## Introduction

Anna Rosa Favretto<sup>\*</sup>, Vulca Fidolini<sup>\*\*</sup>

Over the last three decades the studies on sociology of childhood and youth have offered several new inputs to consider the issues of health and illness through different eyes.

As is well known (Sirota, 2010), sociology started to realize the specificity of children and young people much later than other fields of knowledge, namely psychology, pedagogy and history. Childhood Studies have contributed especially to extend sociological attention towards children and teenagers beyond the traditional fields in which their presence had been studied so far (Jenks, 1982; Alanen, 1988; James, Prout, 1997; Mayall, 2002). Before the birth of Childhood Studies, the presence of children and teenagers in the society was just assumed, making it in fact blurred and undefined. Children and teenagers' condition was not analyzed in itself; rather, it was studied on the basis – and by the perspective – of older people, especially parents, with a special focus on the role of socialization within the definition of tomorrow's adults (Ibidem).

The younger ones, reduced to a mere result of the influences of previous generations and social structures, were then interpreted starting from their rigid and immutable status of sons or daughters, pupils or students, or even of early workers.

In the new perspective proposed by Childhood Studies, childhood, adolescence and youth have gradually freed themselves from dominant representations of predefined and immutable phases of life, permanently incorporated into a linear path of development (James *et al.*, 1998; Turmel, 2013). The manifestations of children and adolescents' world have therefore been investigated as relevant elements to study societies: more attention has been paid to the action of children as individuals and to the sense that they attribute to their actions (Hengst, Zeiher, 2004). In short, young people finally became an active part of the society and not just a predictable result of social forces, by which they seemed to be governed.

This new perspective has allowed seeing children and teenagers not so much as "ever changing beings", future men and women, but rather as ac-

\*\*Université de Lorraine. vulca.fidolini@univ-lorraine.fr

Salute e Società, XVIII, 3/2019, ISSN 1723-9427, ISSNe 1972-4845 DOI: 10.3280/SES2019-003001

Copyright © FrancoAngeli

N.B: Copia ad uso personale. È vietata la riproduzione (totale o parziale) dell'opera con qualsiasi mezzo effettuata e la sua messa a disposizione di terzi, sia in forma gratuita sia a pagamento.

<sup>\*</sup> Università del Piemonte Orientale. annarosa.favretto@uniupo.it

tive constructors of their daily contexts and agents in the process of "interpretive reproduction" (Corsaro, 1992) of the world, able to participate into the transformations of their life and social contexts since a very early age (Mayall, 1994; Hutchby, Moran-Ellis, 1998; Corsaro, 2003).

In particular, Childhood Studies have carried out an intense research activity in the field of children's health, radically transforming the conceptual and methodological references used by the social sciences in this subject area.

With particular reference to health and illness, a new way of considering children within therapeutic relationships has emerged since the first studies by Mayall (1996), Christensen (1998), and Prout, Hayes, Gelder (1999). Attention has turned not so much and not only to the activities carried out by adults towards ill children, but rather to children's participation in the events of illness, diagnosis and treatment. Increasingly more importance has been given to the reconstruction of children's attribution of meaning to activities related to their condition of young patients, the competences they manage to develop, and how these competences emerge, evolve and are gradually updated.

Over time, as Childhood Studies' perspective has been gaining popularity, research concerning young people's health and illness has covered ever more extensive and varied fields, thus making more general contributions to the knowledge of social processes and mechanisms concerning health in our societies. Without claiming to be exhaustive, we shall mention, for example, the studies that have explored the characteristics of the relationships between adults and children in therapeutic pathways, whose knowledge is useful to better understand the specific qualities that childhood acquires in our society and the moral issues it involves (Tates, Meeuwesen, 2001; Favretto, Zaltron, 2013). We shall also cite the research works that have investigated the experience of children and teenagers suffering from chronic diseases, in relation to both chronic conditions widely studied in the paediatric field - such as diabetes - and pathologies explored to a lesser extent, such as the Turner syndrome (Williams, 2000; Clark, 2003; Favretto et al., 2017). These studies have successfully overcome the diarchy between the biomedical paradigm and the paradigm of psychological sciences, by recognising the specificity of a sociological perspective on children, youth and health.

