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Editorial: Special Issue on Society, Environment and Health

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Editorial: Special Issue on *Society, Environment and Health*

Sara MacBride-Stewart; Catherine Butler; Nick J Fox

This special issue explores the interactions between environment, health and society, and reflects the journal's interdisciplinary focus – with articles that address a wide range of social scientific concerns and approaches.

It is well established that natural environments affect human health and wellbeing. Discussions of this relationship have often, however, been overly deterministic, focusing upon environment-related social determinants of health such as the neighbourhood, transport and so forth (Spaargen and Mol, 1992). This determinism is at odds with developments that have led to the emergence of new understandings of the environment, informed by disciplines including anthropology, geography, Science and Technology Studies (STS) and environmental sciences. In these perspectives, the environment is more than a resource, it is a dynamic geographic space, invested with cultural and social meaning, and a sense of identity (Hunziker et al., 2007). The conceptual and methodological needs of this new account of the environment within the social sciences constitutes an important development requiring a much needed and necessary expansion attentive to the interactions between society, the environment, and the social dimensions of health. This issue of the journal variously addresses this re-definition of the environment, and its social impacts on health, through the different theories, case studies and perspectives of its contributors.

In recent years, the interactions between the natural environment and human health have become the focus for social analyses within a burgeoning body of academic research addressing a wide range of institutional and personal practices, health discourses, and forms of medical or health expertise. They are also the subject of national and international policy initiatives, for example around environmental protection and public health, sustainable development, and co-benefits of health or environment initiatives. This ferment of activity has, however, frequently perpetuated the view that health can be studied as a true object, and that closer scrutiny in a wider range of environmental contexts can uncover its functional and structural antecedents for the benefits of improving health as an outcome. Key research findings in this respect have shown, for example, the links between proximity to blue or green space and positive mental and physical health outcomes (Wheeler et al., 2012; Maas et al. 2006). Addressing the complex and intertwined way in which different environments are socially shaped or experienced provides an opportunity to think again about how

health impacts may be variably defined, constituted, or contested (Irwin, 2013). Central to this is a recognition that the environment and its impacts on health may well be interpreted and experienced differently across social groups (Butler et al. 2018; MacBride-Stewart et al., 2016).

As editors of this special issue we have a particular concern with the ways in which the social sciences are contributing to this reframing of human health and the environment. Our interests include how to acknowledge their mutual interaction and co-production, in contrast to a long standing tradition of treating the natural and the social as distinct domains (Fox and Alldred, 2016; Marsden, 2018). These interactions between society, health and environment have been discussed within British Sociological Association *Environment and Health* and *Climate Change* study group conferences in 2016 and 2017, and are core to several of the papers within this special issue.

The seven papers collected here offer readers of this journal an insight into contemporary social research into environment and health, and develop connections to public health concerns with the physical environment, both natural and built. They do not seek directly to address the social aspects of environmental change, nor do they – only a short period after the publication of the latest IPPC report on climate change (IPCC, 2018) – heighten awareness of the significant environmental crisis facing human health. The authors instead ask what institutional and personal practices, meanings and (bodily or expert) knowledges about health and the environment shape our understandings of health. Some go further to engage more critically in attempts to articulate and understand how environmental matters are defined and negotiated in everyday policy and science talk, and importantly within the institutions of medicine. Others have considered the processes that discursively or materially establish the relationships between health and the environment. Health is defined broadly – characterised by some of the contributors in quite traditional terms, while others have anchored their understandings within frameworks or networks that seek to re-establish new relations between the environment and society.

In terms of their concerns, the papers may be differentiated into three cross-cutting themes or threads. Those in the first of these threads address issues concerning the interactions between landscape, natural environment, and health (Yuill et al; MacBride-Stewart; Lawrence). They offer methodological and conceptual means to understand the environment as a dynamic space of interactions that integrates the social, physical/material aspects of health, and wellbeing.

Both Yuill et al and MacBride-Stewart identify the importance of a landscape concept for engaging a phenomenological account of how physical spaces are experienced and productive of health and wellbeing. These authors use empirical examples to show how the conceptual understanding of landscape can meaningfully be deployed for health. In their exploration of the lives of people in Xuan Thuy National Park in Vietnam, Yuill et al argue that it is *landscape* that constitutes the various elements of where people live and that affect their wellbeing. So, for example, the potential for a landscape to flood is what disrupts agricultural practices and produces poor health. For MacBride-Stewart, the landscape of protected areas in New Zealand and the UK provides both sensory and textual qualities, which are actively sought out by runners in an active pursuit of wellbeing. In this case, the landscape is argued to be a coupling of affects and social practices, which engage with fleshy bodies and the particular qualities of the environment to give rise to positively perceived health.

