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## What shape is your neighbourhood? Investigating the micro geographies of physical activity

Vivienne C. Ivory<sup>a,\*</sup>, Marie Russell<sup>a</sup>, Karen Witten<sup>b</sup>, Carolyn M. Hooper<sup>a</sup>, Jamie Pearce<sup>c</sup>, Tony Blakely<sup>a</sup>

<sup>a</sup> Health Inequalities Research Programme, Department of Public Health, University of Otago, Wellington, New Zealand

<sup>b</sup> SHORE and Whariki Research Centre, School of Public Health, Massey University, Wellesley Street, Auckland, New Zealand

<sup>c</sup> Centre for Research on Environment, Society and Health, School of Geosciences, University of Edinburgh, Edinburgh, United Kingdom

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## ABSTRACT

Being physically active has demonstrated health benefits, and more walkable neighbourhoods can potentially increase physical activity. Yet not all neighbourhoods provide opportunities for active lifestyles. This paper examines the social context of being active in local and non-local places. We use a social practice theoretical framework to examine how residents talk about and make sense of physical activity and places, contrasting individual and neighbourhood factors. In 2010, fourteen focus groups were held in four neighbourhoods varying by walkability and area-level deprivation (two Auckland and two Wellington, New Zealand), and with participants grouped by gender, ethnicity, and employment. Focus groups elicited discussion on where local residents go for physical activity, and the opportunities and barriers to physical activity in their local area and beyond. Thematic analyses compared across all groups for contrasts and similarities in the issues discussed.

Neighbourhood walkability factors appeared to shape where residents engage with public places, with residents seeking out good places. Individual factors (e.g. employment status) also influenced how residents engage with their local neighbourhoods. All groups referred to being active in places both close by and further afield, but residents in less walkable neighbourhoods with fewer local destinations drew attention to the need to go elsewhere, notably for exercise, being social, and to be in pleasant, restorative environments. Being physically active in public settings was valued for social connection and mental restoration, over and above specifically 'health' reasons. Residents talk about being active in local and non-local places revealed agency in how they managed the limitations and opportunities within their immediate residential setting. That is, factors of place and people contributed to the 'shape' of everyday residential environments, at least with regard to physical activity.

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### 1. Background

Being physically active has demonstrated physical and mental health benefits. Residing in neighbourhoods that are more walkable and with better access to greenspace and local transport infrastructure has been associated with increased overall physical activity (Ball et al., 2007; Giles-Corti et al., 2009; Sallis et al., 2009; Witten et al., 2012). However, deeper understanding of the social determinants of health behaviours such as walking and cycling for

transport, exercise, and physically active recreation requires a broad range of epistemological and methodological approaches. If we want to ask why and how contexts come to influence (or not) individual health (Poland et al., 2006) we also need to scrutinise the significance of every day place-based practise and experience, the meanings ascribed to neighbourhoods by local residents, and the multi-scalar processes which operate to affect how they negotiate their local neighbourhood. This paper contributes to these debates by examining the social context of physical activity, particularly with respect to the specific role played by residential settings alongside other environments in shaping the geography of engagement with places through being physically active.

In the following discussion of the background literature we explore how social practice can be used as a way of examining the

\* Corresponding author. Health Inequalities Research Programme, Department of Public Health, University of Otago, PO Box 7343, Wellington South, New Zealand.  
E-mail address: [Vivienne.ivory@otago.ac.nz](mailto:Vivienne.ivory@otago.ac.nz) (V.C. Ivory).

recursive relationship between people and place through activity. We then consider how the neighbourhood environment itself might structure what is more or less possible for residents, and what that might mean for residents mobility to local and non-local places. Lastly, we look at what distance might mean for engagement with different places.

### 1.1. Engaging in places through activity

Investigating how people interact with places through being physically active can reveal why engaging in residential and non-residential places might matter for health. This more “relational” approach sees people and place as intertwined rather than seeing the neighbourhood as separate entities from residents (Cummins et al., 2007). Cockerham (2005) Macintyre et al. (2002), Bernard et al. (2007) and Frohlich et al. (2001) were similarly interested in examining the recursive nature of the processes between the structural aspects of neighbourhood and the practices of residents; “Place cannot influence social practices without groups of people who are influencing place through their social practices.” (Frohlich et al., 2001, p. 792). They argue that it is not enough to observe the effect of structures on individual practices, but that we need to observe how the process of everyday activity feeds back into the nature of the structures themselves, and then sets up new conditions for practices and so on. For example, the built environment can be seen as a reflection of accumulated social practices of a community, which in turn goes on to influence the current practices of residents, and so it goes on.

