



FREEDOM AND HEALTHCARE: MAPPING MUTUAL INTERCONNECTIONS IN CONTEMPORARY SOCIETIES

CALL FOR PAPERS

The *L'Altro Diritto Research Unit on Everyday Bioethics and Ethics of Science* of the University of Florence invites scholars to submit original contributions on the relations between *Freedom* and *Healthcare*.

These two spheres have been usually conceived as separated ones, which has led to overlook the conditionings one might exercise to the other. The main aim of this call is therefore to explore mutual pressures, bonds and connections between *Freedom* and *Healthcare*, be in a positive or a negative fashion. Our "mapping" will be drafted on the basis of contributions focused on one of the following main topics:

1) Freedom within Contemporary Health Systems

At least on a theoretical ground, contemporary health systems are conceived as places in which individuals' right to health finds a concrete satisfaction. Nonetheless, the growing attention paid to cutting-edge topics and ethical dilemmas seems to have resized the bioethics debate to the detriment of the protection, enhancement and enforcement of standard provisions in (everyday) healthcare practice. Conversely, a consolidated tradition from sociology of health and medical anthropology has successfully highlighted how often freedom of choice, freedom of expression, and then, freedom of *being*, could be overcome by consolidated paths of informal powers, professionals relationships and roles, etc., which may intimidate patients and induce subjection in the healthcare institutions. In this regard, it has also been shown how much individuals' agency is able to circumvent those paths in order to establish its own will. Nonetheless, this tradition has hardly dialogued with the ethical and legal perspective, which is one of the main purposes of this call for papers.

2) *Healthcare in Absence of Freedom*

The several forms of detention and confinement implemented by contemporary penal systems are mostly inspired on a paradigm that generically foresees the imprisonment as proportionate to committed offence. This may include generic or specific objectives of re-education, to be pursued under the most diverse conditions, depending on national policies and local contexts. Consequently, as also stated in a consolidated series of international bills and solemn declarations, detainees shall not lose more than their personal freedom, thus maintaining all the other fundamental rights, including adequate access to healthcare. Nonetheless, beyond the veil of the "law in the books", it is possible to see the "law in action", and realize how often inmates lose much more than personal freedom. Here, healthcare is arguably the dimension that most suffers from this (not so) tacit deprivation. It is already known that the interplay of formal and informal discrimination, subjection, violence and deprivation is capable to significantly compress and inhibit healthcare accessibility by inmates. Nonetheless, up to now, few attention has been paid to the specific implications ensuing by that interplay on the effectiveness of "right to health". Here we look at the "right" by considering all the correlated prerogatives, and "health" as the opportunity to take care and preserve individual's physical, mental and social wellbeing, by accessing to timely and adequate care services.

3) *Health and Freedom in Psychiatric Care*

When thinking on health in absence of freedom, the psychiatric treatment of mental problems is a paradigmatic case. Considering that psychiatric care still nowadays maintains its historical valences of physical custody and normalization, it provides a profitable opportunity to reflect on how much individuals are capable to exercise their freedom in healthcare facilities, when they are held captive *for their own health*. Moreover, psychiatric intervention is often part of standardized paths of diagnostic and therapeutic that seldom envisage and tolerate diversity, non-conformity or disagreement, thus leaving little room to individual freedom of *being*. In this context, numbers of scholars from the most diverse field have argued that psychiatric intervention might be seen as an institutionalized and formalized way to reduce said diversity. From another standpoint, for some individuals, being imprisoned or compulsory committed to a healthcare facility might represent an opportunity to get access to specialized care services. As surprising or even distressing as this fact can be, acknowledging and exploring its roots and contextual aids may lead to a wider understanding of the boundaries inspiring standard dichotomies such as the normal and the pathologic, the free and the compelled, the healthy and the unhealthy, as well as to the complex interconnections that mediate between them. It also provides further insights on healthcare and judicial policies, adding another layer to this discussion on the nature of the factors that prevent or facilitate individual access to healthcare.

INSTRUCTIONS TO AUTHORS

The Coordination of RUEBES will evaluate proposals of articles to be included in the ensuing volume: *Freedom and Healthcare: Mapping Mutual Interconnections in Contemporary Societies*. Proposals should be written in English language – both English and American spellings are accepted to condition that style be consistent throughout the whole text – and submitted as a *doc* or *rtf* document to: everydaybioethics@gmail.com, indicating the topic chosen among the three listed above. Proposals should be between 1000 and 1500 words, including references and notes. Ensuing volume will be published as an ISBN under the book series *Quaderni dell'Altro Diritto*, Pacini Publishing, Pisa.

RUEBES welcomes both theoretical reflections and/or empirical studies that show potential to build on the available knowledge and foster an increased awareness on selected topic. Hence, following RUEBES mission statement, the call is not only addressed to research community and academics, but to any potential contributor from the wider society so as to combine different sources, levels and forms of knowledge in a democratic and horizontal way. Proposals developed from an interdisciplinary perspective are especially welcomed.

Deadlines of the call:

- July, 15 for submitting the extended abstracts;
- July, 30 for communicating acceptance to selected authors;
- October, 30 for submitting the full version for publication.

FOR FURTHER INFORMATION:

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<http://www.altrodiritto.unifi.it/ruebes.htm>

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