



ELSEVIER

Contents lists available at ScienceDirect

Health & Place

journal homepage: www.elsevier.com/locate/healthplace

“It's like a different world”: Natural places, post-secondary students, and mental health



Eric Windhorst*, Allison Williams

School of Geography & Earth Sciences, McMaster University, 1280 Main Street West, Hamilton, ON, Canada L8S 4K1

ARTICLE INFO

Article history:

Received 2 March 2015

Received in revised form

22 May 2015

Accepted 3 June 2015

Available online 18 June 2015

Keywords:

Post-secondary students

Natural places

Mental health

Nature connectedness

Therapeutic landscapes

Photovoice

ABSTRACT

There is a need to better understand the types of natural environments that different individuals and groups find mental health promoting. In this exploratory qualitative study, twelve university students were invited to photographically document a natural place that they considered beneficial to their mental health. Thematic analysis of photographs and follow-up in-depth interviews revealed that students prefer natural places that are familiar, contain a variety of natural elements (especially mature trees and some form of water), and are separate from the context of everyday campus life (distanced from both the built and social campus environment). Overall, study findings demonstrate the importance of acknowledging symbolic and social factors when assessing the potential mental health benefits of natural places for different groups and individuals.

© 2015 Elsevier Ltd. All rights reserved.

1. Introduction

Studies suggest that there has been an increase in both the prevalence and the severity of mental health concerns among college and university students the world over (Hunt and Eisenberg, 2010; Storrie et al., 2010). A recent survey representative of American undergraduates illustrates some of the struggles students are facing. At some point within the previous twelve months 87% of students felt overwhelmed by all they had to do, 55% felt overwhelming anxiety, 33% felt so depressed they found it difficult to function, and 9% seriously considered suicide (American College Health Association, 2014).

In response to such findings, many post-secondary institutions and their partner organizations have developed, or are developing, formal strategies aimed at addressing the issue in a systemic manner (for example, see Canadian Association of College & University Student Services and Canadian Mental Health Association, 2013; National Association of Student Personnel Administrators, 2004). While those creating these strategies recognize that many environmental factors shape the mental health of the student population (for example, access to student support services, campus and community safety, and social inclusivity), nearly all of them overlook an important mental health resource: the natural environment. Given the growing evidence demonstrating an

intimate connection between mental health and nature affiliation, this absence is striking (Bratman et al., 2012; Howell and Passmore, 2013; Keniger et al., 2013).

This current research makes a contribution to this connection by seeking to answer the following questions: what natural places do university students consider beneficial to their mental health, and why? While a handful of previous studies have explored student preferences for natural environments on campuses of post-secondary institutions (Abu-Ghazzeh, 1999; McFarland et al., 2008; McFarland et al., 2010; Seitz et al., 2014; Speake et al., 2013), no known studies have gone further and asked college or university students what specific natural places they felt were beneficial to their mental health and what contextual factors might be influencing their natural place preferences and experiences.

1.1. Natural places, post-secondary students, and mental health

It is important to define what is meant by the terms “mental health” and “nature”. Although traditionally mental health has been understood as the absence of mental illness, there has been a push to define it more holistically. Reflecting this, the World Health Organization (2014) developed the following definition of mental health, one which the authors embrace: “A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”

* Corresponding author.

E-mail address: windhoea@mcmaster.ca (E. Windhorst).

Defining “nature” is also enigmatic. In an objective sense nature refers to physical features and processes of non-human origin, such as plants, animals, water, and weather (Hartig et al., 2014). However, certain human-made elements might also be considered natural. Examples could include, a naturalized landscape, a green roof, or even a photograph of a forest scene. Drawing on ideas from the humanities and sciences, Bratman et al. (2012) uncover another layer of complexity: “What makes an environment natural changes across time, space, and the individual engaged in the defining” (p. 120). In other words, what makes a place natural is necessarily imbued with changing human meanings and perceptions. In this paper, the terms “nature”, “natural environment”, and “natural place”, are used interchangeably to refer to these complex landscapes.

Inspired by ideas such as E.O. Wilson's *biophilia hypothesis* (1984)—which holds that humans have an innate need to affiliate with other living things and life-like processes—scholars situated in a number of disciplines have been seeking, over the past thirty years, to unpack the nature–human connection. A substantial body of research now demonstrates that interacting in different ways with many types of natural environments, from a local city park to a remote wilderness area, can enhance both the physical and mental health of a variety of populations, including post-secondary students (for example, see Croucher et al. 2007; Morris 2003; Park et al. 2010; Tennessen and Cimprich 1995; Keniger et al. 2013; Mayer et al. 2009; Haluza et al. 2014). Researchers suggest that four primary mechanisms underlie the health promoting potential of natural places: (1) exposure to improved air quality (Hartig et al., 2014); (2) the opportunity to engage in physical activity (Bowler et al., 2010); (3) a setting for positive social interactions (Maas et al., 2009); and, (4) the direct restoration of stress or fatigue (Kaplan, 1995; Ulrich et al., 1991). Often conceptualized using *Attention Restoration Theory* (ART, Kaplan 1995)—which suggests that natural places provide ideal settings for psychological renewal—most existing research supports the latter restorative mechanism (Hartig et al., 2014).

