



European Network for Social
and Emotional Competence

6th ENSEC Conference

Theme: **DiVerSiTy**

7–9 June 2017 | Stockholm, Sweden

Prepare yourself for an exciting pre-summer conference on developing youth social and emotional competences with a diversity perspective in the Swedish-Finnish archipelago.



Programme & Information



City of
Gothenburg



Dear Delegates,

It is our very great pleasure to welcome you to the 6th ENSEC Conference.

ENSEC was founded by Professor Paul Cooper and Professor Carmel Cefai in Malta in 2007. Since then we have held successful conferences in Turkey, England, Croatia and Portugal. However, this is our first conference on a ship. We hope you will have a very pleasant conference and will enjoy both the formal and informal opportunities for discussions and networking, as well as the social programme.

The theme of the conference is diversity. Perhaps there has never been a more important time to address the complex issues that we all face throughout the world in this time of tremendous change and mass flight of people. Children and young people are particularly vulnerable and they are the focus of our conference.

Our international speakers will provide us with their diverse perspectives and there will be many opportunities to exchange views with delegates from all over the world. We would encourage you to join ENSEC, if you have not done so already. Membership is without charge and offers regular newsletters and opportunities to network with professionals from across Europe and afar.

The network is managed by the members for the members. There will be a member's meeting on 9 June at 13.30. Afterwards, the ENSEC Board Members will be available to answer questions about the network during the conference.

Welcome
ENSEC Board



Professor **Carmel Cefai**,
Director, Centre for Resilience
and Socio-Emotional Health,
University of Malta.



Carmen Huser, PhD candidate,
Charles Sturt University, Faculty
of Arts and Education,
Australia/ Germany.



Professor **Helen Cowie**, PhD,
University of Surrey, Faculty of
Health and Medical Sciences UK.
Director of the UK Observatory for
the Promotion of Non-Violence.



Professor **Renata Miljevic**
Ridicki, Faculty of Teacher
Education, University of
Zagreb, Croatia.



Kathy Evans, Senior Lecturer,
University of South Wales,
Newport, UK.



Professor **Celeste Simões**,
University of Lisbon, Faculty of
Human Kinetics, Portugal.

G16 | B31 | Seminar Groups**Preventable diseases. Psychomotor therapy. Stigmas and diversity.****Childhood Obesity and Bullying: The Construction of 'Fatness' as a Deficiency.**

Wendy Sims-Schouten¹ and Helen Cowie²

¹School of Education and Childhood Studies, University of Portsmouth, Portsmouth.

²Faculty of Health and Medical Sciences, University of Surrey, Surrey.

Chair: Professor Helen Cowie, PhD, University of Surrey, Faculty of Health and Medical Sciences UK. Director of the UK Observatory for the Promotion of Non-Violence.

In this paper we explore narratives in relation to childhood obesity and bullying, drawing on focus group interviews with parents, early years practitioners, teachers and young people (N=56). The study is located in a larger study on bullying and resilience, with no specific focus on obesity or 'fatness'. The findings show how childhood obesity is being made an issue through the use of labels and stigmas, such as the 'fat kid', 'fat shit', and 'bigger children' and by hinting at 'fatness' as a deficiency. Our research shows how stigmatising children with weight issues can drive that child and their family into denial, social withdrawal, self-loathing and low self-esteem. On the continuum running from 'large' to 'overweight' and 'clinically obese', there will be points where it is in the child's best interests to intervene in order to prevent later acute health problems. Yet, any solution that we consider must take account of the complex interacting social factors that contribute to one particular child's body size.

G16 | B31 | Seminar Groups**Preventable diseases. Psychomotor therapy. Stigmas and diversity.****Vaccination indicators of measles, hepatitis B and tetanus a look beyond borders.**

Celeste Antão¹, Augusta Veiga-Branco², Ana Maria Galdes Pereira³, Zélia Anastácio⁴ and Eugénia Anes¹

¹Nursing, IPB, Bragança.

²Social Sciences and Behavior, IPB, Bragança.

³Technology Department, IPB, Bragança.

⁴IC, University of Minho, Braga.

Chair: Professor Helen Cowie, PhD, University of Surrey, Faculty of Health and Medical Sciences UK. Director of the UK Observatory for the Promotion of Non-Violence.

Vaccination is one of the best ways parents can protect infants, children and teens from many potentially harmful diseases. Vaccine-preventable diseases can be very serious, may require hospitalization, or even be deadly, especially in infants and young children.

Aim: To analyze rates of vaccination measles, hepatitis B and tetanus in each country and compare with the European average.

Method: Descriptive study. The data were taken from the Health for All Database (who) rate of vaccination of Portugal, Lithuania, Spain, Romania, and Croatia.

Results: In Portugal the rate of vaccination against measles between 2002 and 2014 is always upper than Europe, except in 2010 (96%). Comparing with Spain, Romania, Croatia and Lithuania, Portugal in 2002 have a Lowest rate, but after 2013 increase to 98%. Vaccination rate against tetanus in 2002 and 2015 to Portugal is 94% and 98%. Comparing Portugal with the European average presents always Higher rates, except in 2005 (95%). Children vaccinated against hepatitis B, In 2002 Romania had the best vaccination rate of 99%. In 2015 is Portugal the country with the best vaccination rate (98%).

Conclusion: Compliance with the vaccination programs are the most effective weapon to promote fairness, equality and prevent diseases.