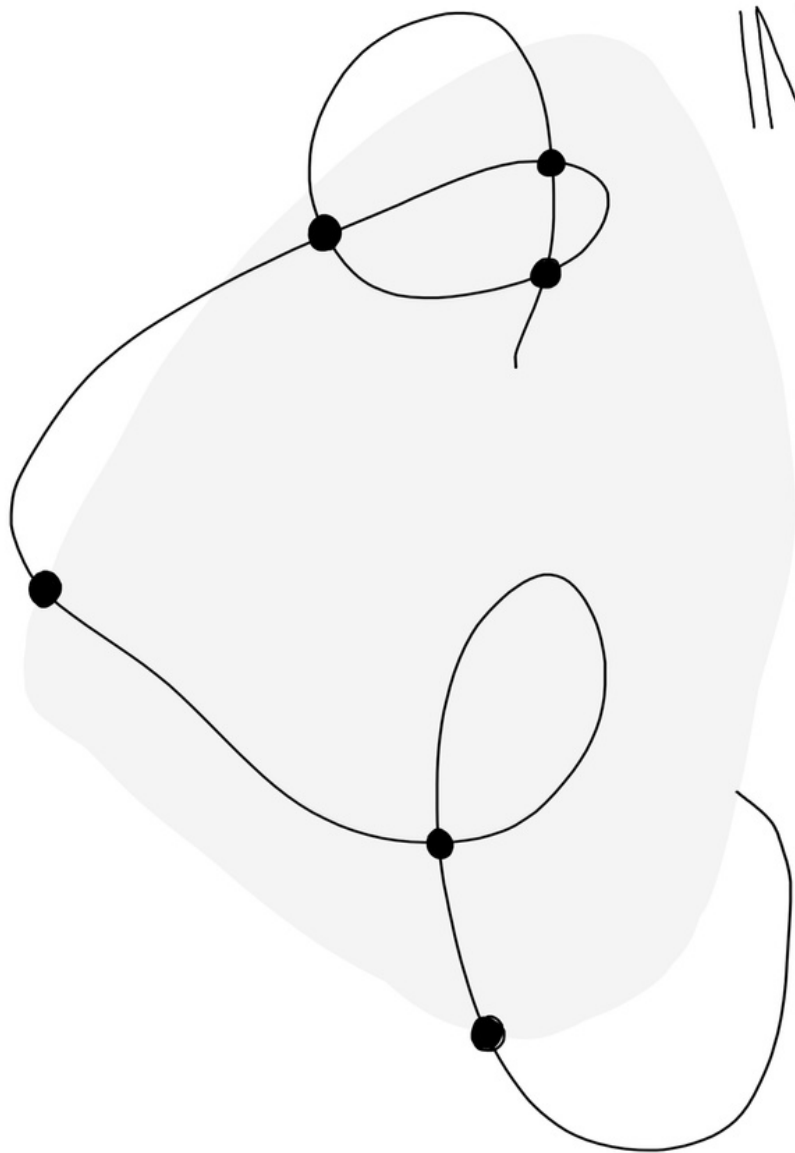


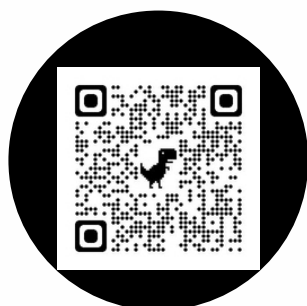
BOOK OF ABSTRACTS



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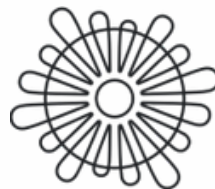


IN THE FRICTIONS:
FRAGMENTS OF
CARE, HEALTH
& WELLBEING
IN THE
BALKANS



APRIL 27-29

University of Zadar
Obala Petra Krešimira IV.
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WELCOME

Welcome to In the Frictions: Fragments of Care, Health and Wellbeing in the Balkans conference organized jointly by the Department of Ethnology and Anthropology, University of Zadar and Institute for Philosophy and Social Theory, University of Belgrade.

While care is a topic that is connected across regions, localities, and other scales the specific motivation for the conference in the center of the Balkans are twofold: to move beyond the stereotypical approaches to studying the Balkans, and to connect the various scholars in this region who research care, health, and wellbeing.

Presenters gathered at this conference are informed by varied theoretical and methodological perspectives that don't easily "fit" disciplinary classifications and subfields of anthropology and include many interdisciplinary approaches. We take this fragmented approach to care, health, and wellbeing in the Balkans to be a productive difference that may be used to rethink the notions of care, health, and wellbeing. Envisioned as a point of friction - an awkward, unequal, unstable, and creative quality of interconnections across differences. This conference may produce new collaborations centered around care.

With that in mind, this conference has three objectives:

1. To generate a dialog about care, health, and wellbeing between anthropologists who work in the Balkans across different theoretical and methodological traditions,
2. To push beyond dichotomous frameworks like the "Balkan as the internal Other" and "post-socialism",
3. To strengthen and support the development of medical anthropology in the region.

WELCOME

We would like to thank the University of Zadar and the University of Belgrade for their support in facilitating this encounter and recognizing the importance of cultivating fruitful academic relations across the region. We are also incredibly grateful to the Wenner-Gren Foundation for their financial support in organizing the conference and securing grants for young scholars to attend. Without their generous endowment this conference would not be possible.

We would also like to thank the Department of Sociology for welcoming us in their classroom, as well as all our student volunteers that are facilitating the smooth operation of the conference. Their assistance is invaluable.

- Special thank you is also reserved for the talented anthropology graduate Lucija Ostrogović for creating the logo for the conference and providing us with a visual identity.
-
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-

We extend a warm welcome to all of the participants of the conference and hope that it will prove to be a thoughtful and inspiring venue to all.

IN THE FRICTIONS: FRAGMENTS OF CARE, HEALTH, AND WELLBEING IN THE BALKANS

Care has been broadly defined as „everything that we do to maintain, continue, and repair our ‘world’ so that we can live in it as well as possible” (Fisher and Tronto 1991, p. 40). Complex relations of care sustain our lives and are necessary not only for the survival of humans and nonhumans alike but also for their flourishing. Structured through various mechanisms and institutions, from kinships to states, care produces various forms of intimacy and relatedness.

In the wake of the COVID-19 pandemic, there has been a resurgence of interest in care, health, and wellbeing across various disciplines. We are interested in how anthropology has responded to the urgent changes in the field of care and in identifying the aftermath of Covid-19 and post-Covid-19 realities in the Balkans.

We recognize, however, that the pandemic has been only one of the most recent disruptions in relations of care and acknowledge that the real-world programs of neoliberal restructuring are not linear paths that converge but are forged in frictions of situated encounters with earlier social and cultural landscapes. While the term “Balkans” is fraught with ambivalent meanings and associations, this conference aims to move away from Balkanism (Todorova, 2009) and dichotomous frameworks to rethink the Balkans as a site of knowledge production that has more to offer than just “catching up” with the West.

27-29 APRIL, UNIVERSITY OF ZADAR

In the Frictions: Fragments of Care, Health, and Wellbeing in the Balkans

What theoretical and methodological issues do anthropologists face in their research in the Balkans? How do people in the Balkans relate to one another within caring relationships themselves? What does care look like in practice and what does it entail? How are caring relationships shaped and changed? How do these experiences and relationships inform or challenge broader theoretical concerns?

We see this conference as a step towards building a network of anthropologists working on the issues of care in the Balkans. Possible topics include but are not limited to:

- Structural violence and care
- Gendering care
- Racializing care
- Solidarity and care
- Narratives of (health)care
- Spirituality and care
- Public and private health/care
- Humanitarianism and care
- Care and the commons
- Ecology, ecofeminist care
- Care and social class
- Care and mobility
- Care and the Economy
- Care and the state

The call was closed on November 1st, 2022.

KEYNOTES

Sabina Stan

Connecting the fragments of care: Transnational processes at the margins of Europe

In this presentation I propose to place healthcare in the Balkans in the context of larger transnational, European-wide dynamics currently affecting the sector. Healthcare services in Europe have traditionally been seen as a national affair insulated from transnational pressures, and most notably those resulting from European integration processes. In the last decades, however, we have witnessed the unleashing by these processes of transnational dynamics, which contribute to redivide and reconnect health services across Europe in new ways. The result is a new set of interconnected parts, or what we could see as an emerging European healthcare system. Here I will seek to uncover the structuring lines of this system by focusing on three interrelated transnational processes fostering the integration of national healthcare systems into a larger whole. First, the privatisation of healthcare services following the constraints of the Maastricht economic convergence and the EU accession criteria; second, healthcare worker and patient mobility arising from the free movement of workers and services within the European Single Market; and third, new EU laws and country-specific economic governance prescriptions that the EU has been issuing following the 2008 financial crisis. The presentation shows that these processes have helped to construct a European healthcare system that is uneven in terms of the distribution of patient access to services and of healthcare workers' wages and working conditions, but very similar in terms of EU economic and financial governance pressures on healthcare across and beyond EU Member States.

KEYNOTES

Čarna Brković

Realigning humanitarianism: postsocialist pedagogy as liberal politics of love

In this talk, I will explore liberal politics of love from the perspective of a postsocialist polity. Building on Povinelli's (2006) discussion of liberal discourses of autology and genealogy, the key argument is that pedagogy was the dominant discursive practice that charted the links between love and politics in postsocialist Balkans. Postsocialist pedagogy presents a particular vision of social change in which one actor benevolently supports another with the aim of helping them to reach full development. Humanitarian practices and moral feelings were one target of such measures in my fieldsite, a refugee camp for Roma, Ashkalia, and Balkan Egyptians that was located in Montenegro between 2000 and 2018. As a framework for social transformation, postsocialist pedagogy meant ignoring as irrelevant previous experiences, such as socialist and Non-Aligned ideas about humanitarianism, which were promoted through the work of the Yugoslav Red Cross during socialist Yugoslavia in the 1970s. It also meant ignoring structural and material conditions of life in the refugee camp and focusing on an individual subjectivity as both the problem and the key locus of where the change ought to take place. Finally, postsocialist pedagogy was organized recursively in this refugee camp, charting a racist and classist hierarchy of subjectivity. The talk makes a case for developing nuanced analytical terms to understand what is going on with feelings and politics during the postsocialist transformation, without always having to adjust, cut, scale up or down analytical vocabularies developed for liberal centres or peripheries.

Program



Main Hall, University of Zadar

Thursday, April 27

9:00-9:30 REGISTRATION

9:30-10:00 WELCOME ADDRESS

- **Gazela Pudar Draško**, Director of the Institute for Philosophy and Social Theory, University of Belgrade

- **Tomislav Oroz**, Head of the Department of Ethnology and Anthropology, University of Zadar

10:00-11:00 KEYNOTE

- **Sabina Stan**, Assistant Professor in Sociology and Anthropology in the School of Nursing, Psychotherapy, and Community Health at DCU

Connecting the fragments of care: Transnational processes at the margins of Europe

11:00-11:15 COFFEE BREAK

11:15-12:15 MARKET TRANSFORMATIONS OF (HEALTH)CARE

Luleva, Ana: Precarity, Social Reproduction and Moral Economy of Care after State Socialism in Bulgaria

Novakov-Ritchey, Christina: The Politics of Strah: Traditional Medicine and Balkan Capitalist Realism

Thiemann, André: Fledgling Farms and Failing Health: Transformations of Multispecies Labor and Care in the Serbian Raspberry Fields

Discussant: Senka Božić Vrbančić

COFFEE BREAK

12:30-13:30 HEALTHCARE SYSTEMS IN THE BALKANS

Bukovčan, Tanja: Fragments of the Past for the Fragmented Future: Taking Care of (Balkan) Healthcare

Ratković, Marija: Biopolitical Regulation: The Obstruction of Intimacy, Trust, and Confidence. The Case of Women Healthcare in Post-Yugoslav Space

Starova Tahir, Eda: Public Healthcare Bureaucracies and Negotiating Notions of Care in North Macedonia

Discussant: Atila Lukić

13:30-14:30 LUNCH BREAK

14:30-15:30

**(HEALTH)CARE AND
CHILDBIRTH**

Mijatović, Marina: Mistreatment of Women in Gynecology and Obstetrics Institutions

Paska, Danijela: Culture of Silence and the Medicalization of Women's Experience: Reproductive Health Discourse

van der Sijpt, Erica: Citizens, Customers, Critics: Birthplace Choices and Subjectivities in Post-communist Romania.

