

# Notes on the Intersection Between Sociology and Public Health: A Reflection Triggered by the VAX-TRUST Project Final Round Table

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[journals.sagepub.com/home/sro](https://journals.sagepub.com/home/sro)**Ana Patrícia Hilário** 

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

**Fábio Rafael Augusto** 

Instituto de Ciências Sociais, Universidade de Lisboa, Lisboa, Portugal

**Piet Bracke**

Gent University, Belgium

**Mario Cardano**

Turin University, Italy

**Maurizio Esposito**

Università degli studi di Cassino e del Lazio Meridionale, Italy

**Dino Numerato**

Charles University, Czech Republic

**Paulina Polak**

Jagiellonian University, Poland

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**Corresponding author:**

Ana Patrícia Hilário, Centro Interdisciplinar de Ciências Sociais, Universidade de Évora (CICS.NOVA. UÉvora), Palácio do Vimioso, Largo Marquês de Marialva, 8, 7000-809 Évora, Portugal.

Email: [patriciahilario@gmail.com](mailto:patriciahilario@gmail.com)

**Abstract**

This article aims to provide a reflection triggered by a 'round table' discussion at the VAX-TRUST project final conference regarding the interconnection between health sociology and public health. This interconnection is characterized by complexity, as it involves navigating the various ways in which sociological perspectives can inform and contribute to our understanding of health issues and the development of health interventions. Within these discussions, a tapestry of challenges and triumphs has unfolded, offering a rich understanding of the sociological landscape within the realm of public health. Despite encountering obstacles, researchers have exhibited remarkable resilience and reflexivity, navigating through uncertainties with unwavering determination. The project demonstrated the effectiveness of collaborating with the public health field in devising concrete action plan, highlighting the importance of interdisciplinary engagement in driving meaningful progress in health and beyond.

**Keywords**

public health, round table, sociology, vaccine hesitancy

**Introduction**

Under the framework of the VAX-TRUST project, scholars from the field of health sociology and public health aimed to address the complexity of the phenomenon of vaccine hesitancy in seven European countries (Belgium, Czech Republic, Finland, Italy, Poland, Portugal, and the UK). The VAX-TRUST project intended to: (1) develop social scientific and context-sensitive research on vaccine hesitancy; (2) support healthcare professionals in their interaction with vaccine-hesitant parents; and (3) develop recommendations to address the phenomenon (Vuolanto et al., 2024). This project was grounded on the combination of the analysis of primary and secondary data on the phenomenon, the implementation of interventions, including their evaluation, and the development of recommendations to address vaccine hesitancy at the country and European level (Cardano et al., 2023; Vuolanto et al., 2024). Since the beginning of the design of the project, health sociologists have been confronted with issues arising from the interconnection of the project with the public health field. Historically, there has been a mismatch between scientific approaches and solutions presented by these two disciplines. Even in the case of sociology, the health field has been marked by the traditional distinction between 'sociology in medicine' and 'sociology of medicine' (Giarelli, 2012). The boundaries of science are often unclear, adaptable, shaped by history, influenced by context (Gieryn, 1983). The uncertainties and concerns experienced by sociologists were publicly discussed in a 'round table' discussion at the VAX-TRUST project final conference, bringing together team leaders from several participating countries. The VAX-TRUST project was developed on the understanding that the 'epistemological and political differences between social science and public health "are" productive opportunities' (Mykhalovskiy et al., 2019: 522). This article aims to provide a detailed account of the main themes discussed and how doubts regarding the interconnection between health sociology and public health were addressed along the project.

## Methodology

On 7 February 2024, at 2:45 p.m., a ‘round table’ discussion was convened at the University of Tampere in Finland, marking a significant segment of the final conference of the VAX-TRUST project. The ‘round table’ discussion lasted around 1 hour 30 minutes. Focused on ‘Sociology’s Role in Shaping Public Health Recommendations on Vaccine Hesitancy’ as outlined in the event program, the reflective exercise brought together six team leaders from the project, with a background in health sociology, and representing five European countries (Belgium, Czech Republic, Italy, Poland, and Portugal). Chaired by a team leader from Portugal, the debate unfolded over approximately 1 hour. To document this event for the creation of this article, we utilized a digital audio recorder and transcribed the entire dialogue. Subsequently, a thematic analysis (Braun and Clarke, 2006) was conducted, revealing key themes: (1) finding our place; (2) fighting for credibility; and (3) making a difference. In terms of ethics, informed consent was diligently obtained from all participants.