It seems also important to recall those studies that have explored the ethical and legal aspects of children' and adolescents' participation in therapeutic relationships (Alderson, 2007; Hammersley, 2015). In fact, as is known, Childhood Studies' perspective profoundly influenced the UN

Copyright © FrancoAngeli

N.B: Copia ad uso personale. È vietata la riproduzione (totale o parziale) dell'opera con qualsiasi mezzo effettuata e la sua messa a disposizione di terzi, sia in forma gratuita sia a pagamento.

Convention for the Rights of the Child (1989). The UN Convention acknowledged children rights that would trigger a profound transformation in social representations concerning their fragility and incompetence in health care. Among all, especially important are the rights related to children's participation in all the decisions that concern them: the right to obtain information about their state of illness and care; the right to have a personal opinion about treatments: the rights to express their point of view, to be listened to and taken into consideration by health personnel, their parents and all those people acting in their interest. The reflection on the application of the UN Convention and subsequent Charters concerning the rights of children, such as the Charter of Strasbourg (1996 - European Convention on the Exercise of Children's Rights), has spread beyond the healthcare sector, raising questions that sociologists of childhood and youth have extended to wider areas. For example, they have been exploring societies about the competences that are likely to be recognized in young people and about what activities the institutions have systematically put in place to accompany even the voungest children towards broader forms of autonomy. in order to help them become the real protagonists of their own choices.

Finally, we shall recall the great methodological contribution that Childhood Studies have offered to sociological methods. Carrying out research on childhood and youth imposes two major challenges: discovering the meaning that young people attribute to their own world and adults' and defining the characteristics that distinguish children's practices of everyday life. On the one hand, this has allowed constructing or adapting investigation techniques and tools to give voice and attention to young generations (Corsaro, 2003). On the other hand, this has allowed raising serious ethical issues in relation to the involvement of children in research (Bath, 2013; Canosa *et al.*, 2018). In this regard, the focus of interest has been on issues regarding the limits that researchers need to establish when they carry out research with minors, as well as the management of asymmetry between adults and children, which could inhibit the disengagement of children when the study causes discomfort to them.

Taking inspiration from this tradition of studies, this volume intends to introduce the contribution of contemporary international studies on health, childhood and youth to Italian readers. This issue collects the work of researchers from different European countries (Italy, France, Poland) through empirical contributions based on specific case studies related to different diseases (from diabetes to asthma and Turner Syndrome). These studies were carried out on several populations in diverse social and geographical contexts.

Copyright © FrancoAngeli

N.B: Copia ad uso personale. È vietata la riproduzione (totale o parziale) dell'opera con qualsiasi mezzo effettuata e la sua messa a disposizione di terzi, sia in forma gratuita sia a pagamento.

The pivotal points of the sociological tradition inaugurated by Childhood Studies constitute the backbone of the articles selected in this volume. But, at the same time, these texts try to update this tradition in the light of contemporary research experiences based on different empirical-theoretical approaches. By offering an original perspective not only on the sociology of childhood and youth but also on sociology of health in a broader sense, the present volume has another objective. Thanks to this small compendium of contemporary research, this issue also tries to show that the Anglo-Saxon and Nordic tradition of studies on youth and health – which is the undisputed founder of this field of research on childhood, youth and health – is no longer the only one today, as new European studies and perspectives are gradually expanding and enriching the international literature.