Discussant: Ljiljana Pantović

COFFEE BREAK

15:45-16:45

**GENDER, VIOLENCE,
ACTIVISM**

Avramopoulou, Eirini & Papagaroufali,

Eleni: I am an angry worker: The affective labor of care work on gender-based violence during the pandemic crisis in Greece.

Peglidou, Athena: Care, Ageism, Femicide, who cares.

Molnar, Irena: Women Living with HIV in Serbia: Impact of Donor Practices on Policies and Quality of Care

Discussant: Biljana Stanković

COFFEE BREAK

17:00-18:20

(NOT) CARING IN THE PANDEMIC

Katarinčić, Ivana: The policy of state concern for the health of population in the extraordinary circumstances of the COVID-19 epidemic

Prica, Ines: Irony, Crisis, and Social Change: The Impact of the Political Criticism in Pandemic Croatia

Resanović, Milica & Toković, Milena: Culture as Care and Care for culture in the pandemic

Puljak, Ana; Miloš Pačelat, Maja; Kolarić, Branko; Štajduhar, Dinko; Ćorić, Tanja; Gusić, Kristina Minea; Arnaut, Karmen & Sajko, Dalma: Control of the Consequences of the Pandemic and the Earthquake in Nursing Homes in the City of Zagreb

Discussant: Gordan Maslov

20:00

INFORMAL GATHERING COLLABORATIONS AGAINST STRUCTURAL VIOLENCE



MURO BAR
POLJANA ZEMALJSKOG ODBORA 2
[HTTPS://MUROBARZADAR.COM](https://murobarzadar.com)

Friday, April 28

9:30-10:50 (DE)INSTITUTIONALIZED CARE

Miloš Pačelat, Maja; Kolarić, Branko; Ćorić, Tanja; Gusić, Kristina Minea; Arnaut, Karmen and Sajko, Dalma: Challenges and needs of informal caregivers of older people.

Parunov, Pavao: Who's "making a wish" and for what - reconfiguring the role of state in Croatian systems of elderly care

Prša, Anita: Spirituality, Religion and Unpaid Engagement at the End of Life: A Comparative Study of Volunteer Palliative Care Work in Austria and Croatia

Šimunković, Gordana: Readiness of the Health System of the Republic of Croatia to further develop of pediatric palliative care.

Discussant: Ljiljana Pantović

COFFEE BREAK

11:00-12:25

BODIES, RIGHTS AND EDUCATION

Karavasilev, Kostadin: Caring about rights: Rights advocates challenging (socio-political) notions of care for people with disabilities in Bulgaria.

Lukić, Atila & Maslov, Gordan: Is thinking about a Healthy Body possible?: a contribution to a possible dialogue.

Doričić, Robert & Tutić Grokša, Ivana: How to prepare students for diversity?

Štajduhar, Dinko: What Doctors Do: Epistemology of Medicine and Medical Education

Discussant: Tanja Bukovčan

FRIDAY, APRIL 28, UNIVERSITY OF ZADAR

In the Frictions: Fragments of Care, Health, and Wellbeing in the Balkans

COFFEE BREAK

12:40-13:40 COMMUNITY, SOLIDARITY, AND CARE

Douzina-Bakalaki, Phaedra: To feed, to clothe, and to heal amidst crisis: Alternative forms of care in Xanthi, Northern Greece

Fotić, Jelisaveta: It's like a second family – biosociality and biosolidarity in Belgrade: An association of people living with diabetes.

Stanković, Biljana; Lukić, Petar;

Stojadinović, Irena; Bogdanović, Jasmina & Vukčević Marković, Maša: Living as a long-term psychiatric service user in Serbia: the importance of community-based mental health support.

Discussant: Peter Locke

13:40-15:00 LUNCH BREAK

15:00-16:00 FEMINISM AND THE ART OF CARE

Cartier, Cyrille: Beyond the Binary: The intersection of care, identity, and integration

Kašić, Biljana: Responsive connectedness in times of carelessness, or how to be a feminist.

Šantorić, Juraj: Motifs of care and nurture in the performances of Vlasta Delimar, or what artists tell us about motherhood and aging

Discussant: Jelena Kupsjak

COFFEE BREAK

16:15-17:45

DOING GENDERED CARE

Barada, Valerija; Čop, Blanka; Parunov, Pavao; Račić, Jasna & Šarić, Marija: Doing nature, doing nurture: Practiced and symbolic gendered parenting care style in family life.

Čengiđ, Nejra Nuna: Domestic paid female care work: a node of social reproduction'

Račić, Jasna; Barada, Valerija; Puzek, Ivan & Čop, Blanka: Thinking about the family: conceptualization and operationalization of cognitive and emotional labor

Šarić, Marija: From labour to love migrant women's experiences of paid care work

Discussant: Danijela Paska

18:00 OPTIONAL OLD TOWN WALK

20:00

INFORMAL GATHERING RESEARCH IN THE BALKANS



MURO BAR
POLJANA ZEMALJSKOG ODBORA 2
[HTTPS://MUROBARZADAR.COM/](https://murobarzadar.com/)

Saturday, April 29

10:00-11:00 KEYNOTE

Čarna Brković, Professor of Cultural Anthropology and European Ethnology at University of Mainz

**Realigning humanitarianism:
postsocialist pedagogy as
liberal politics of love.**

COFFEE BREAK

11:15-12:35

**CARE AND
HUMANITARINISM**

Pozniak, Romana: Humanitarianism and social reproduction: ambivalences of care work in the Croatian migration regime

Raluca, Gorgos & Trifon, Maria: The distance between us. Diaspora repatriation during the pandemic

Renaudeau, Eva: Therapeutic mobilities of French migrants in Romania

Đorđević, Ivan: The Forgotten People. Roma in Serbia During the Covid-19 Crisis

Discussant: Duško Petrović

COFFEE BREAK

SATURDAY, APRIL 29, UNIVERSITY OF ZADAR

In the Frictions: Fragments of Care, Health, and Wellbeing in the Balkans

12:50-13:50

SELF-HELP AND SELF-CARE

Llopart i Olivella, Pol: Seeking well-being by being-with. Care, sociality, and divine closeness among Sufis in the Serbian Sandžak

Sakač, Marina: Menstrual Poverty in the Western Balkans. An Anthropological Discourse Analysis

Urošević, Milan: Therapy culture and self-help culture in postsocialist countries of the Western Balkans – the neoliberal transition and new imaginaries of subjectivity

Discussant: Irena Molnar

13:50-15:00 LUNCH BREAK

15:00-16:20

CARING FOR...POLICIES OF CARE

Horvat, Lea: Caring for Mass Housing in the Post-Yugoslav Space

Melada, Marija; Mojaš, Orsat; Štefok, Karolina & Rajković, Klara: Affective care among the care providers for the elderly in selected institutions

Kravva, Vasiliki: Caring for the homeless? Social policy and wellbeing in a Northern Greek city

Locke, Peter: The Weight of Survival: Fragments of Care in Sarajevo, 2007-2022

Discussant: Ines Prica

COFFEE BREAK

SATURDAY, APRIL 29, UNIVERSITY OF ZADAR

16:35 – 17:50

HUMANITARIAN CARE

Helms, Elissa: Care, Control, and Covid: layers of crisis along the Balkan Route of migration

Khamsy, Nina: New technologies and forced migration on the “Balkan circuit”: an anthropology of violence and care.

Nared, Dagmar; Öztürk, Aslıhan & Kropivnik, Luka: Racialized care-chains in Bosnian border towns: (re)contextualising knowledge and methodology in and of the Balkans

Petrović, Duško: Humanitarian Power vs Sovereignty

Discussant: Peter Locke

20:00 FAREWELL PARTY AND LAUNCH OF
BALKAN ANTHROPOLOGY OF MEDICINE
(BAM).



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You will be provided with a computer equipped with Microsoft Office and PowerPoint.

We recommend that you save your presentation in both PPT and PDF formats.

Contact your session discussant or student volunteer and transfer your presentation to the computer before the start of your session if you have it on a USB drive.

Otherwise, it is recommended to send it to inthefrictions@gmail.com with the title PRESENTATION: [title of your presentation] before the start of your session.

- Presenters have 20 minutes for their presentations and Q&A. It is advisable that your presentation does not exceed 15 minutes.

Discussants will take care to keep the schedule on track and engage in discussion.

ABSTRACTS

Avramopoulou, Eirini & Papagaroufali, Eleni

"I Am an Angry Worker": The Affective Labor of Care Work on Gender-Based Violence During the Pandemic Crisis in Greece

This presentation is based on our research project, titled Affectscapes of Care: Gender-Based Violence and Resilience During the Covid-19 Pandemic (CovCare), funded by the Hellenic Foundation for Research & Innovation (H.F.R.I.). This project aims to explore the intertwining of institutional structures and affective relations of care formed with respect to people's experiences of violence and the call to act as resilient subjects in the absence of sustaining structures during the ongoing pandemic "crisis." Focusing on the care work on GBV, this paper addresses the complex affective atmosphere that surrounds the labor of activists and official professionals who took care of GBV survivors, in shelters and consulting centers, before and during the COVID-19 pandemic in Greece. The in-depth interviews conducted among these caretakers in 2022 conveyed their feelings about commitment, some self-satisfaction and endurance but mostly about signs of burnout, self-cancellation, and anger because of having been unable to "act" efficiently. Aiming to unravel the complex emotions produced by such aporetic "caring economies" that (re)shape the (ab)used notion of care vis-a-vis the biopolitical production of resilient subjects and under the urgency of newly produced crisis management, we ask: What does acting against gender-based violence entail? How does this relate to regimes of representation employed to act against, and speak publicly about, GBV? Also, what kind of subjects does this process produce? More importantly, can feelings of rage and care (re)define the (im)possible field of acquiring agency and resisting through practicing mutual aid, commoning, and building alternative networks?

By approaching these questions, we argue that while care embodies the violence aiming to combat, caring practices are politically situated performative acts which become capable of revealing, (re)producing, (re)forming, even overthrowing the regimes of representation they embody, especially at times when populations are guided by governments to adapt to unexpected change and uncertainty, and when individuals are expected to show "responsibility, adaptability and preparedness" (Joseph 2013: 40).

Barada, Valerija; Čop, Blanka; Parunov, Pavao; Račić, Jasna & Šarić, Marija

Doing Nature, Doing Nurture: Practiced and Symbolic Gendered Parenting Care Styles in Family Life

Most theorists perceive the family as a key institution of doing gender, performed and produced through parental/family practices of household organization (division of domestic labor and care), but also through parents' beliefs, everyday actions and interaction (West and Zimmerman, 1987). Parental care is one of the central aspects of family life and has been heavily discussed in terms of gendered normative expectations of organizing family life through gendered structures of hierarchy and individual roles. Understanding parental care as gendered can be significantly improved by the framework of doing gender and by focusing on specific practices which come to play in parental care. From this perspective, parental care is gendered not only by enactment of gendered family structures but also by routine performances and accomplishments of specific femininities and masculinities.

To unravel the processes of doing gender in the family via doing care, it is necessary to map out both the family structure and routine activities in family life which are recognized to produce and reinforce gendered practices. Also, the issues on the symbolic re/construction of family structure cannot be neglected. In our research, this has been done by looking into parents' narratives of their first-year parenting experience and caring activities for children, both in relation to the parent's (absent) partner and emotional and moral projections they display when it comes to the future of their family and children.

