**Ignat BOGDAN: “I wish to unite medical workers and social scientists”**

**On November 12, 2019, the international forum “The Sociology of health: The Way to Patient-Orientation” will take place in Moscow. The specialists will discuss matters of sociological monitoring, possible changes in recruitment policies and relevant social demands on healthcare services. One of the organisers, Ignat Bogdan, PhD in Politogy, who is head of the Medical and Sociological Research Department of the Research Institute of Health Organization and Medical Management of Moscow City Health Department, talks about the idea of the forum and its expectations.**

* **Ignat, why the Sociology of health?**

- Actually, the sociology of health is the name of a discipline. I would define its scope as social relations regarding the healthcare system and health in general. Our lives consist of social relations, and even if it does not look obvious at first sight, medicine does too. Relations between doctors, between a doctor and a nurse, between a doctor and a patient, the ideas of how patients and doctors have to behave, the vision of what it means to be healthy — the entire area of medicine and healthcare is a matter of social relations.

At the same time, a number of scientists would not agree with me on such a definition of the scope of the sociology of health. In Russia, there is a certain methodological confusion between the terms “medical sociology” and “health (and illness) sociology”. Some researchers think one of the terms includes the other one (“health sociology” includes “medical sociology” and vice versa), other researchers say that these areas are separate.

When selecting the name of the forum, we drifted toward the idea that the name “the sociology of health” better complies with the spirit of contemporary processes in the area of healthcare management when the prevention process is more important than the treatment process, a person's own role in health maintenance increases, and health improvement activities may occur without interaction with medical institutions. Remarkably, there is no medical sociology committee in the International Sociological Association but there are at least two health sociology committees: the health sociology committee and the mental health sociology committee.

* **What was the starting point of the forum?**

- While communicating with medical managers and social scientists and reading articles about the application of sociology in healthcare management, I fell under the impression that medical experts and social scientists often do not have enough interaction.

Social scientists immerse themselves in this area without involving medical workers thinking that their knowledge of social processes may be directly transferred into the area of medicine; in fact, they lose important nuances, because they are not experts in this area, they apply their visions which are actually the visions of a patient.

On the other hand, medical workers are often dismissive of sociology too. The words of one of the head doctors are representative: “Oh, social scientists! I used to be interested in sociology ...” And it is the saddest situation when a person thinks he or she understands something, but if you read such study, you may see that, mildly speaking, it is not the case.

Professionalism means knowledge of nuances. A medical worker cannot conduct a good study just after reading a website article or a sociology book. A social scientist cannot conduct a good medical and sociological study without an understanding of the nuances of healthcare management.

There are lot of nuances in this area. For example, how to build a sample correctly? It is a challenge forboth medical workers and a significant number of social scientists. One of the most frequent asked questions of study customers is how many people you need to survey “to make a representative sample”. And when you try to explain that there are nuances, it is perceived as if you do not understand the matter, since everybody knows that “the more people you ask, the better”. But in fact, it's not: it doesn't matter *how many* people you surveyed, it matters *how* you did it, but it is a topic for a separatediscussion.

That's why I really wanted to gather medical workers and social scientists, to “introduce” them to each other. To establish contacts between them. To discuss and to understand how to use sociology in healthcare management in the most efficient and optimal manner on the basis of current level of our knowledge.And to gather good methodologists and sociology specialists and experienced healthcare managers on one platform. Each concerned specialist has a lot of very complex but interesting challenges in his professional area. Maybe it is a colleague's idea which will help someone in solving their professional problems.

* **Who may be interested in participating in the forum?**

- Most of all, medical managers, healthcare management specialists and, of course, social scientists. And researchers of social processesin general, management specialists, political scientists, psychologists, who are interested in matters of quality of life and personnel motivation, analysts and other specialists.

**- What do you expect from the forum?**

- Most of all, I want to “unite” medical workers and social scientists, to establish a productive dialogue. From the application point of view, they seem to have one common goal: public health. It will be great if the forum helps establish professional contacts between customers and providers of sociological studies in the area of medicine.

Another challenge is to increase interest in this area so that more and more young specialists select it. By the way, it is for this purpose that we conduct the young researchers contest. So, apart from a good platform for the dialogue of medical workers and social scientists, personally I would like to see a good platform for adialogue between different generations of researchers.

I do hope that the forum will become a platform where we will be able to formally or informally share thoughts about what went right and what went wrong every year and to think together about how tomake it work well the next year.

Maksim Belkin