Calling on social practice frameworks Frohlich et al. (2001) proposed that what people do as part of their routine, everyday activities arises from their context, and at the same time recursively transforms that context. In this conceptualisation ‘neighbourhood’ is framed as one geographic context of residents’ social practices; “Collective lifestyles are defined here not just as the behaviours that people engage in, but rather, as the relationship between people’s social conditions and their social practices.” (Frohlich et al., 2001, p. 785). Distinctive local cultures can emerge that affect individual behaviours, and also influence how meanings are derived from such experiences (Thompson et al., 2007). Taking a social practice approach also recognises that behaviours and practices form part of the (micro) episodes of everyday life and that ‘place’ can simultaneously both condition and be shaped by human behaviours such as physical activity.

Viewing physical activity as a social practice is particularly relevant given its role in our everyday lives through active (for example, walking) and passive (for example, cars) forms of transport, and exercise and recreation. With regard to transport-related activity, seeing commuting by car, cycle, walking or public transport as a social practice allows it to be observed within the broader social context of work and home as well as the urban environment (Guell et al., 2012). Guell et al.’s (2012) work highlights how individuals manage and make sense of their commuting within this context, but also how they are influenced by and in turn influence the physical and social environment around them what is happening around them.

... the travel choices made by individuals moving through a shared transport network help to shape the context in which others make their decisions, as cyclists engage in actions of resilience or defeat in response to dangerous interactions with other traffic participants (p. 238).

Cockerham (2005) proposed that we observe how the lifestyle “choices” of individuals are enabled or constrained by the structures present in the neighbourhood. Geographical neighbourhoods

can therefore be thought of as one set of structural living conditions, or resources, that provides limits and opportunities on the possible locations available to people. Taking a ‘neighbourhood resource’ approach also encourages researchers to consider how health-related resources might be both produced and consumed within the neighbourhood setting (Bernard et al., 2007). Bernard et al. (2007) regarded the geographical neighbourhood as a collection of health related resources and relationships that are (potentially) shared or consumed by all residents. Carpiano (2006) employed Bourdieu’s social capital theory to propose that neighbourhoods can usefully be framed as sites or institutions where collective social resources are produced and consumed. The neighbourhood was constructed as an institution with a “stock or quantity of resources” (Carpiano, 2006, p.167).

In a similar way, neighbourhoods can be regarded as ‘opportunity structures’ within which residents can access various health-related resources (Baum and Palmer, 2002; Macintyre et al., 2002). Thus, living in disadvantaged neighbourhoods could severely constrain the possibilities open to people, when compared to those living in more affluent areas, because of the more limited resources available in them. Baum and Palmer’s study (2002) found that neighbourhood urban form can provide socially constructed local ‘opportunity structures’ that facilitated residents’ walking and being able to move freely around in the neighbourhood, as well as opportunities for social engagement (Baum and Palmer, 2002; Macintyre et al., 2002). They identified that physical features of neighbourhoods facilitated social interaction by providing common meeting spaces or ‘third places’ of belonging and conviviality (Oldenburg, 1999). Environments that present opportunities for informal or unplanned interaction provide an increased sense of community, which can in turn motivate activity within the neighbourhood (Lund, 2002). In some neighbourhoods the poor quality of places and vandalism reduced the opportunities available to residents (Baum and Palmer, 2002). Living in neighbourhoods with fewer opportunity structures could therefore constrain physical (and social) activity or encourage residents to go elsewhere. Alternatively, compact, urban form would ideally provide sufficient, good quality resources for shopping, work, schooling and leisure, with residents therefore ‘choosing’ to live locally. Such communities could “shrink individual activity space” (Witten et al., 2011a, p. 4) with daily activity mainly undertaken within a relatively self-contained geographical area, described by Vallée et al. (2011) as ‘spatially limited daily mobility’. If so, the residential context may therefore provide important parameters for how residents use local and other more distant, non-local resource settings to live healthy, active lifestyles.

### 1.2. Distance

Accordingly, attention is now turning to where people actually go in their everyday lives (so-called ‘activity space’ (Chaix et al., 2012; LeDoux and Vojnovic, 2013; Vallée et al., 2011; Zenk et al., 2011) so we can better assess the total environmental context of health behaviours. Despite this, few studies have considered how people use and make sense of proximal and distal places in their everyday lives, and the implications for public health concerns.

Structural factors such as employment, transport, gender, and ethnicity can affect and inform how people engage with places in different locations through physical activity. Employment is a common reason for frequent travel outside of the local environment, acting as an alternative ‘anchor point’ (Chaix et al., 2012). Characteristics of the commuting route can also contribute to the overall experienced environment including access to destinations and opportunities for social interaction along the way (Gatrell, 2013). Further, ‘trip-chaining’ where residents incorporate

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