This paper is based on the results gathered through the European Social Fund project Impact of Public Policies on the Quality of Family and Working Life and the Demographics of Croatia - Spaces of Change. The qualitative section of the project was conducted during the second half of 2022. 36 narrative interviews with parents of underaged children were conducted in six different regions in Croatia. Four types of parents were interviewed with an emphasis on the heterosexual family structure: women and men in heterosexual couples and single and/or divorced women and men. We present the preliminary analysis focused on the issue of doing gender by interviewed parents.

Bukovčan, Tanja

Fragments of the Past for the Fragmented Future: Taking Care of (Balkan) Healthcare

In 2012, just over ten years ago, there was a conference in an Eastern European country on the topic of health in transition which aimed at bringing together scholars working on health, illness, medical care and healthcare in post-socialist regions. Presented papers, many by western scholars – whatever that meant, but was stated in the conference report – were continually purporting the image of Todorova’s Balkanism, describing mental hospitals in remote mountains as horror movie sets or discovering practices of really exotic traditional healing practices still alive and kicking – perpetuating the Balkan Other as the one who has to pass a painful process of transition to get, but still isn’t, there.

The author of this paper, presented at that conference, argues for an alternative approach to the analysis of healthcare in the Balkans, which, from the onset of the early ideas of social medicine, public health, and the relationship between cultural contexts, socioeconomic factors and individual wellbeing, envisaged equitable healthcare as the universal human right, more concerned with the ready availability of care and healthcare to, for example, rural areas and population, than with its neo-colonial positioning.

Furthermore, the common narrative of the all-accessible and free healthcare during the 50 years of socialism was re-mastering the early 20th century work of Andrija Štampar, whose ideas of Health for All, still, twenty years into the 21st century, remain an unattainable goal worldwide. This paper aims at answering the question on how we could apply the specific good practices of the past in the new medically plural societies, with health equity becoming an increasingly distant goal, all coupled with the rapid and booming development of medical markets?

Cartier, Cyrille

Beyond the Binary: The Intersection of Care, Identity, and Integration

The giving, receiving and exchange of care in grassroots, independent, Zagreb-based engaged-art organization, becomes a symbol of subversion, standing up against the very cultural and structural violence that de facto divides people and assigns them their different roles: care-giver (volunteers, locals, benefactor) and care-receiver (asylum seeker, refugee, foreigner, beneficiary).

Within the organization, care is part of the community-building process but also part of the arsenal to redefine relations beyond the binary. For that to happen, a clear awareness is required on the influence of privilege and power, a recognition that we all need care in various forms and degrees, and that the exchange of care can either reinforce or weaken the differences and inequalities.

The spectrum of care in humanitarian-related work often reinforces the division of “us” and “them” in a system that then feeds into further inequality and repression. (Vandervoordt, 2019). The system of dichotomous relations discourages agency, reducing the receiver to the state of victimhood (Fassin, 2011). In the context of a world often defined in the international sphere along lines of tolerance with the “them” portrayed as threatening “other,” predominantly Muslim, (Brown, 2006), reaching out across any alleged divide, carries an added significance, even subversion, to mainstream rhetoric.

The paper seeks to explore the interception of care, identity and integration by considering care's impact on questions of empowerment and well-being. In this organization, care is a fundamental part of its identity and community-building, helping to redefine the understanding of concepts such as integration—usually presented in a linear, one directional way, two-way at best—though an alternative is more appropriate to avoid the inherent discrimination and submission of one of the “two” parties and reflect the multi-faceted relations and community. (Klarenbeek, 2021)

ČengiĆ, Nejra Nuna

**Domestic Paid Female Care Work: A Node of Social
Reproduction**

Proposed presentation deals with domestic paid care work in Sarajevo, BiH. Decreased levels and quality of social services, prolonged working hours and higher demands on employees, very high unemployment rate, structural poverty and significant war and post-war migrations of middle aged and young people are just some of causes and indicators of reconfigured care for the elderly and for children in BiH, which used to be strongly reliant on kin and public welfare institutions. Like many other post socialist states, this has led to the establishment of care businesses, but also to an increase in informal arrangements for paid domestic care and increasing 'care drain' to the EU. This work is carried out almost solely by women, often in socially disadvantaged positions.

- Approaching care in Thelen's terms (2015) as central to "political organization and belonging" (504), to "visions of a 'good life' and 'a good society'" (499), questions around care, such as who does it, for whom, why, under which conditions and expectations, as part of which life trajectories, allow us to address care as a dynamic relational activity at the heart of the social organization. Focusing on ways how my interlocutors experience and address precarious working conditions, I will (also) reflect on how global capitalist processes are realized in specific place and time, demonstrating the importance of such specification.

- The presentation builds on my ongoing ethnographic study, which investigates informal domestic paid care work (childcare and elderly care) as a socially re/productive relational activity in a dialectic relationship with broader social transformations in BiH. It focusses on two connected sites—Sarajevo (primary site) and Austria (auxiliary site, a nearby destination for BiH labor migration). Tracing how social transformations converge in care work, this project aims to affirm taking care as a prism for studying social transformations.

Djordjević, Ivan

The Forgotten People. Roma in Serbia During the Covid-19 Crisis

Roma are arguably one of the most vulnerable and discriminated communities in Europe, which is particularly the case in Central and South East Europe. Their status mostly derives from long-lasting discrimination and marginalization, which leads to extreme poverty, low educational status, unemployment and bad living conditions. Until recently, significant number of Roma didn't have access to the health care system due to their "invisible status" as a consequence of the lack of identification documents. In this presentation I will focus on the specific case of Roma living conditions in Serbia, particularly during the first year of the Covid-19 pandemic. The government measures such widely popular "lockdowns", limited access to health care etc., had a serious impact on many Serbian citizens. However, the most deteriorating effect of the Covid-19 related policies was on the most vulnerable population – Roma communities. Since most of them are involved in the "grey economy", depending on collecting and selling goods in the streets or in green markets, the impact of restricted mobility left them without a main source of income. Without social protection and security guaranteed by the state, they were left alone, depending only on occasional efforts made by centers for social work, humanitarian organizations and INGOs who had provided food and basic goods.

Deriving from ethnographic data collected in various Roma settlements, in this presentation I will show the strategies of care developed within communities, facing not just the pandemic condition, but also structural constraints related to their accessibility to services available to other citizens in Serbia.

Douzina-Bakalaki, Phaedra

To Feed, to Clothe, and to Heal Amidst Crisis: Alternative Forms of Care in Xanthi, Northern Greece

The onset of the so-called Greek Economic Crisis in 2010 inaugurated a long decade marked by fiscal consolidation, internal devaluation, and public asset privatizations. For a large part of the population basic goods and services that were once taken for granted became inaccessible. Drawing on ethnographic material gathered in Xanthi, Northern Greece, between 2014 and 2015, this paper focuses on three such fundamental goods — food, healthcare, and clothing — and traces actors' situated efforts to restore paths of provisioning. The paper zooms into three separate sites of distribution. The Bank of Love is a soup kitchen that serves one hundred and fifty portions of food daily. The Social Medical Practice delivers healthcare to the uninsured. Finally, the Social Wardrobe distributes clothes free of charge.

Invested in anthropological debates on social reproduction, the paper advances two key arguments. First, that the cooking of meals, the delivery of healthcare, and the distribution of clothes involve performances of kinship, statecraft, and market consumption. Second, that to feed, to clothe, and to heal amidst sweeping austerity, also means to invoke historically resilient conceptions of social order and the good life. At the core of the ethnographic analysis lies relations of affinity between emergent provisioning configurations and the institutions they supplant. I demonstrate that, 'as if' but 'not quite' a household, a shop, and the state, Xanthi's soup kitchen, clothing bank, and social clinic (re)embed actors within performative webs of structural dependency and institutional entitlement. Emergent provisioning practices are thus shown to be contingent on enduring, albeit profoundly disrupted, institutional forms. The pursuit of dignified livelihoods amidst crisis, on the other hand, is shown to restore—even if only partially and performatively—the assurances of a less troubled past.

Doričić , Robert & Tutić Grokša, Ivana

How to Prepare Students for Diversity?

Ensuring equal access to healthcare is one of the most important aspects of a society of diversity. However, inequalities have been observed in the provision of healthcare for different vulnerable groups in society: migrants, patients belonging to different cultural or religious groups, and members of sexual and gender minorities. To improve the availability of healthcare for vulnerable groups, the concept of diversity competence was proposed. Such a concept enables the provision of healthcare adapted to the needs of the individual and develops in health professionals' insight and empathy into the patient's beliefs, values, experience, and behavior. In contrast to cultural competencies aimed primarily at effective interaction with people who are linguistically and culturally different, diversity competencies are aimed at a wide range of minority groups.

- The adoption and development of cultural competencies have been included in the curriculum of study programs of health professions in the world for the past decades, especially in North America and Europe, where it is faced with numerous methodological and implementation challenges. In Croatia, research on diversity competencies among students of health studies is absent, and recent comparative research among nursing students indicates that in the context of diversity, only diversity related to nationality and religion is recognized.

- In this presentation, the results from the research on the curriculum of health professions study programs at several higher educational institutions in Croatia will be presented to gain insight into education, e.g. the development of cultural and diversity competencies among students. The analysis performed will be the basis for planning future guidelines for the development of such competencies through the curriculum of health professions study programs at the University of Rijeka, where students together with members of vulnerable groups will be active co-creators of such a content.

Fotić, Jelisaveta

It's Like a Second Family – Biosociality and Biosolidarity in Belgrade: An Association of People Living with Diabetes

This paper focuses on biosociality and biosolidarity of an association of people living with diabetes in Belgrade, Serbia. Members of the association form a new kind of kinship that emerges when people with the same health condition come together to offer each other support, care, solidarity and become activists. The paper offers an insight into the process of biosolidarity among people with diabetes that influenced the emergence of the association and that holds it together over the years.

By participating, observing, and conducting interviews, I explored the daily lives of people with diabetes – between norms set by the society and norms created by the association, formed as a product of socio-economic and political circumstances after the fall of the socialist state. This paper acknowledges that people with diabetes and parents of children with diabetes develop particularly strong biosolidarity ties, because of the magnitude of the initial shock upon the diagnosis, and the shame and blame that follow after the diagnosis and every “coming-out” situation, which all negatively influence a person’s self-esteem, that, in turn, amplifies the need to make diabetes invisible and cause self-stigmatization.

Biosociality and biosolidarity have, until now, been mostly explored within Anglo-American theoretical and cultural contexts, that differ from the Balkan ones. Biosociality and biosolidarity in the context of diabetes patient associations have been researched by less than a handful of scholars, however rarely focusing on associations themselves, which, as I show, have the potential to change the way people see themselves and care for themselves and others. The Balkan context of Belgrade is important to consider in the biosociality scholarship, as it offers an input on the relations that need to be formed between citizens inside the fields where the state failed to do its work – such as the healthcare system, and how these relations influence caring relationships between people.

Helms, Elissa

Care, Control, and Covid: Layers of Crisis Along the Balkan Route of Migration

This presentation will trace the responses of residents just outside the EU border to the “migrant crisis” through the lens of care – care for others as humans and as differently ranked members of “our” society. Based on ten months of fieldwork in the northwest Bosnian town of Bihac and the surrounding Una-Sana Canton, I examined how the first wave of Covid-19 restrictions in the spring of 2020 brought to the fore different ways of thinking about care: humanitarian concerns about basic human needs of the migrants quickly shifted to care for the local population and a corresponding need to control the movement of migrants through policing and camps.

- Prior to the pandemic, migrants traversing Bosnia-Herzegovina on their way, with hopes, to get to more prosperous countries of the EU were already being judged and sorted by how much they were deserving of aid and from whom – local governments, ordinary people, NGOs, international organizations, foreign volunteers, the EU, etc. When children, the elderly, and those with health issues
- were classified as vulnerable and confined to their houses because of Covid, residents began to question even more than previously why food aid was being given to migrants and not to “our poor.” One local organization began delivering food to the vulnerable, but there were disagreements over whether leftover food should be shared with migrants, whether they were “deserving” of the same level of care. Camps, administered by the Ministry of Security, run by international organizations, and financed by the EU, became even more tightly associated with control than with humanitarian care. The pandemic thus made clear how different concepts of care, belonging, and moral comportment – which groups are deserving of care and in response to what threats – were vying for dominance.