Lawrence's analysis of existing conceptual models that address the interrelations between human activities in green spaces, and human health and wellbeing, supports the arguments of the MacBride-Stewart and Yuill et al. papers concerning the importance of incorporating both human agency and the societal conditions of everyday life into research. However, Lawrence suggests that while processes of linear causality dominate conceptual understandings of the relationships between green space and health, there remains a lack of consensus on the nature of the relations between the two variables and the extent to which any existing models incorporate the possibility of feedback loops.

Along with the paper by MacBride-Stewart, Baur's article reflects a second thread within this issue: a focus on the psychosocial aspects of health and illness. These papers explore the ways in which atmospheric conditions (for Baur, quite literally the weather and temperature) link the indeterminate nature of an experience of an environment to the sensation of actively 'being in' a place. Baur's study of mental health institutions in the 19th and early 20th centuries explores how discourses on the beneficial and pathological effects of atmospheric conditions transcended medical boundaries. These discourses became deeply entrenched in everyday concerns about the aetiology and therapy of mental illness, as revealed through personal narratives and oral histories. For MacBride-Stewart, the concern with atmosphere is extended to understanding the 'affective mood

which spatial arrangements stir in the sensual bodies of their users' (Reckwitz, 2012: 255 cited in MacBride-Stewart).

The authors in the final group of papers (Bowling and Hall; Maguire et al.; Garnett et al.) do not limit their exploration of environment and health to a study of social challenges and health impacts. Rather – and borrowing from Critical Policy Studies and Science and Technology studies, they review the framing and process of constructing 'environmental health' problems as a key aspect of sociological work. They examine the processes that determine what counts as an environmental issue for health, providing examples and conceptual legitimacy for this as an area of social scientific study.

For Bowling and Hall, global public health practices related to sustainable management of water and sanitation are informed by assessments of 'best practice'. They identify the problems in recording and monitoring best practice in the case of rural water provision and, based on their review of the academic literature, they propose an interconnected process and a multifaceted response. Their main claim is that not only that bottom-up, community based, participatory approaches are important for effective rural water management, but they must also incorporate problem-definition in their development processes, as well as being based within a framework for community participation and a strong regulatory environment. Their paper offers a critical assessment of what constitutes best practice, rather than taking it as self-evident.

Similarly Maguire et al look at the internal processes and discourses of public involvement in research about environmental change. They note the potential for public participation processes in environmental research to change the relationships between the public, health policy, and academic knowledge. However, in order to be effective, public participation processes need to be located within the wider social and political landscape that actively engages both scientific and relational thinking. They argue that many groups – including the one they were researching – still fail to meet that ideal.

Finally, in their paper, Garnett et al offer a nuanced account of the research-policy interface in their study of an interdisciplinary research project on air pollution and human health. They find that research and policy were invariably entangled, but that the air pollution/health relationship was

ultimately framed by the capacity of the researchers included in the process to act; that is, to define, model, and measure the air pollutant being studied. Framing air pollution in this way meant that 'some health dimensions, emissions sources and pollutants were not included'; consequently socio-economic inequalities and domestic use were not prioritised because of a lack of available evidence. They show that by paying attention to the particular ways in which an environmental impact upon health is made visible, it is possible to identify what is and what is not included in accounts about impact. They conclude that there is also a need to find practical ways of achieving impact – a concern shared with the other papers in this thread.

In different ways the articles in this issue open up key questions about what the relationship between the study of health and the analysis of environment should be. These contributions, we would suggest, not only reflect the vibrancy of current scholarship on environment, society and health, but also establish firm foundations for the future interdisciplinary direction of this important area of study.

References

Butler C, Adger N and Walker-Springett K (2018) Narratives of recovery after floods: Mental health, institutions, and intervention. *Social Science and Medicine* 216: 67-73.

Fox NJ and Alldred P (2016). Sociology, environment and health: a materialist approach. *Public Health* 141: 287-293.

Hunziker M, Buchecke M, and Hartig T (2007) Space and place - two aspects of the human-landscape relationship. In F Kienast, O Wildi and S Ghosh (Eds.), *A changing world. Challenges for landscape research*, Dordrecht: Springer, 47-62.

IPCC (2018) *Global Warming of 1.5°C*. Accessed 01 Nov 2018, www.ipcc.ch/report/sr15/

Irwin A (2013) *Sociology and the environment: a critical introduction to society, nature and knowledge*. John Wiley & Sons.

Maas J, Verheij RA,Groenewegen PP *et al* (2006) Green space, urbanity, and health: how strong is the relation? *Journal of Epidemiology & Community Health* 60**:** 587-592.

MacBride-Stewart S, Gong Y and Antell J (2016) Exploring the interconnections between gender, health and nature. *Public Health* 141: 279-286.

Marsden T (2018) *The Sage Handbook of Nature*. London: Sage.

Spaargaren G and Mol APJ (1992) Sociology, environment, and modernity: Ecological modernization as a theory of social change *Society & Natural Resources* 5(4): 323-344.

Wheeler BW, White M, Stahl-Timmins Wand Depledge MH (2012) Does living by the coast improve health and wellbeing? *Health and Place* 18(5): 1198 – 1201.