive, systematic data and theoretical frameworks on the health and social outcomes of older migrants. Despite the growing number of migrant seniors, existing evidence remains fragmented, needing more robust theoretical frameworks. This session will help fill this gap by discussing how they can be integrated to form a clearer picture of older migrants' experience.

We invite contributions using both qualitative and quantitative approaches to understand the health disparities and social exclusion that affect migrants aged 55 and older. A discussion on the differences between younger-old and older-old immigrants, highlighting the distinct challenges and needs faced by each group, is also relevant.

Presentations may tackle issues such as healthcare inequalities, community engagement in social inclusion, and navigating health systems. We encourage research on the impact of social policies and cultural integration in improving health outcomes. In addition, contributions exploring various health interventions, such as community-based programs, healthcare access strategies, and digital health tools will be essential to this session. We encourage studies that examine how these interventions are tailored to meet the specific needs of older migrants, as well as their effectiveness in enhancing well-being and promoting inclusion.

Ultimately, this session aims to discuss how panel studies, healthcare systems, social policies, and community-driven interventions can support older migrants, generating actionable insights to improve their lives.

Keywords: migration, aging, health promotion, social inclusion.



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Session 19: Open session

Session convenors: Catarina Delaunay, Ana Patrícia Hilário,

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The organisers will warmly welcome abstracts proposals concerning any methodological, theoretical, and thematic aspects related to the sociology of health and medicine more broadly.



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