Horvat, Lea

Caring for Mass Housing in the Post-Yugoslav Space

Socialist mass housing makes up a critical part of the housing stock in post-Yugoslav space, as it is the case in other former socialist countries. Mass housing solved the housing question for thousands of citizens. Beyond that, such neighborhoods created an abundance of (semi)public spaces available to all citizens. The mass housing stock is ageing and increasingly in need of attention. Since the end of the socialist regime, the agency and self-jurisdiction of homeowners are growing as they set out to embellish and improve their apartments, while institutional regulations, maintenance, and plans for the future diminish.

What does it mean to care for mass housing in post-Yugoslav condition? What is there to take care of, to care for? Who are agents of care? Drawing on selected examples from post-Yugoslav space I am paying close attention to (dis)advantages of formal and informal care, their historical genesis, and their regenerative potential. By putting together a patchwork of various practices and notions of care, a space for speculative conversations on care-full futures opens.

Karavasilev, Kostadin

Caring about Rights: Rights Advocates Challenging (Socio-Political) Notions of Care for People with Disabilities in Bulgaria

A turn in activist/advocacy framings related to legal changes concerning people with disabilities in Bulgaria has foregrounded support and rights as opposed to care to counteract existing legal framings of this group as needing the state of care and protection. This preference for support over care came into sharp relief during the fieldwork I undertook between July 2022 and January 2023. The doctoral research, part of which the fieldwork is, aims at tracing the interactions between Bulgarian laws and international conventions concerning people with mental illness diagnoses. The main focus are Bulgarian laws on involuntary admission and treatment and legal incapacitation and these laws' applications in light of conventions such as the United Nation's Convention on the Rights of Persons with Disabilities (CRPD) that the state is party to.

Based on the fieldwork, this presentation will trace the frictions between the notions of support and rights and of care and protection that activists/advocates of people with disabilities' rights that I collaborated with pointed towards. I view this opposition as a rhetorical tool that advocates/activists employ to pursue their goals. Through problematizing care, they foreground the frictions inherent in abstract notions of palliative, if not reparative, care through highlighting the potential for inflicting various forms on violence on the individual while presenting that as care.

Drawing on fieldwork materials and academic literature, especially recent calls to unsettle care (e.g., Cook and Rundle, 2020; McKearny, 2020), the presentation will keep the tensions that the geographical position of Bulgaria in the Balkans and its socialist past entail to trace the potentials that the friction between support and care that the activists proposed has to offer in understanding notions of support and care within the legal and socio-political context of disability in Bulgaria.

Kašić, Biljana

Responsive Connectedness in Times of Carelessness, or How to be a Feminist

How to counter oppressive social orders (historically privileged and culturally dominant) and practices that harm others within a contemporary geo-political setting through the optics of care and co-responsibility? How to be attentive to the intersections of multiple aspects of vulnerable identity positions including race, class, and disability, in addition to gender (Crenshaw 1991)? What makes gendered differences in ethical and moral reasoning of care (Tronto 1993)? These are just some of the questions that preoccupy feminist ethics of care today.

The issue of care is highly contested, and so are the theoretical works dealing with the topic of care. On the one hand, the burdened history of femininity associated with caring and caregiving practices (Nodding 1984; Card 1996; Tessman 2005) emerges every now and then as a problem for feminists opening the question in what way are distinctive experiences of women (Gilligan 1982) still a valuable argument in care debate. On the other hand, what appears as an issue is with which analytical tools to approach the commodification and corporatization of care nowadays (Faris & Marchetti 2017).

This presentation tries to give an insight into the complex straits of theoretical challenges, such as "caring democracy" and its limitations (Dronkers 2022), gender, migration and care/social reproduction and transnational responsibility of care (Farris 2017; Federici 2014) as well as critical 'flashes' from critical race and postcolonial theory related to "offshore humanism" (Gilroy 2016), neoliberalism (Brown 2019), injustice and unequal distribution of wealth, power and resources on a global scale (Bhattacharya 2017; Giménez 2018). Particular attention will be paid to feminist alliances as a possible way to undoing care from a transformative angle.

Katarinčić, Ivana

The Policy of State Concern For the Health of Population in the Extraordinary Circumstances of the COVID-19 Epidemic

World governments have taken special care of the collective health of their citizens during the still topical COVID-19 pandemic. At the beginning of the pandemic, in agreement with and based on the opinion of the officially appointed expert and scientific teams, more or less similar strategies of care and solving the newly-created situation were constructed. Epidemiological measures were devised, with the original goal of preventing the spread of the deadly virus. They caused conflicting reactions from people that led to a division in the society regarding the understanding of the strategies employed to fight the spread of the virus as well as the doubts about the expertise and benevolence of the people in charge of their implementation. By imposing new rules of conduct and demonstrating control that in non-pandemic times could be characterized as tyrannical, in an extraordinary situation and under extraordinary circumstances, the democratic governments acted beyond their existing powers. Epidemiological measures have normalized numerous extremes that in another moment and context would be unacceptable, discriminatory, and unconstitutional, and were perceived as such in certain groups of the population. Considering the reactions and the resulting division in society it is increasingly certain that the policy of caring for collective health and the actions of national governments left long-term consequences on economic and social issues, but also on value and moral systems that led to the questioning, among other things, of the role and power of the state in extraordinary circumstances.

To detect the reflection of the implementation of prescribed epidemiological measures in Croatia, I used the classical ethnological and methodological research method – the interview, and due to the epidemiological measures of restricting movement and avoiding personal contact, I followed and used extensive media content and numerous comments by the users of social networks.

Khamsy, Nina

**New Technologies and Forced Migration on the “Balkan Circuit”:
An Anthropology of Violence and Care**

Migration and new technologies are increasingly interconnected in Southeast Europe with ambiguous and unpredictable effects on forced migrants. While states use new technologies to reinforce borders of the Schengen area, people on the move use smartphones to navigate their way to safety. Media has tended to insist on the empowering capacity of digital media, or on the threats of online surveillance for border control. Yet technologies are integrated in a broader infrastructure made of sociotechnical flows of people, objects, and ideas. This paper sheds light on the dynamics of structural violence and care stemming from the digital infrastructure of mobility in the Balkans. Seven years after the “migration crisis”, many people on the move are stranded on the so-called “Balkan route”. Violent pushbacks at the borders of the Schengen area have led to the emergence of new patterns of multidirectional mobility, creating a “Balkan circuit”. Digital practices of different actors—migrants, officers, and support-groups, demonstrate the effects of digital infrastructure and legislation for mobility control.

This paper will present findings from my fieldwork between Serbia, Bosnia and Herzegovina and Croatia and focus on the destruction of smartphones at migrants’ apprehensions. How can an ethnography of this practice help understand the articulation between the institutional and physical violence, and its effects on physical and mental health? How do care relationships emerge? What ethical and methodological issues does an ethnography of digital practices face on the “Balkan circuit”?

Kravva, Vasiliki

Caring for the Homeless? Social Policy and Wellbeing in a Northern Greek City

Although Thessaloniki is a modern Balkan city and a touristic destination, at the same time, it stands as “a city of the deprived” of liminal figures who live on the margins of urban life. Since February 2017 until March 2020, I conducted ethnographic research of homelessness and the main focus of my research was the dormitory (in Greek υπνωτήριο meaning “place to sleep in”) for homeless people. In a rather impoverished area, away from the city center, the dormitory for homeless people seems “invisible” to most city dwellers. Thessalonikans ignore its presence: unknown, excluded, socially invisible as indeed homeless people seem to be, on the margins of modernity, living wasted, anonymous and liquid lives. Social policy and wellbeing (in Greek πρόνοια, meaning “caring for”) are some of the core issues discussed in this ethnographic account. Homeless people seem to be trapped in a complex situation; they often experience anger, distrust, dissatisfaction and at the same time they seem to engage in relations of mutual support and solidarity. However, it appears that caring is always in question, fluid and fragile and in most cases dysfunctional and inadequate.

The ethnographic study of the dormitory for the homeless in Thessaloniki broadens the discussion of liminality, precariousness and the “Big Ill State” which proves unable to provide long time care for those who need it. However, we are dealing with “homeless actors” who often challenge their marginality and strategically manage their homelessness. My attempt is to reveal the management of this liminal condition by homeless people themselves and thus to understand how they translate and embody homelessness and how they perceive notions of care, wellbeing and health. Covid-19 has made conditions more difficult as the pandemic and post-pandemic situations have created confusion and problems in the ways that those people are treated and cared for. The situation seems to get worse day by day: lack of state funding, economic crisis, and an increased inadequate social care.

My presentation aims to pay attention to the multiplicity and complexity of urban life on the margins of Europe, to engage with debates on inequality and homelessness, to problematize notions of care and wellbeing, to unpack conflicting understandings of different urban spaces as well as to de-code emotional and bodily experiences of the marginalized “other”.

Llopart i Olivella, Pol

Seeking Well-Being by Being-With. Care, Sociality, and Divine Closeness Among Sufis in the Serbian Sandžak

This paper investigates how Sufi disciples, particularly in the Serbian Sandžak, cultivate social relationships to mediate their proximity with God, and in doing so pursue spiritual and physical healing. Recent studies on the revival of contemporary Sufism in the post-Yugoslav space (Henig 2014) and Albania (Bria 2018) have focused on the disciplinary and spiritual companionship between masters (šejhovi) and disciples (derviši) as ways of “shaping” lives (Aždajić 2020) and “caring for the self” (Kostadinova 2018). While much attention has been devoted to relationships of discipleship as forms to treat the self afflicted by the separation of humans and God. Here, I propose to transcend the sociality of Sufi lodges (tekija), and in turn, look into forms of caring and “ethics of being-with” (Al-Mohammad 2011). In particular, I suggest looking at how Sufi disciples establish and maintain relationships with dead, ill, and poor people to mediate their closeness to God. These relationships entail visiting and supplicating at the graves of “good” dead individuals, an exchange of supplications with ill people, and serving and giving alms to the poor. Practices considered “good” and “doing good” if performed with a sensitive attitude and normative Islamic orientation. These practices and complex relations speak to repairing and harmonizing relationships between the self and others, motivated by and invariably entrenched with divine economies of blessing and care.

The presentation aims to critically engage with conceptualizations of care and well-being intertwined with emergent forms of religious sociality by looking within and beyond its circles. Exploring the synergies and tensions that arise from such understandings and practices with wider societies which Sufi disciples inhabit.

Locke, Peter

**The Weight of Survival: Fragments of Care in Sarajevo,
2007-2022**

The conflicts of the 1990s in the Balkans are now over twenty years past; media and humanitarian attention have long since moved elsewhere. Nevertheless, people throughout the region continue to live with a less visible kind of emergency—chronic, routinized, seemingly endless social crisis, punctuated by flare-ups set off by the impacts of neoliberalism (2008 global recession), protest movements (2014 protests in Bosnia-Herzegovina), and disasters (2014 floods, COVID-19). In Sarajevo, a city emblematic of the extremes of violence and resilience that have marked the wars in former Yugoslavia, economic instability, government dysfunction, and a steady flow of belligerent nationalist rhetoric from politicians have kept people feeling as if they are always on the edge of another war for at least two decades. While humanitarian psychiatry has amplified the role of trauma and post-traumatic stress in local semantic repertoires, framing the complex affects of life in post-everything Sarajevo as PTSD seems to render them less visible—or at least less urgent. Also by making them a known quantity, treatable and controllable, symptoms of psychological damage and social dysfunction rather than carriers of meaning and critique. In this presentation, I reflect on over a decade of close engagement with a local “psychosocial support” agency to explore some of the possibilities for care, for political transformation, and for social scientific understanding that are foreclosed by over-psychologizing what it means to live in, after, and through traumatic experience, both everyday and exceptional. As they find precarious ways of sustaining health, emotional resilience, and relations of care, Sarajevans challenge us to account for those psychosocial impacts of war, instability, and political stagnation that escape diagnostic categories—and advocate for the value of this ethnographic knowledge, both as complement and contrast to technical analyses, in contemporary economies of truth and policy-making.