## Finding our place

During the discussion, participants delved into a challenge that surfaced in the early stages of the VAX-TRUST project’s development and persisted throughout the formulation and implementation of action strategies. As sociologists engaged in health research, specifically in the realm of vaccine hesitancy, challenges were voiced in securing a niche for research and actionable initiatives. Given the renewed focus on this research subject in recent years, a multitude of uncertainties surfaced regarding the theoretical and methodological tools available for mobilization, as well as the nature of interventions that could effectively address vaccine hesitancy with healthcare professionals:

As a sociologist, I was initially anxious about the project and our role in it. Then, it seems, my sociological nature took over the process. We were able to design an intervention rooted in understanding, which I believe is crucial for sociology – the ability to comprehend things. Understanding is one of the strong points of sociology, and I see this as the sociological contribution: to grasp and offer a perspective from the outside, adding a more understanding eye. (PP, Team Leader from Poland)

The anxiety and apprehension expressed by the Polish team leader resonated with several participants. The challenge of comprehending the role that a sociologist can occupy and contribute to in the realm of vaccine hesitancy ended up shaping the initial meetings among the various project members. The fact that it is a less apparent research topic within sociology contributed, in some way, to accentuating the aforementioned challenge:

If you belong to a general sociology department and are engaged in health-related topics, the challenge lies in demonstrating the relevance of these subjects to the broader field of sociology. Colleagues may question the focus on vaccine hesitancy, considering it is not a core topic in sociology. Therefore, the task is to develop a framework that enables the translation of our

specific research questions into broader sociological concepts, shedding light on the factors that drive human behavior. (PB, Team Leader from Belgium)

Expanding on this point, the team leader from the Czech Republic shared his struggle with reconciling his identity as a sociologist with the demands of conducting research in the health field and collaborating with professionals in that domain. He expressed the challenges he faced in navigating the interdisciplinary nature of his work, highlighting the tension between sociological perspectives and the established practices within the health sector. The team leader elaborated on the complexities he encountered when bridging the gap between sociology and health, emphasizing the need to navigate differing methodologies, languages, and priorities. He discussed the uncertainties he confronted regarding his role and contribution, particularly in contexts where sociological insights were not always readily understood or valued by healthcare professionals. Moreover, he reflected on the importance of establishing mutual respect and understanding between sociologists and healthcare practitioners, recognizing the need for effective communication and collaboration to address complex health issues like vaccine hesitancy:

I also experienced the need to find equilibrium not only within my department but also within the broader VAX-TRUST project. Balancing interactions with healthcare professionals became crucial, leading to a continuous process of clarifying and defining my role as a sociologist: What are my capabilities? How far can I go? What assertions can I make? Additionally, I had to manage expectations and always set the tone when meeting individuals from the public health or healthcare professional realms. I made it clear: 'I lack biomedical knowledge, and I won't challenge your expertise. My focus is on studying the processes surrounding biomedical knowledge and its negotiation, and that's why I am here'. Establishing a safe environment for discussion was prioritized over fostering a sense of surveillance. (DN, Team Leader from Czech Republic)

The necessity to clarify their professional roles to themselves and others, along with addressing inquiries about the potential contributions their involvement can offer to the research and its various stakeholders, served as guiding principles throughout the fieldwork. Several participants recounted engaging in discussions with organizations and actors in the realm of public health, delineating the functions they would undertake as sociologists and detailing the primarily methodological strategies they would employ. While this process concerning the sociologist's role is essential for visibility and clarification, it is crucial to forge partnerships and cultivate a trustworthy environment with the actors' integral to the research field. Conversely, some participants stressed that the constant need to justify the sociologist's role and elucidate associated contributions might stem from persistent prejudices and stereotypes about this field of knowledge, perpetuating a sense of inferiority among social scientists. These nuanced aspects will be explored in the subsequent section.