Although interacting with various natural environments can enhance a person's mental health, this is not necessarily the case. For example, in a study concerning how wooded and rural landscapes affected the mental well-being of sixteen young people in northwest England, Milligan and Bingley (2007) found that while woodland was calming and restorative for some participants, for others it created anxiety and uncertainty. A participant's particular experience was shown to depend on a number of factors, including her or his childhood experiences with nature and the time of day the wooded and rural landscape was accessed. This finding and others like it (Herzog and Kutzli, 2002; van den Berg and ter Heijne, 2005), suggests that the nature–mental health relationship is more complicated than the *biophilia hypothesis* might suggest (Milligan et al., 2004).

Reflecting this complexity, researchers have drawn more attention to other dynamics that influence how different individuals or groups perceive and experience natural places. For example, Dinnie et al. (2013) showed how an individual's experience of a natural environment—and thus, its potential mental health benefits—are necessarily social in origin, being mediated by that person's positioning in relation to particular social groups. Other studies have stressed the role of individual agency in shaping how individuals perceive and experience natural places. A recent essay by Bell et al. (2014) argues that more consideration needs to be given to the influence of shifting life circumstances on a person's place preferences and health priorities. Bell et al. (2014) also draw attention to the role that an individual's orientation to nature might play in shaping how the possible health benefits of natural environments are both interpreted and experienced.

This study is informed by the theory of therapeutic landscapes

which recognizes the complexity of the health–place dynamic (Gesler, 1991; Williams, 1999). In developing the theory, geographer Gesler (2003) embraced a holistic understanding of health, identifying its physical, mental, spiritual, emotional, and social elements. He also recognized that places (whether they are considered natural or not) are made up of several interacting and overlapping components: the natural environment, the built environment, the symbolic environment, and the social environment—each affecting a place's health-promoting potential for a particular person (Gesler, 1991).

In attempting to unpack the relationship between place and health, Gesler mentioned the *biophilia hypothesis* but also stressed the role that symbolic and social factors play in shaping the health–place dynamic (Gesler, 2003). For example, drawing on the humanistic tradition, Gesler and Kearns (1998) showed how place or “landscape is as much in the head as in the eyes and is ultimately a personal, mental construct” (p. 8). In other words, not only is a landscape a physical place by which we are passively affected, we also participate in the creation of that landscape through our unique meaning-making process—a process shaped by our personal history, worldview, and belief system(s) (Hyde et al., 2009). To illustrate how a person might contribute to creating a landscape, Gesler (1992) integrated several ideas such as sense of place, authentic and inauthentic landscapes, fields of care, and symbolic landscapes, among others.

In addition to citing humanistic ideas Gesler also drew on structuralist sources in developing the therapeutic landscapes framework. Gesler related structuralist ideas to place or landscape by suggesting that “landscape is a social construct that arises from the institutions that society establishes” (Gesler and Kearns, 1998). Gesler (1992) showed how structuralist notions such as hegemony and resistance, legitimization and marginalization, and territoriality all affect the way places or landscapes are seen and experienced by different groups. In other words, just as our personal perceptions shape our understanding and experience of a place, so too do the influences of the wider social structure(s) to which we belong—and our unique place(s) in them.

A number of studies have examined the relationship between diverse natural places and health through the lens of therapeutic landscapes (for example, Gesler 1993; Lea 2008; Thurber and Malinowski 1999; Milligan and Bingley 2007; Milligan et al. 2004; Palka 1999; Pitt 2014). For example, through interviews conducted with guests at a relatively remote respite care centre located in a rural county in southern England, Conradson (2005) drew attention to the relational dynamics through which therapeutic effects arise. Four primary themes emerged: distance from home demands, access to an extensive and scenically attractive natural setting, opportunities for different forms of social relations, and emergence of new dimensions of selfhood. Conradson's findings highlight the natural, social, and symbolic factors shaping the health–place dynamic for guests at this respite care centre.

Researchers have also used the therapeutic landscapes framework to explore more local, everyday natural places. For example, Plane and Klodawsky (2013) explored how formerly homeless women who live in a supportive housing development in Ottawa, Ontario, Canada, experienced a local park as a health resource. Two main themes arose in their work: the park was seen as health-promoting because it allowed access to free inclusive social events and also because it provided a place to interact with others (Plane and Klodawsky, 2013). Plane and Klodawsky's work suggests that for marginalized populations, the health benefits of a local park might have more to do with the positive social environment it enables than with any particular natural feature it contains.

Given the mental health concerns many college and university students face (American College Health Association, 2014), and the

Download English Version:

<https://daneshyari.com/en/article/7458040>

Download Persian Version:

<https://daneshyari.com/article/7458040>

[Daneshyari.com](https://daneshyari.com)