Lukić, Atila & Maslov, Gordan

Is Thinking About a Healthy Body Possible?: A Contribution to a Possible Dialog

The healthy body and body care has become one of the central points of governing our contemporary societies. To say that the body is a product, and a fiction is a truism; not only that, the body lives in a history of constant reinscription, even more so, of reinvention. This fiction is a result or part of a process which is historical: to understand the body, one is inclined to think about it historically and in its "proper" context.

In this short paper we will try to pose a question; whether this truism has led us to being incautious regarding the methods of our inquiry. The context relating to our study is situated in a rather disputed imaginary geographical area of the Balkans, within the historical framework of the so-called transition from socialism. Drawing on public policy on the disability to discuss the practices of delineating bodies and contemporary analytics of biopolitics and capital(ism) for a discussion about the life of the body, we will enquire into the limits of Foucauldian influenced discourse analysis in a context defined by a lack of an archive.

Luleva, Ana

Precarity, Social Reproduction and Moral Economy of Care after State Socialism in Bulgaria

In the last decades there is an increasing growth of the precariat - people who live in insecurity, due to unstable sources of income and employment. The process is global, but within the EU Bulgaria is characterized both by a particularly high level of people at risk of poverty and social exclusion and a high percentage of working poor. The situation of precarity has not only economic dimensions; it affects all aspects of human life - the ability to have choices, planning the future and having life perspectives, and is experienced differently by different generations in various social spaces. All this makes it a relevant subject for anthropological research.

The object of my study is to investigate how people in Bulgaria experience, reflect on and cope with precarity through post-socialism. The ethnographically grounded research aims to highlight cultural models, norms, and values of social actors, as well as strategies for coping with precarity used by them. The study is based on the concepts of social reproduction and moral economy of care. It will contribute to the understanding of the current situation of precarity by using theoretical approaches originating in the economic anthropology of post-socialism, anthropology of uncertainty and moral anthropology.

Mijatović, Marina

Mistreatment of Women in Gynaecology and Obstetrics Institutions

Mistreatment of women in gynecology and obstetrics (O&G) institutions in Serbia has not been sufficiently addressed for more than a decade. No improvement has been made either in the protection of women in healthcare institutions or in the protection of their reproductive health and healthcare services. The quality is continually decreasing despite ample evidence that women are treated in such a way that their fundamental human rights are breached, being exposed to non-humane treatment, which might have fatal outcomes for women or babies.

For the competent institutions to act and to activate the mechanisms for the protection of rights in health institutions, three attorneys at law conducted the analysis of women's treatment in O&G institutions in Serbia. Analysis showed that their treatment was not in line with international regulations and standards, or with domestic norms. Out of all the analyzed reports of abuse, 76.36% of the cases were about verbal violence, poor communication, or disrespect towards the patients' personas. The performance of the Kristeller manoeuvre, vacuum extraction without informed consent, or forced episiotomy are frequent. Physical injuries are often results of torture and maltreatment whilst conducting medical treatments. The patients who described physical maltreatment stated that they had left health institutions with downright serious injuries to reproductive organs, some of whom had their wombs and ovaries removed. Most of the obstetric violence reports of abuse were submitted against the four greatest O&G institutions in the country. According to the reports, doctors were the ones who demonstrated violence in the greatest number of cases.

This presentation will outline the results from the analysis of abuse reports by women in public health O&G institutions in Serbia and recommendations to start to resolve the systemic problems of mistreatment of women in healthcare.

Miloš Pačelat, Maja; Kolarić, Branko; Ćorić, Tanja; Gusić, Kristina Minea; Arnaut, Karmen & Sajko, Dalma

Challenges and Needs of Informal Caregivers for the Elderly

Croatia is among the world countries with the largest proportion of older people. With the increase in the older population, the need for medical care of older people grows, which is negatively correlated with the capacity to cover their needs. In Croatia, the backbone of the long-term care system is the family, e.g. informal caregivers. The role of an informal caregiver necessarily leads to changes that can drastically affect their daily life. Estimates show that in EU countries the number of people providing informal care is at least twice as high as the number of formal caregivers. Along with the growing trends of deinstitutionalization of care, additional burdens are also growing for informal caregivers who are still not sufficiently recognized in the long-term care system.

- The aim of this research was to define the needs of informal caregivers and the challenges they face in the care process.
- Qualitative research was conducted using the focus group method.
- The focus groups were separated into a group whose participants are people who take care of a member of their family, and a focus group whose participants are experts involved in the process of caring for the elderly in their workplace. The data obtained from the research was classified into four main categories. The first category was organizational needs, then educational needs, then psychosocial needs, and the fourth category was the need for social recognition.

In order to be able to solve the problems of the growing trend of deinstitutionalization of care, it is essential to strengthen the role of informal caregivers. According to the data obtained from our research, it is necessary to improve the current structure of the education of informal caregivers, provide them with greater availability of support in psychological and socioeconomic aspects, and continuously evaluate and build on existing sources of help.

Molnar, Irena

Women living with HIV in the Republic of Serbia - impact of donor practice on policy and the quality of care

Despite progress in the field of HIV/AIDS, women living with HIV in Serbia continue to face significant challenges, including stigma, discrimination, and limited access to health and social services. Number of WLHIV in Serbia is 14% of the total number of people living with HIV, while data from the only research published in 2022. on WLHIV in Serbia shows that only 28% of them belong to the mentioned key population.

HIV prevention programs, as well as support programs for people living with HIV were, until mid-2014, supported by The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) through a project led by the Unit for the implementation of the GFATM project at the Ministry of Health (MoH). After the completion of the round, due to a lack of funding as a direct result of failure to meaningful transition from GFATM funds to Government funding, there was a reduction in activity for key populations at risk of HIV, as well as shutdown of many programs. MOH restarted the program supported by GTFAM back in 2019 in lower capacity, and many CSOs are operating grants from international Foundations and donors, however, until this day none of the implemented programs and services within them are focusing on women living with HIV. Preventive and support programs are failing to include services for women who do not belong to the key population - Sex Workers or Women Injecting Drugs, despite the high percentage of them not belonging to this population, while even for SW and WUD services are the same as for their male peers.

This presentation will have a closer look into how donor policies are shaping politics and practice of HIV/AIDS services services in Serbia, with special emphasis to what extent women living with HIV are lacking care in this equation.

Nared, Dagmar; Öztürk, Aslıhan & Kropivnik, Luka

**Racialized Care-Chains in Bosnian Border Towns:
(Re)Contextualizing Knowledge and Methodology in and of the
Balkans**

In recent developments, Bosnian border towns have been pushed into a center of what the European Union named a “migration crisis.” To this day, many people on the move (POM) that travel through the Balkan Route are stuck in Bosnian border towns due to often violent pushbacks from the Croatian police (Hameršak et al. 2020). Available research has mainly focused on lived experiences of people on the move on the Balkan Route (Augustova & Sapoch 2020), media representation and coverage (Lekić-Subašić 2018) and grassroots organizations and solidarity (Cantat 2021, Davies et al. 2021). However, critical insights on other actors involved in the POM care-chain is limited, especially concerning the Balkan peninsula. Furthermore, productive frameworks such as race and racialization processes, rather than ethnicity, are absent in the literature.

To further develop our understanding of actors within POM care-chains – e.g. international volunteers, POM, locals and tourists – and investigate Bosnia as a peripheral post-war and post-socialist country, we prioritize a perspective of racialization looking at care-chains in Bosnian border towns. We reintroduce and reinterpret often widely used concepts to describe the Balkans inside and outside of academia, such as Bosnian hospitality and komšilik. We reconceptualize racial triangulation (Parvulescu 2016) to make sense of racialization processes of different actors within these care-chains, through which we pose to override the redundancy of methodological nationalism. Our research supports De La Bellacasa’s argument that “Care can do good, but it can oppress.” (2017: 1) as well as contribute to theoretical and methodological conversations on race in the Balkans.

27-29 APRIL, UNIVERSITY OF ZADAR

Novakov-Ritchey, Christina

The Politics of Strah (Fear): Traditional Medicine and Balkan Capitalist Realism

Opening a dialog between traditional healing practices and critiques of the mental health paradigm under capitalism, this presentation analyzes the specific character of postsocialist strah (fear) in rural Macedonia. Strah (fear), a condition like, but distinct from, clinical depression, is frequently treated by traditional healers in the region. While folklorists have tended to abstract forms of traditional medicine from their material conditions, material conditions remain at the forefront of healers' minds.

Based on eighteen months of ethnographic fieldwork between 2016 and 2019, this presentation demonstrates how one of my collaborators contextualizes her healing practice using the frame of the "privatization of stress," as theorized by the late cultural critic Mark Fisher. Bringing in data on the astronomical rates of psychiatric drug consumption during the 1990s wars in former Yugoslavia. My paper presents healers' politicized models of stress and strah (fear) in the post socialist Balkans, which recognize the mutually dependent relationship between economic precarity and mental health. Post socialist institutional solutions for dealing with people's worsening economic conditions and mental health conditions have largely exacerbated, rather than ameliorated these problems. In this space of failure, the traditional healer steps in to put into practice a knowledge of health that is predicated upon what Judith Butler has called the body's vulnerability "to economics and to history" (2015, 148). While bare bodies may be equally vulnerable to so-called "chemical imbalances" in the brain, the bare body exists only as an abstraction—and chemical imbalances are the substance of medical fantasy, rather than reality. Real bodies have organs, varying access to capital, and are subject to varying degrees of exploitation. The traditional healer knows these truths, and recontextualizes individual suffering as a collective and systemic problem, rather than a matter of personal responsibility.

Parunov, Pavao

Who's "Making a Wish" and for What - Reconfiguring the Role of State in Croatian Systems for Elderly Care

As is the case in most of Europe, the system of elderly care in Croatia has relied on combining traditional state provided care, state supported care in the family and the market provided care. In the last two decades of Europeanization and accession to the EU, and being a post socialist state, Croatia has been continuously working to deinstitutionalize social policy from its strong tradition of social state to a state regulated care done by non-state actors: families, communities, and private businesses. The process successfully reflects the European Union's paradigm shift in social politics and ethics since entering the so-called "post-neoliberal" phase of working towards social inclusion based on social investments in the human capital. The shift has been characterized by moving away from the idea of the state being an ethical agent and provider of personal and collective well-being to a state regulating social politics through the lenses of economic growth.

In the last five years, Croatia spent more than half of its EU provided resources for social policy on the program "Zaželi" ("Make a Wish") which aims to secure informal elderly care in rural communities by employing women who are projected as unlikely to successfully compete in the labor market because of age, education and general socioeconomic background. The aim of the program is twofold as it functions both as an employment and elderly care policy. The program falls in line with other social policies being developed in the EU which all remain uncritical of its gendered structure as they continue to exploit women as main providers of care work.

The presentation will give a critical overview of the program, focusing on its organizational and practical implementation, and provide a research proposal for a single case study of looking into multilayered gendered aspects of elderly care which are being enacted in the community implementing the program.

Paska, Danijela

**Culture of Silence and the Medicalization of Women's
Experience: Reproductive Health Discourse**

Women's health is a powerful discursive field defined by others. In contemporary society, the field of women's health is defined through the power of biomedicine and the public health system, so this presentation will try to show the contemporary meaning of "women's health" in Croatia. The national pedagogy (Berlant 1997) of the Croatian society starts from the naturalized roles of women as mothers, therefore, within public policy, women's health is articulated primarily through the category of reproductive health in the field of gynecology. A woman's fertility, as the main element of her health, is a legal and medical category of national fantasy (Berlant 1997) in Croatia. The biomedical discourse dictates which behaviours, sufferings, feelings and pain are normal, legitimate or appropriate to display and experience, and which are undesirable (Foucault 1994). Such biomedical classifications are based on cultural beliefs and social norms within the dominant discourse (López 1998), which is why the experience of women during childbirth and/or abortion within public health in Croatia articulates a culture of silence.