## **Fighting for credibility**

The challenges in defining the role of the sociologist in the context of vaccine hesitancy became pronounced when participants discussed their experiences with colleagues from

other fields who have downplayed the legitimacy of sociology. Unlike disciplines such as chemistry or physics, which are commonly regarded as ‘hard’ sciences due to their perceived objectivity and quantifiability, social sciences like sociology are frequently labeled as ‘soft’. This characterization implies a lesser degree of rigor and scientific validity, undermining the credibility and perceived relevance of sociological perspectives in addressing complex societal issues:

When contemplating the collaboration between sociology and public health, the prevalent notion often revolves around the partnership of ‘soft’ and ‘hard’ sciences, posing a potential challenge. While this is not my perspective, acknowledging this dual prejudice is vital. From a medical science standpoint, there exists a notion that sociology primarily deals with narratives, lacking theory and the capacity to grasp social reality. Conversely, there’s a different prejudice suggesting that medical science relies solely on numbers with a positivistic approach. Overcoming these biases is essential. (MC, Team Leader from Italy)

As highlighted in the excerpt, there are prevalent misconceptions about sociology, particularly its perceived limitations in addressing and influencing complex issues. As discussed during the ‘round table’ discussion, these misconceptions not only compel sociologists to constantly justify their role but also require them to strive for credibility across diverse fields. While the VAX-TRUST project did not encounter explicit challenges to the legitimacy of sociologists from healthcare professionals, some still felt compelled to validate their contributions:

The need to constantly justify my position may reflect a lack of a sociological self-confidence in an interdisciplinary and inter-professional context. It could have been my own prudency but as part of the research, I constantly felt the need to explain and reinforce my credibility as a social scientist who enters the field primarily – and understandably – controlled by medical doctors. (DN, Team Leader from Czech Republic)

This raised a crucial question during the debate: why must we consistently demonstrate our utility to others? One of the response hypotheses put forward was related to the questioning of the legitimacy of sociology:

Perhaps we, as sociologists, contribute to this prejudice. We often start from the assumption that healthcare professionals do not value our work, leading us to neglect opportunities for collaboration, like the one we experienced in the VAX-TRUST project. Despite the challenges posed by our diverse cultural backgrounds and contexts, as well as the need to collaborate across disciplines, we successfully navigated these obstacles. Therefore, we should all take pride in our participation and the project’s success. (APH, Team Leader from Portugal)

Some participants suggested that the apprehension that professionals from other fields might not appreciate the contributions of sociologists could deter them from actively seeking collaborations beyond the boundaries of social sciences. Conversely, this inclination toward closure may also stem from a shared belief among certain sociologists that they are self-sufficient and thus capable of addressing complex issues independently, without the need to engage with other disciplines:

Additionally, another challenge is the illusion of self-sufficiency. Sociology cannot autonomously address health-related issues, and the same holds for medical science, which may find it challenging to tackle complex issues like vaccine hesitancy solely through clinical instruments. Therefore, to bridge these disciplines effectively, it is crucial to demonstrate the mutual benefits of cooperation. The VAX-TRUST project exemplifies how the combination of diverse perspectives proves to be fruitful in addressing complex issues. (MC, Team Leader from Italy)

Associated with this illusion of self-sufficiency, there often emerges a tendency to assert complete control over both the investigative and intervention processes, a point underscored by the leader of the Belgian team. This inclination toward tight control may stem from a desire to maintain consistency, ensure adherence to established methodologies, and safeguard the integrity of the research or intervention. However, such a unilateral approach can inadvertently stifle innovation and limit the exploration of alternative perspectives, potentially hindering the project's overall effectiveness:

Sociologists possess the capacity to devise effective interventions, yet we cannot entirely govern the institutional dynamics that drive certain behaviors. One coping mechanism for dealing with this frustration is to concentrate on aspects within our control. For instance, there is often a heavy emphasis on training initiatives (interventions conducted as part of the VAX-TRUST project). But why do we perceive training as pivotal? Perhaps because, as educators, we wield influence over the realm of education. This mindset can lead to a misconception – the belief that we hold dominion over society and its mechanisms and that we are in complete control. (PB, Team Leader from Belgium)

This imperative to exert control may also be associated with a struggle for credibility. Confronted with the challenges previously delineated, which are intertwined with the discrediting of the social sciences, sociologists may feel compelled to demonstrate their ability to independently address complex issues, such as vaccine hesitancy. Subsequently, detailed reflections are offered concerning the specific actions that emanated from the research conducted during the VAX-TRUST project.

## **Making a difference**

To address vaccine hesitancy, the scientific findings from the VAX-TRUST project served as the cornerstone for devising various interventions targeted at healthcare professionals. These interventions were geared toward equipping these stakeholders with the requisite resources and expertise to effectively tackle this issue. The 'round table' discussion also provided a platform to deliberate on these interventions and their potential impact:

The role of sociology in shaping and constructing intricate public health interventions has proven immensely valuable to our efforts. Sociology offers a distinct perspective that enriches our understanding of complex societal issues. When crafting interventions, selecting an appropriate paradigm is crucial, and sociology provides valuable insight in this regard. Whether adopting a bounded rationalist paradigm, a top-down approach, or bottom-up one, sociology helps elucidate the implications of different paradigms. Moreover, sociology

facilitates the utilization of theoretical models, providing a framework to guide intervention design. In my view, sociological imagination, i.e. the awareness of the relationship between personal experience and the wider society, plays a pivotal role in synthesizing paradigms to structure interventions effectively. Moreover, as social scientists, we should not be reluctant to tackle disease also in its biological aspects and physiological manifestations. (ME, Team Leader from Italy)

The various participants involved in the discussion agreed on the idea that sociology does offer a different perspective. In addition, the various methodological and theoretical instruments that sociology mobilized to address the phenomenon of vaccine hesitancy were also positively evaluated:

For me, the focus has always been on understanding the processes and negotiations involved, as well as consistently demonstrating the value of our sociological and theoretically-based contributions. (DN, Team Leader from the Czech Republic)

Another significant contribution of sociology in understanding and addressing the phenomenon of vaccine hesitancy was the attainment of various levels of reflexivity during the project. Indeed, all participants commended the research's capacity to address different levels of analysis (i.e. micro, meso, and macro), as well as various stakeholders (i.e. healthcare authorities, organizations, and professionals):

What we've accomplished is the introduction of reflexivity seeds into the intervention context. This is a common practice in applied ethnography, where we immerse ourselves in the care setting, offering our critical perspective to trigger reflexivity among various stakeholders. (MC, Team Leader from Italy)

In practical terms, the VAX-TRUST project has not only generated valuable scientific evidence but has also translated this evidence into actionable recommendations. These recommendations are meticulously tailored to address the concerns and needs of the various stakeholders involved in addressing vaccine hesitancy. Drawing upon the robust body of scientific evidence collected throughout the project, these recommendations serve as a roadmap for stakeholders to navigate the complexities of vaccine hesitancy effectively. Participants unanimously acknowledge the profound significance of these recommendations, recognizing them as a pivotal outcome of the project. They underscore the immense added value these recommendations bring, affirming the tangible impact of the research conducted within the VAX-TRUST project:

We are not solely individuals who engage in abstract contemplation. As evidenced by our involvement in this project, we possess the capability to conduct profoundly impactful research that not only delves into theoretical frameworks but also produces tangible and influential outcomes. (ME, Team Leader from Italy)

In this regard, the insights shared by the team leader from Poland underscore the nuanced role of sociological research in addressing complex societal issues. While sociology offers valuable perspectives and methodologies for understanding multifaceted phenomena such as vaccine hesitancy, it also grapples with inherent limitations:



As sociologists, our unique perspective allows us to contribute significantly to understanding complex issues. We prioritize reflexivity and offer insights from our distinct viewpoints. For example, in analyzing vaccine hesitancy, we may to some degree overlook monetary aspects, whereas others may focus solely on them. Our strength lies in providing an alternative perspective, although often without an abundance of data or concrete answers. While this approach may seem disheartening, it fosters reflexivity and critical thinking, which are integral to our insights. (PP, Team Leader from Poland)

One of the primary challenges highlighted is sociology's tendency to provide rich insights rather than definitive and clear-cut answers. Unlike some scientific disciplines where empirical data often leads to straightforward conclusions, sociology navigates the intricate interplay of social dynamics, cultural contexts, and individual perceptions, making it challenging to offer conclusive solutions. This inherent complexity underscores the need for interdisciplinary collaboration, drawing from diverse fields to complement sociology's strengths and mitigate its limitations. By embracing this collaborative ethos, researchers can harness the depth of sociological inquiry while leveraging complementary perspectives to address pressing societal challenges more effectively.

## **Discussion**

The discussions held during the 'round table' discussion at the final conference of the VAX-TRUST project provided valuable insights into the intricate relationship between sociology and public health. This intersection is characterized by complexity, as it involves navigating the various ways sociological perspectives can inform and contribute to our understanding of health issues and the development of health interventions (Barros and Nunes, 2009). While there is widespread recognition of sociology's potential to provide unique insights, uncertainties persist regarding the approaches it can effectively employ in this domain (Mechanic, 1990). Diverse perceptions of sociology as a scientific discipline further compound these uncertainties, posing questions about its legitimacy and relevance within the context of public health (Amzat and Razum, 2014). Nevertheless, as it is widely known the boundaries of science are 'drawn and redrawn' sometimes in 'ambiguous ways' (Gieryn, 1983: 781).

Sociologists may encounter resistance or skepticism when attempting to explore certain topics, necessitating ongoing negotiation and advocacy to assert the importance of sociological perspectives in addressing complex health issues (Lewis et al., 2023). The dialogue among VAX-TRUST team leaders shed light on both the significant challenges and remarkable achievements in advancing research and implementing actions to address vaccine hesitancy.

The multifaceted nature of vaccine hesitancy presented obstacles, with researchers contending with various factors influencing it, such as socio-cultural beliefs, political influences, and misinformation campaigns (Cooper and Wiysonge, 2023). In addition, the absence of established frameworks within sociology compounded these challenges, highlighting the pressing need for methodological innovation and interdisciplinary collaboration (Karvonen et al., 2018). Despite these hurdles, the discussions underscored notable achievements in developing evidence-based recommendations and integrating sociological perspectives with insights from the public health discipline.



Participants also engaged in reflective dialogue regarding persistent biases surrounding sociology, acknowledging its often-dismissed reputation as a soft science (Shapin, 2022). They shared instances where they had to advocate for the credibility of their project and the roles of the sociologists involved. However, they also recognized biases within the discipline itself, contributing to a sense of self-perceived inferiority among sociologists. This introspection emphasized the imperative to confront internalized biases within sociology and reaffirm its potential to offer valuable insights into pressing societal challenges (Adeyanju, 2023; Machlup, 1988).

Reflecting on the project's impact, participants valued the incorporation of a sociological perspective, which provided unique insights and enhanced their reflexivity in clinical practice (Burton, 2016). They appreciated the diverse theoretical and methodological approaches employed, facilitating paradigm organization and the formulation of actionable strategies. Despite not always providing clear-cut solutions, sociology consistently contributes to dismantling the complexities inherent in its research topics (Gibbs, 2015). Moreover, the project demonstrated the effectiveness of collaborating with the public health field in devising concrete action plans, highlighting the importance of interdisciplinary engagement in driving meaningful progress in health and beyond (Pilnick, 2013).