## References

- Alanen L. (1988). Rethinking Childhood. Acta Sociologica, 31: 53-67. DOI: 10.1177/000169938803100105
- Alderson P. (2007). Competent Children? Minors' Consent to Health Care Treatment and Research. Social Science & Medicine, 65: 2272-2283. DOI: 10.1016/j.socscimed.2007.08.005
- Bath C. (2013). Conceptualising Listening to young Children as an Ethic of care in Early childhood education and care. *Children & Society*, 27(5): 361-371. DOI: 10.1111/j.1099-0860.2011.00407.x
- Canosa C., Graham A., Wilson E. (2018). Reflexivity and Ethical Mindfulness in Participatory Research with Children: What does it really look like?. *Childhood*, 25(3): 400-415. DOI: 10.1177/0907568218769342
- Christensen P. (1998). Difference and Similarity: How Children's Competences is Constituted in Illness and its Treatment. In: Hutchby I., Moran-Ellis J., editors, *Children and Social Competence. Arena of Action.* London and New York: Routledge.
- Clark C.D. (2003). In Sickness and in Play. Children Coping with Chronic Illness. New Brunswick, NJ, London: Rutgers University Press.
- Corsaro W.A. (1992). Interpretive Reproduction in Children's Peer Cultures. *Social Psychology Quaterly*, 55 (2): 160-177. DOI: 10.2307/2786944
- Corsaro W.A. (2003). Le culture dei bambini. Bologna: Il Mulino.
- Favretto A.R., Zaltron F. (2013). Mamma non mi sento bene. La salute e la malattia nei saperi e nelle pratiche infantili. Roma: Donzelli.
- Favretto A.R., Fucci S., Zaltron F. (2017). Con gli occhi dei bambini. Come l'infanzia affronta la malattia. Bologna: Il Mulino.
- Hammersley M. (2015). Research Ethics and the Concept of Children's Rights. *Children & Society*, 29: 569-582. DOI: 10.1111/chso.12077

Copyright © FrancoAngeli

N.B: Copia ad uso personale. È vietata la riproduzione (totale o parziale) dell'opera con qualsiasi mezzo effettuata e la sua messa a disposizione di terzi, sia in forma gratuita sia a pagamento.

- Hengst H., Zeiher H., editors (2004). Per una sociologia dell'infanzia. Milano: FrancoAngeli.
- Hutchby I., Moran-Ellis J., editors (1998). *Children and Social Competence. Arena of Action*. London and New York: Routledge.
- James A., Prout A. (1997). Constructing and Reconstructing Childhood: Contemporary Issues in the Sociological Study of Childhood. London: Falmer.
- James A., Jenks C., Prout A. (1998). Theorising Childhood. London: Polity.
- Jenks C. (1982). The Sociology of Childhood. London: Batsford.
- Mayall B. (1994). Negotiating Health: Primary School Children at Home and School. London: Cassell.
- Mayall B. (1996). *Children, Health and Social order*. Buckingham: Open University Press.
- Mayall B. (2002). *Towards a Sociology for Childhood: Thinking from Children's Lives*. Buckingham: Open University Press.
- Prout A., Hayes L., Gelder L. (1999). Medicines and Maintenance of Ordinariness in the Household Management of childhood Asthma. Sociology of Health & Illness, 21(2): 137-162. DOI: 10.1111/1467-9566.00147
- Sirota R. (2010). Piccolo oggetto insolito o campo costituito. La sociologia dell'infanzia è ancora in "fasce"?. In: Belotti V., La Mendola S., editors, *Il futuro nel presente. Per una sociologia dei bambini e delle bambine*. Milano: Guerini e Associati.
- Tates K., Meeuwesen L. (2001). Doctor-patient-Child Communication. A Review of the Literature. Social Science & Medicine, 52: 839-851. DOI: 10.1016/S0277-9536(00)00193-3
- Turmel A. (2013). Une sociologie historique de l'enfance. Pensée du developpment, catégorisation and visualisation graphique. Laval: Les Presses de l'Université.
- Williams C. (2000). Doing Health, Doing gender: Teenagers, Diabetes and Asthma. Social Science & Medicine, 50: 387-396. DOI: 10.1111/j.1099-0860.2011.00407.x

Copyright © FrancoAngeli

9

N.B: Copia ad uso personale. È vietata la riproduzione (totale o parziale) dell'opera con qualsiasi mezzo effettuata e la sua messa a disposizione di terzi, sia in forma gratuita sia a pagamento.