Through the method of discursive analysis of public policies on women's reproductive health and by researching women's lived experiences, I analyze what knowledge, meanings, behaviours and categories are normalized about women's reproductive health in Croatia. For decades, the suffering and pain of women in health care were ignored and minimized. Therefore, in this presentation, I will discuss how the public health system cares for women during childbirth and/or abortion - what does care look like in practice in Croatia. The main goal is to show the complex social mechanisms of power that "inform" us about everything we "know about women's health", but more importantly, everything "we don't know".

27-29 APRIL, UNIVERSITY OF ZADAR

Peglidou, Athena

Care, Ageism, Femicide: Who Cares?

In 2021, according to the European Observatory on Femicide (E.O.F.), among the thirty femicides in Greece, twelve involved women over sixty-six years old who were murdered mainly by a son who was taking care of them, or they were taking care of him. However, most media and feminist organizations define femicides as only homicides committed in an intra-partner relationship. In the face of this misunderstanding or implicit interpretation, we should wonder why elderly women are not among the victims of femicides, even if they are potential victims of lethal violence. The research project initially aims to answer whether the femicides of the elderly differ from the femicides of younger women and what form they take in the Greek context? Old women are murdered both because they are old and because they are women (Weil 2017:31). Elderly widows are physically and emotionally abused, often deprived of their right to manage their property, and economically and socially disempowered. Given the missing data, our initial goal is to enrich the quantitative and qualitative data and deepen our knowledge of elderly femicide in Greece, in order to shed light on the conditions of abuse and exploitation in which they lived, and which ended by their vicious death. We tend an ethnographic description of meanings of care, home care, housing, motherhood, holiness and devotion while also taking into account the recent Covid -19 health crisis and the exposure of older persons to its social side effects with the lack of provision of public care services. The above fieldwork will offer empirical knowledge on the manifold gendered realities of care and a critical analysis of affection, femininity, motherhood, and ageing.

Petrović, Duško

Humanitarian Power vs Sovereignty

The paper describes the function and structure of the Croatian part of the Balkan refugee corridor and its influence on state sovereignty. The corridor was an example of the humanitarian space that spanned the borders and territories of sovereign states and was defined as a temporary one-way flow in which rights were partially and temporarily suspended (humanitarian exception). Also, it was dominated by care for bodies (health, nutrition, physical suffering, and pain) and the life of groups and individuals, but also supervision and the establishment of order.

In the paper, the author poses the question, was the establishment of the corridor an example of waning sovereignty, or was it a sign of its strength?

Pozniak, Romana

Humanitarianism and Social Reproduction: Ambivalences of Care Work in the Croatian Migration Regime

The policies of the Croatian border regime have affected the practices of civil society initiatives working on the protection of rights and providing humanitarian care for people on the move. Considering the context of the migration/refugee policies dichotomized between the apolitical aid distribution on the one hand, and the criminalization discourse that focuses on protection of state sovereignty and the territorial borders and on the other hand, the paper will look into the relationship between border regime and care regime in Croatia, while paying special attention to emotional labor invested by aid workers. Specifically, by relying on social reproduction theory, the presentation will aim to understand the role, ambiguities and political significance of care performed and/or exploited within the aid industry. Based on research I conducted about the work of NGO's as well as vernacular forms of humanitarianism (Brković 2017) at the Balkan migratory trail, the goal is to address and to re-conceptualize the ambivalence between the potential for subversion of affective/care labor invested in humanitarian and civil society organizations and the simultaneous participation of these organizations in a wider neoliberal regime of work. Finally, the paper will try to imagine and articulate a transformative position within the humanitarian field by exploring how the mentioned dichotomies manifest in the Croatian refugee aid workscape and what are the possible directions in overcoming them.

Prša, Anita

Spirituality and Religiosity of the End-of-Life Care: A Comparative Study of Volunteer Palliative Care Work in Austria and Croatia

In this paper I'm going to present early findings of my ethnographic field work conducted as a part of a broader doctoral research on the performance of volunteer care work for terminally ill clients in two European countries occupying central and peripheral economic roles within the continent – Austria and Croatia – where there has recently been a noticed similar (global) phenomenon, that is, the emergence of volunteer initiatives in arranging palliative care. I have chosen to compare the largest non-profit organizations in the capital of each country which provide this type of care. Given the religious (catholic) underpinning of the studied organizations and the fact that palliative care implies a specific emotional engagement often entangled with spiritual support, the aim is to discuss which kind of spirituality and set of feelings are nourished in each context to mobilize volunteer work. In so doing, the project builds from and contributes to the literatures on affective citizenship and humanitarianism that has noted a crucial shift in the formation of social citizenship from a rational entrepreneur of the self (Miller and Rose, 1990; Foucault et al., 2008) to the compassionate and other-oriented 'affective subject' (Fortier, 2010; Caldwell, 2016, Hoffman and St John, 2017) that have found a fertile soil in catholic settings and that have consequently induced the rise of volunteer engagement (Muehlebach, 2012). With that in mind, I interrogate how various socio-material conditions – such as levels of economic development, demographic compositions, and welfare mixes. I also consider the affect of conceptualization of volunteerism and volunteers' professional roles in the post-socialist context of Zagreb. As well as in the city with a strong legacy of the non-profit sector, and volunteerism, like Vienna. Therefore, such a comparative study has a potential to elucidate the working of religion and spirituality in governing palliative care and the labours of social reproduction in our social order more generally.

Puljak, Ana; Kolarić, Branko; Štajduhar, Dinko; Ćorić, Tanja; Miloš, Maja; Arnaut, Karmen & Sajko, Dalma

Control of the Consequences of the Pandemic and the Earthquake in Nursing Homes in the City of Zagreb

Program "Control of the Consequences of the Epidemic of COVID-19 and the Earthquake in Zagreb in Nursing Homes" was carried out during 2021 and 2022. Nurses employed in nursing homes are in daily contact with aging problems, diseases, and death of users. Difficulties, during the period of the Covid-19 pandemic and the earthquake, may have included: problem of staff shortages, insufficient education for the specific and diverse problems of the elderly, inadequate working conditions, specific cooperation with the family of the users and relations with colleagues in new working conditions and the capabilities of the organization itself - all of which together make it difficult to provide quality service to users and can negatively effect on the health of professionals.

This presentation will include an outline of the program which includes qualitative and quantitative research on sources of work stress that examine the relationship between the dimensions of burnout syndrome and job satisfaction; the dimension of burnout syndrome and the frequency of manifestations of occupational stress and detecting the use of personal protective mechanisms during a crisis. It also includes professional and methodological assistance, in creating one's own capacities in dealing with crisis events through intervention and supervision workshops for nurses. The long-term goals of this program are the protection of human resources in nursing homes in the City of Zagreb and improvement of care for users and was carried out by a public health specialist and psychotherapist, an epidemiology specialist, psychiatry specialist, a professor of social work, a sociologist and a nurse.

Račić, Jasna; Barada, Valerija; Puzek, Ivan & Čop, Blanka

Thinking about the Family: Conceptualization and Operationalization of Cognitive and Emotional Labor

In most housework and childcare studies, physical activities and tasks are extensively operationalized, measured and analyzed. However, a small number of usually qualitative studies raise the question of who is responsible for overall managing of the household, who plans and monitors tasks and who takes care of material and emotional needs of all of the members of the household. Researchers address these issues under the scope of miscellaneous concepts: household management, cognitive labor, mental labor, emotional labor and/or emotional management.

Building on existing findings, we address these invisible and often overlooked components of housework jointly as cognitive and emotional labor in managing the household (in Croatian: *kognitivno i emocionalno upravljanje kućanstvom*, *abb. KEUK*) that aims at achieving the well-being of household members. We propose a conceptual framework and a survey-based instrument for measuring cognitive and emotional labor in the household. In conceptualizing KEUK, we take into account its two dimensions: management of resources and time (cognitive labor) and the management of relationships and emotions (emotional labor). We recognize that this form of housework is located both within the household, but also in relation to relatives and the wider community and in relation to other institutions. Also, we focus our interest on the unit of household rather than specific members of the household (e.g. partners, children or elders), taking into account different types of habitation (multigenerational and multilocation households). Finally, with this kind of conceptualization, we explore the possibility of management flowing in different directions and taking several levels of activities' intensity.

Operationalization of KEUK was included in the research conducted as a part of the European Social Fund project Impact of Public Policies on the Quality of Family and Working Life and the Demographics of Croatia - Spaces of Change. A survey of parents of underage children in Croatia (N=3600) was conducted from November 2021 through January 2022. We present key findings from this data, assess its validity and reliability, and conclude with the implications for future housework research.

Gorgos, Raluca & Trifon, Maria

The Distance Between vs. Diaspora Repatriation During the Pandemic

When solidarity and mutual care were crucial to combat the COVID pandemic, the social fractures in Romanian society deepened strongly. The restrictions implemented during the state of emergency polarized the population, increased the tension between the state and its citizens, and unveiled some of the latent problems facing the Romanian society today. The Romanian diaspora who returned from abroad in a rush during that time has been caught up in this vortex. Portrayed by most of the public opinion as a danger to blame for the infection of the country with the Sars-Cov-2 virus, the returned diaspora had to learn how to cope with chaos, prejudice and misinformation, through which the authorities enforced their control and supervision of the repatriation. Using in-depth interviews and content analysis, our research documents the experiences of Romanians who returned from abroad during the state of emergency, from the border to the institutionalized quarantine site and back to their homes. We argue that the impact of the neoliberal policies implemented over the years has undermined the state's role and involvement in essential areas for a healthy and stable society. After the fall of communism in Romania, liberalization and decentralization have weakened authorities' responsiveness and adaptability to risks, leaving them without the appropriate tools to properly manage the epidemiological crisis at the beginning of 2020. Authorities tried to compensate for the medical system's shortcomings by militarizing public healthcare and large-scale mobilization of law enforcement institutions. The military strategies applied confusingly and sometimes abusively were perceived by our respondents as smokescreens behind which lies the state's structural inability to respond adequately to the emergent crisis. With an underfinanced and decentralized medical system, the fear of infection manifested as radical reactions towards the repatriated diaspora - both in terms of the harsh restrictions, and as expressed by online responses triggered by politicians' and media' rhetoric.

Ratković, Marija

Biopolitical Regulation: The Obstruction of Intimacy, Trust and Confidence. The Case of Women's Healthcare in the Post-Yugoslav Space

This paper departs from the behavioral research WITCH: Women's Trust and Confidence in the Health System, created by the Laboratory for Experimental Psychology within the Faculty for the Psychology University of Belgrade and the Centre for Biopolitical Education, and questions the context of reproductive healthcare in (post)transitional society, with the emphasis on abandoning the Yugoslav emancipatory politics in healthcare (1945-1995) in favor of earlier patriarchal modes of female patients' behavior (1990-2020). The WMA and the Codex of professional ethics of the Medical Chamber of Serbia clearly state, "It requires both the physician and the patient to be active participants in the healing process." Contrastingly, our research has led us to many unexpected findings as the concept of the passive patient. Our results indicate that trust in healthcare providers and the healthcare system correlates with the normalization of women patients' passivity, and — a paternalistic physician-patient relationship is present, accepted, and supported by patients. From the fifties to the nineties, we can trace the changes in the conceptualization of physician-patient relationships. Numerous declarations over the decades, including the Universal Declaration of Human Rights (1948), the WMA declarations of Geneva (1948), Helsinki (1964), and the Lisbon (1981), introduced slow but steady progress towards the empowerment of women. Our research lies on the earlier founded principles of (dis)covering biopolitics, reading the passivity normalization as a mode of (self)regulation of the female body. The presentation focuses on the biopolitical principles of the obstruction of intimacy and the private sphere by social regulatory mechanisms. It attempts to identify the events and societal switches societies went through (1945-1995-2020) as potentially relevant factors in the interpretation of outcomes in the 2020s.