## Conclusion

The dialogues among the team leaders of the VAX-TRUST project, conducted within the framework of a roundtable discussion, have brought profound insights into the intricate journey of addressing vaccine hesitancy through a sociological lens. Within these discussions, a tapestry of challenges and triumphs has unfolded, offering a rich understanding of the sociological landscape within the realm of public health. Despite encountering obstacles, researchers have exhibited remarkable resilience and reflexivity, navigating through uncertainties with unwavering determination. These dialogues have not only illuminated the complexities inherent in addressing vaccine hesitancy but have also emphasized the pivotal role of sociological perspectives in shaping interventions and policies to address vaccine hesitancy. The insights gleaned from the VAX-TRUST project will serve as a guiding light for future endeavors in health sociology. The discussion presented is very much aligned with Karvonen et al. (2018) statement that 'the sense of health sociology dictates a renewed role for the field – one that is more active and responsive, more transdisciplinary, unorthodox, and curious' (p. 4). The legacy of the VAX-TRUST project will endure as a testament to the transformative power of sociological inquiry for understanding and creating social solutions to address vaccine hesitancy. The reflection that took place in the 'round table' discussion and along the VAX-TRUST project more generally makes an important contribution to interdisciplinary debates between health sociology and public health. To understand and solve emerging and present global public health challenges, it is key to create bridges between these two disciplines.

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## ORCID iDs

Ana Patrícia Hilário  <https://orcid.org/0000-0001-7396-5127>

Fábio Rafael Augusto  <https://orcid.org/0000-0002-1957-2477>

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## Author biographies

Ana Patrícia Hilário is an Assistant Professor at Universidade de Évora and a Researcher at CICS.NOVA.UÉvora. Previously, she was a Research Fellow at the Instituto de Ciências Sociais, Universidade de Lisboa (ICS-ULisboa). She has been involved in several national and international projects in the sociological field of health and illness. She is the Co-Coordinator of the Research Network of Sociology of Health & Medicine. She has a PhD in Sociology from Royal Holloway, University of London.

Fábio Rafael Augusto (PhD) is a sociologist and currently a Research Fellow and Guest Lecturer at the University of Lisbon. He has contributed to several international research projects, including VAX-TRUST. His research explores sensitive topics and the challenges faced by vulnerable populations, with a particular emphasis on food assistance, inequality, poverty, social exclusion, and health concerns.

Piet Bracke is a Full Professor at the Department of Sociology of Gent University and is a Director of the Health and Demographic Research Group (Hedera). He has extensive experience in advanced quantitative and qualitative methods for the social sciences inside the field of population (mental) health. He is the former chair of European Society for Health and Medical Sociology, a member of the editorial board of several health sociological journals, and the former chair of the scientific advisory board of the European Social Survey.

Mario Cardano is a Full Professor on Qualitative Methods for Social Research and Sociology of Health at the Department of Culture Politics and Society of Turin University. His research has tackled two interwoven topics: the relationship between health and society and the methods and epistemologies of qualitative research. He has published several books and essays on qualitative methodology and Sociology of health. He is a board member of the Research Network of Sociology of Health and Medicine of the European Sociological Association.

Maurizio Esposito is Full professor of Sociology at University of Cassino and Lazio Meridionale–Italy. Coordinator of Bachelor and Master Degrees in Social Work. Co-ordinator of Master in ‘Health Project Management’. Director of the Bureau of Social Research. Professor of Healthcare Policies at LUISS University.

Dino Numerato is Associate Professor and Vice-Director for Research at Institute of Sociological Studies at the Faculty of Social Sciences, Charles University in Prague (Czech Republic). His research interests focus on the sociology of health and medicine and the sociology of sport. He was the Czech national coordinator in the VAX-TRUST project and currently is the co-principal investigator of the National Institute for Research on Socioeconomic Impacts of Diseases and Systemic Risks (SYRI).

Paulina Polak is Assistant Professor at the Institute of Sociology, Jagiellonian University in Krakow. She graduated in Sociology (Jagiellonian University) and European Studies (University of Exeter). She was a scholar at the European University Institute. Her research interests focus on problems of the public sphere, currently with the problems of discourse on health and health policy, including vaccination and anti-vaccination discourses.

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