Renaudeau, Eva

Therapeutic Mobilities of French Migrants in Romania

This paper departs from the behavioral research WITCH: Women's Trust and Confidence in the Health System, created by the Laboratory for Experimental Psychology within the Faculty for the Psychology University of Belgrade and the Centre for Biopolitical Education, and questions the context of reproductive healthcare in (post)transitional society, with the emphasis on abandoning the Yugoslav emancipatory politics in healthcare (1945-1995) in favor of earlier patriarchal modes of female patients' behavior (1990-2020). The WMA and the Codex of professional ethics of the Medical Chamber of Serbia clearly state, "It requires both the physician and the patient to be active participants in the healing process." Contrastingly, our research has led us to many unexpected findings as the concept of the passive patient. Our results indicate that trust in healthcare providers and the healthcare system correlates with the normalization of women patients' passivity, and — a paternalistic physician-patient relationship is present, accepted, and supported by patients. From the fifties to the nineties, we can trace the changes in the conceptualization of physician-patient relationships. Numerous declarations over the decades, including the Universal Declaration of Human Rights (1948), the WMA declarations of Geneva (1948), Helsinki (1964), and the Lisbon (1981), introduced slow but steady progress towards the empowerment of women. Our research lies on the earlier founded principles of (dis)covering biopolitics, reading the passivity normalization as a mode of (self)regulation of the female body. The presentation focuses on the biopolitical principles of the obstruction of intimacy and the private sphere by social regulatory mechanisms. It attempts to identify the events and societal switches societies went through (1945-1995-2020) as potentially relevant factors in the interpretation of outcomes in the 2020s.

Resanović, Milica & Toković, Milena

Culture as Care and Care for Culture During the Pandemic

Immediately after the COVID-19 virus pandemic broke out in Serbia, there were significant changes in the cultural sector. The pandemic affected the cultural sector in terms of prohibition of organizing events during the states of emergency, reduced number of visitors after the states of emergency, cancellation of projects that depended on international cooperation, and consequently the financial incomes decreased radically. Although the Government of the Republic of Serbia adopted a measure of non-refundable financial aid, numerous objections appeared in the public sphere that by this measure the Government did not manage to address the problems of cultural workers and some cultural organizations during the pandemic. Despite all the difficulties, including insufficient state support and cultural institutions, organizations tried to adapt to the new conditions and to offer content online, in order to continue their work and active communication with their audience.

This paper analyzes qualitative data collected in the project *The End of the Season Before the End of the Season? Strategies in the Cultural Sector in the Crisis* conducted by the Institute for Sociological Research of the Faculty of Philosophy, University of Belgrade. Drawing on qualitative interviews with twenty cultural workers from cultural areas that had been particularly threatened during the pandemic such as theater, festivals, cinemas, and museums, firstly we examine whether cultural workers conceptualized "culture as care". Specifically, it is analyzed how cultural workers connect their professional activities (or the lack of them) during the pandemic with the topic of community welfare in crisis conditions. In the second part of the analysis, the focus is shifted to the question of how this population perceives "care for culture" in crisis conditions. Therefore, it is examined whether they identify the state or other actors (civil society, citizens) as a provider of this care, and how they evaluate the contribution of the state and other actors in maintaining the cultural sector as a public good in practice.

Sakač, Marina

Menstrual Poverty in the Western Balkans. An Anthropological Discourse Analysis.

The objective of this research is to enhance our comprehension of menstrual experiences and menstrual poverty in the Western Balkans. The focus will be on examining social media discourse and popular online spaces where women and menstruators (including non-binary, queer, and trans individuals) discuss their experiences openly. The research intends to investigate the challenges and potential solutions that people face while grappling with menstrual poverty in the Western Balkans, a region that suffers from one of the highest rates of pink tax in Europe. Unfortunately, the COVID-19 pandemic has exacerbated the issue of menstrual poverty, forcing individuals to resort to unsanitary items like newspapers, socks, make-up pads, old rags, plastic bags, cotton balls, toilet paper, and old underwear. The lack of attention given to menstruation in anthropology has resulted in limited knowledge in the field, except for Miroslava Malešević's work on a specific ritual dating from the beginning of the 20th century in Serbia and former Yugoslavia. This project is motivated by recent cultural shifts (Rupi Kaur 2015, Khiran Ghandi 2016) and academic attitudes towards menstruation, with the aim of providing new and relevant data for studying a phenomenon that affects 1.8 billion people globally, or more precisely, fifty percent of the human population for forty years of their lives.

27-29 APRIL, UNIVERSITY OF ZADAR

Šantorić, Juraj

Motifs of Care and Nurture in the Performances of Vlasta Delimar, or What Artists Tell Us About Motherhood and Aging

Reflecting on the relationship between the concepts of care and nurture, I limit myself to the distinction in which I see care as a broader concept that integrates the dimension of concern and may or may not include the dimension of love, while nurture is a concept devoid of the feeling of concern that necessarily integrates love. Guided by the idea of understanding everyday life and the testimonies that emerge from it as a research substrate, I chose the performances of the independent feminists, Vlasta Delimar due to their genre orientation towards self-referentiality. The presentation was created based on an interview with Vlasta, and I focused on the phenomena of motherhood and aging as the fundamental motives for thinking about care and nurture in the context of the Balkans. The orientation towards female artists is a reflection of the Balkan context within which care, and nurture represent a dominantly female sphere. Women's honor is thus understood through the dimensions of the home, in which the woman is the bond of preservation of the family and the intergenerational caregiver of children and the elderly. It is difficult to separate the lives of female artists in the Balkans into private and work spheres, both because of the nature of their work and because of the gender roles that shape their everyday lives, assigning them care and nurture for family and home. On this track, Vlasta Delimar's everyday life as a mother, daughter, partner, and friend intertwines private and public performances whose narratives express care, nurture, concern, and love. The exhibition aims to shed light on the artist's testimonies about the social pressure on a woman, so-called worker out of love, presented in public discourse as a mother and queen, and in practice as a caregiver and an asexual old woman.

Šarić, Marija

From Labor to Love: Migrant Women's Experiences of Paid Care Work

Caregiving in the private household is becoming one of the largest sectors of employment for migrant women in Europe (Lutz, 2018). This fast-paced marketization of care was not followed with equally responsive introduction of regulations in working conditions or occupational standards. Due to this, migrant women working as caregivers oftentimes experience precarious work conditions, while at the same time vague meanings are attached to both the position of paid caregivers and paid care work itself. To better understand what paid care work means and entails for migrant women, this paper focuses on their perspectives and experiences of employment in caregiving abroad. The data was obtained as part of a wider project exploring international circular labor migration experiences of women from Slavonia, Croatia, who are employed in different sectors of work in Italy, Germany, and Austria. This presentation is based on the analysis of eleven narrative interviews conducted with women from fifty to seventy-six years of age who are employed as caregivers in private households. The findings demonstrate the ways in which the definitions of the migrants' caregiver positions are ambiguous, and with shifting boundaries, especially due to (unpaid) care work being attributed as women's work. This is firstly evidenced by a range of expressions which they use to describe their position more precisely, which not only disclose different boundaries of everyday work tasks they perform but also point to different approaches to their relationship with their client, principally with regards to intimacy and emotional labor involved in their caregiving. This is further complicated by an unstable, and at times volatile, relationship between caregivers, clients, and employers. Whether the migrant caregivers ground their approach to caregiving in their gendered everyday knowledge or in care as an occupation, they are involved in continual negotiation of professional boundaries with their clients and employers.

Šimunković, Gordana

Readiness of the Health System of the Republic of Croatia to Further Develop Pediatric Palliative Care

Healthcare policies in Croatia describe the needs for the development in pediatric palliative care. However, while needs are recognized they have gone unmet and unrealized. To understand why research was set to determine the current level of readiness of the Croatian health care system for the further development of pediatric palliative care. Two research questions were set: 1) What is the level of readiness of the Croatian health system for the further development of pediatric palliative care? and 2) What strategies would be applicable to move the Croatian health system to a higher level of readiness? To answer these questions the community readiness model was used, according to which the community is at a different measurable level of readiness to deal with a specific problem. Interviews were conducted with key stakeholders (the smallest number according to the model; N = 4) about the state and perspective of pediatric palliative care. The interviews were processed quantitatively according to the assessment list for determining the level of readiness and qualitatively by thematic analysis.

According to the obtained results, the healthcare system of the Republic of Croatia is at the fifth level of readiness, e.g. at the level of Preparation. This presentation will outline the findings of the thematic analysis and discuss possible interventions and strategies to improve palliative care for pediatric patients.

Štajduhar Dinko

What Doctors Do: Epistemology of Medicine and Medical Education

Medical profession found itself in continuous crisis over the last several decades, and that crisis is widely recognized and discussed, with sporadic attempts at changes in medical education curriculum aimed at reorienting doctors to a broader view of their own profession and constructing educational environments which would foster development in the capacity for empathic care in young doctors. In this presentation we will address some - in medical education - rarely asked but essential questions: What are the alternative possibilities for the understanding of knowledge as a basis for medical practice?, In which way an epistemological stance could influence relationship with patients, quality of care and ethics? Finally, we will shortly refer to innovative educational and research practices aimed at seeding these 'new' ideas into the medical academic community.

Starova Tahir, Eda

Public Healthcare Bureaucracies and Negotiating Notions of Care in North Macedonia

Public healthcare bureaucracies in North Macedonia are sites of individual political action in which power relations and social capital are continuously negotiated. Physical sites of administration are frequently tied to experiences of impatience and frustration, in which long lines, slow administrative workers and frequent line-stepping make bureaucratic activities a burdensome task. In that sense, it is not uncommon to discuss or attempt to avoid the arduous experience of healthcare bureaucracy in different ways. In some cases this may mean using personal connections (vrski) to get a task done faster or giving symbolic gifts to show care for the hospital staff, while in others it may mean showing visible discontent, raising voices or threatening action. In all cases, there is a specific learned experience of “going through the healthcare system”, understanding how one should act in order to receive care. By examining the “social lives” of healthcare bureaucracies in North Macedonia, we can explore how notions of care are defined in relation to imaginings of the State and in regard to one’s rights as well as responsibilities as a citizen. In that regard, by understanding how informal knowledge networks of navigating bureaucracies function, we can approach care not just as action directed from the care-giving institution to the patient, but rather as a process that is shaped from “both sides”, in which the patient employs specific knowledge and actions to negotiate the kind of care they receive.

Thiemann, André

Fledgling Farms and Failing Health: Transformations of Multispecies Labor and Care in the Serbian Raspberry Fields

In neoliberal frontiers like Serbia, until recently farming has functioned as a safety valve for the underemployed classes. Nevertheless global agriculture's transformations - including transnational competition, mechanization, and vertical integration - have reduced the number of farms, deflated rural wages and lowered consumer prices. Decades of post-socialist industrial policies of attracting foreign direct investments (FDI) through e.g. low ancillary labor costs and reduced environmental standards in industrial production have absorbed labor, if it has not emigrated altogether.

What effects have these economic transformations for public care, health and well-being in rural regions? Based on fieldwork on the global value chain of raspberries, I answer this question by shadowing the household of two brothers who professionally grow raspberries and cut firewood in South-Western Serbia. Both had a genetically transmittable disease (from which two of their brothers had died), were forced to do all the year-round labor themselves and found it increasingly difficult to attract labor for the harvest season. The presentation asks how the death of labor in the Serbian raspberry sector is entangled with social policies. It argues that recurring waves of neoliberal reform of social policy and a changing position vis-a-vis the EU have shattered the population's belief in regulatory governmental efficiency. The most recent wave of neoconservative transformation since 2012 has led to an emigration of unskilled and skilled labor, threatening the reproduction of the very farm labor necessary for the raspberries to thrive - and overall for the reproduction of a rural way of life. After outlining my theoretical approach to care and wellbeing and providing background information on Serbian social policy and social security practices, the paper studies the entanglement of these policies with the material demands of the raspberries and the workers. The final section details how the brothers experienced and shaped these circumstances.

van der Sijpt, Erica

Citizens, Customers, Critics: Birth Place Choices and Subjectivities in Post-Communist Romania

Over the last decades, Romania's birthing landscape has changed drastically, following post-communist neoliberal reforms (weakening state maternity care and introducing private birthing centers) and the rise of critical voices (promoting home births). This paper examines the birth place choices of future parents navigating this fragmented field. Combining insights from medical anthropology and post-communist studies, I claim that such choices offer a unique lens for illuminating wider societal dynamics. Based on fieldwork in three (semi-)urban locations, I show that, because of their distinct symbolic meanings and degrees of accessibility, the different birth settings – public hospitals, private clinics, and homes – are not only associated with different risks, but have also become markers of social identity, promoting different neoliberal subjectivities. Aside from trying to reduce vulnerabilities, finding the right birthplace in Romania is about positioning oneself in relation to others and the state in a context of post-communist social stratifications and political transformations.

Urošević, Milan

Therapy Culture and Self-Help Culture in Post-Socialist Countries of the Western Balkans – the Neoliberal Transition and New Imaginaries of Subjectivity

The existing research on therapy culture and self-help culture in the countries of the Western Balkans has so far been highly empirically oriented. Therefore, there is a noticeable lack of theoretical conceptualization and historical contextualization in the corpus of available research. By doing a metasyntesis of existing research on therapy culture and self-help culture in the countries of the Western Balkans we aim to develop an appropriate theoretical framework for their future study which would adequately relate these phenomenon to important historical developments in this part of Europe. This theoretical framework will be based on the conceptual apparatus of the "governmentality approach", adjusted for the study of post-socialist contexts. We will argue that, by using this approach, therapy culture and self-help culture in the Western Balkans can be best understood as a multiplicity of technologies of the self, that are used by citizens as instruments of adjusting their subjectivity in forms of neoliberal governmentality, adopted by their governments since the early 2000s. We will conclude by presenting some advantages and disadvantages of this theoretical framework.

Melada, Marija; Mojaš, Orsat; Štefok, Karolina & Rajković, Klara

Affective Care Among the Care Providers for the Elderly in Selected Institutions

Our paper will focus on health care workers who provide care for the elderly in Croatia. Specifically, care providers within nursing homes, hospitals, home care and monasteries where nuns are care providers for the elderly. Our blueprint will be the terminology which Elana D. Buch (2015) used in her work, and that would be the relation between affective and practical care among providers of institutional forms of care for the elderly and infirm. Our research questions are: 1) In what ways does the institutional dimensions of care (nursing homes and hospitals, monasteries) differ from the provision of home care that is state regulated through laws? 2) What is involved in such forms of care at the level of organization and services? 3) What demands do such forms of care place on care providers? And lastly, the differences and examples of affective (caring about, e.g. emotional support) and practical (caring for, caring through psychical action) care (Buch, 2015) among care providers for the elderly and infirm.

We will try to answer these questions by interviewing care providers and receivers. Secondary analysis will be based on desk research (literature reading, law analysis, media/news articles). Our goal is to encourage critical thinking about the selected forms of care (without saying which is ideal or better/worse, but to focus on the different forms of providing care and care in the selected institutions and why care is the way it is within each). On top of that our paper may raise awareness of the mentioned problem and possibly be an addition to literature in that specific topic.

Stanković, Biljana; Lukić, Peter; Stojadinović, Irena; Bogdanović, Jasmina & Vukčević Marković, Maša

Living as a Long-Term Psychiatric Service User in Serbia: The Importance of Community-Based Mental Health Support

The reform of the mental health care system in Serbia started fifteen years ago when significant advances were made at the level of national strategies and policies, advocating for the gradual transition from solely in-patient treatment to the development of community-based services, as well as improving the quality of life of people with psychosocial difficulties. However, the treatment of people with mental health problems is still based almost exclusively on the medical model and the provision of pharmacotherapy, often within closed psychiatric institutions, and with a very limited number of community support options available, especially outside of Belgrade. The COVID-19 pandemic has brought additional restrictions in terms of the availability and quality of mental health services. Therefore, people with mental health difficulties, especially those from psychotic spectrum disorders, remain an extremely underprivileged and socially invisible group in the Serbian context, facing a low quality of life because of poverty, social exclusion, stigmatization, and lack of care and support. This talk will rely on a qualitative study of the everyday experiences and quality of life of people diagnosed with a psychotic disorder, who have been users of psychiatric services for years (even decades), and are also users of some community-based mental health support programs. We will focus on both the challenges and difficulties they face and their strengths and resources, with the aim of highlighting the ways in which mental health community support can contribute to them leading a meaningful and fulfilled life (by providing structure, occupation, and the opportunity for creativity), maintaining some continuous social relationships, and experiencing a sense of agency and control as opposed to passivity and apathy. Finally, we will also address some unmet needs of this population in the local context, especially concerning self-organized associations of users of psychiatric services that work without systemic support.

SHORT BIOS AND CONTACTS

In the Frictions: Fragments of Care, Health, and Wellbeing in the Balkans

27-29 APRIL, UNIVERSITY OF ZADAR

Avramopoulou, Eirini. Eirini is the P.I. of the research project CovCare and Assistant Professor of Social Anthropology at Panteion University of Social and Political Sciences (Athens, Greece). Her research interests include anthropology of human rights, social movements and activism; feminist and psychoanalytic approaches to subjectivity, biopolitics and affect; displacement, refugeeness, asylums, care institutions and trauma. She is the author of *Porno-Graphics and Porno-Tactics: Desire, Affect and Representation in Pornography*, (co-edited with Irene Peano, 2016, Punctum Books), and of two edited volumes in Greek: *Affect in the Political: Subjectivities, Power and Inequalities in the Modern World* (2018, Nisos: Athens) and *Sexuality's Object(ion)s. Critical Theories, Interdisciplinary Readings* (co-edited with Aspa Chalkidou, 2022, Topos: Athens).

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Barada, Valerija. Valerija is an Associate Professor and the Head of Department of Sociology at University of Zadar. With the background in women's studies and as a feminist sociologist, she focuses most of her research at the intersection of gender and labour. She is currently heading research component of the project on work-life balance of parents of minors in Croatia, and is a part of COST action that deals with feminist interpretations of precarious platform work. Contact: vbarada@unizd.hr

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Nared, Dagmar. Dagmar is a sociologist and anthropologist, focusing on gender and visual ethnography. She is currently completing a Master's in Ethnology and Cultural Anthropology, during which she became a Fellow at the American-Slovenian Educational Foundation, as well as at the Institute of Ethnology and Folklore Studies in Zagreb on the project ERIM. Both fellowships consisted of researching and capturing the Refugee Balkan Route. The photo-series that resulted from her research received a departmental award. She is currently conducting research on young women's lives in Istanbul, an economically and socially tense environment, through self-determined staged portraits as a part of her master's thesis.
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Öztürk, Aslihan. Aslihan is a Social Sciences research master student at the University of Amsterdam and currently works as a research assistant for the NWO VICI project Engendering Europe's Muslim Question and the NWO-funded project The Race-Religion Constellation Project. Her current project investigates how race and racialization is contingent upon embodiment and affection through and beyond the somatic body, specifically in the historical context of the Ottoman Empire and the current Turkish Republic. By combining methodologies from Science and Technology Studies (STS) and Historical Sociology, she aims to understand how the theorization of race can be thought through in non-hegemonic contexts and become intersected with gender, sexuality, class, and Islamophobia.
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27-29 APRIL, UNIVERSITY OF ZADAR

SHORT BIOS AND CONTACTS

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Urošević, Milan. Milan is a Research Fellow at the Institute for Philosophy and Social Theory of the University of Belgrade and a Professor of Sociology of Culture at the Faculty for Musical Arts of the University of Arts in Belgrade. He got his PhD in Sociology from the Faculty of Philosophy of the University of Belgrade. The topic of his dissertation was Self-Help Culture as a Technology of the Self: The Discourse Analysis of Contemporary Self-Help Manuals. He has published his works in journals like Sociology, Sociological Review, Problems in Ethnology and Anthropology, Culture, Philosophy and Society. Contact: urosevicmilan1993@gmail.com

van der Sijpt, Erica. Erica is a Medical Anthropologist and Lecturer at the University of Amsterdam in the Netherlands, and a research affiliate at the University of Bucharest in Romania. Her research focuses on the ways in which people in various settings navigate the uncertainties of daily life, and of their reproductive trajectories in particular. Erica has published a monograph (Wasted Wombs: Navigating Reproductive Interruptions in Cameroon) and numerous articles on the intricacies of reproductive loss in both Cameroon and Romania. www.ericavandersijpt.com
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OTHER IMPORTANT INFORMATION

Lunch will be served in the Student restaurant Barbakan (address: Ruđera Boškovića 5). You can collect your lunch cards at the registration desk. Student volunteers will be happy to show you the way.

Informal gatherings are organized at the Cocktail bar Muro (address: Poljana Zemaljskog odbora 2). It is located in Francesco Drioli's house at the UNESCO-protected City Walls, where industrial-scale production of Maraschino first started. Infused with history, it overlooks the bay of Jazine which connects the Old town with the rest of the City of Zadar.

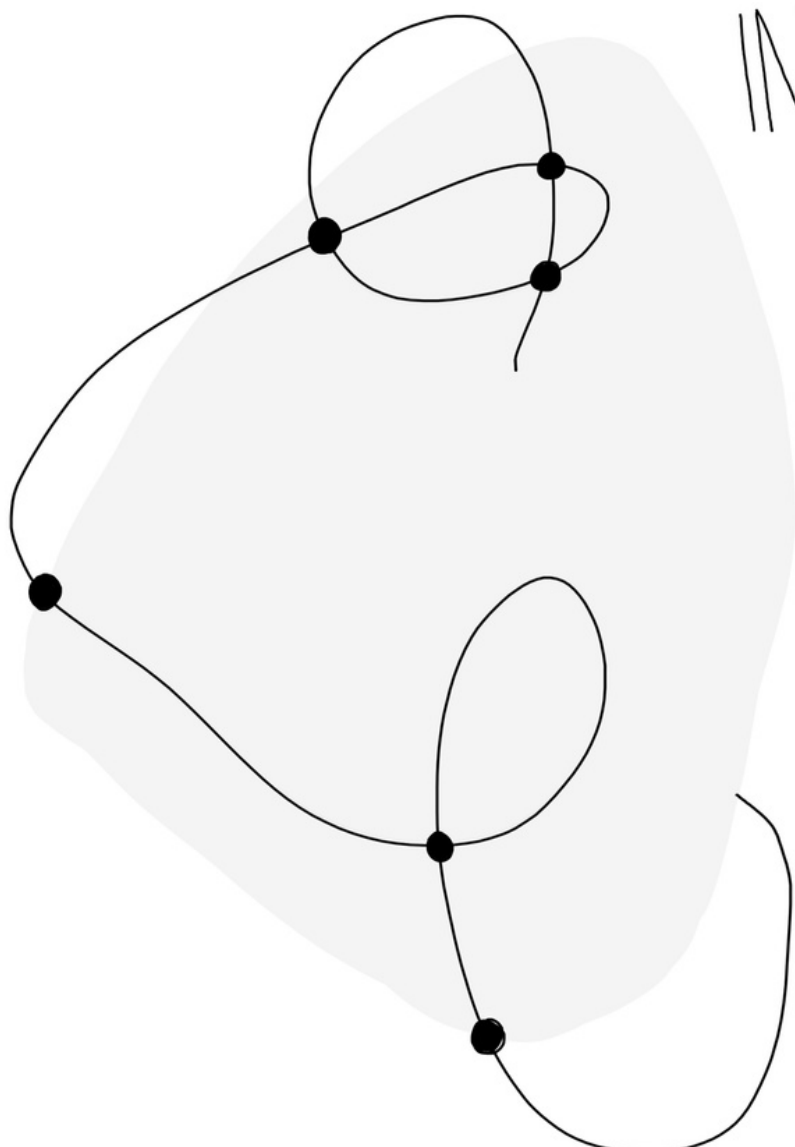




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