A SOCIOLOGICAL VIEW OF HEALTH, THE ENVIRONMENT AND OURSELVES

AIM: To explain the nature of sociological inquiry and to explain a sociological approach to understanding health across and within societies and for individuals, in order to improve it.

SOCIOLOGY – AN INQUIRY INTO SOCIAL CONTEXT AND BEHAVIOUR

Sociology is the study of societies, social groups and social interactions. Any social and related environmental context will be composed of organizational structures, social processes or activities, and sets of social relationships. Because sociology involves the study of social behaviour in particular communities and their broader environmental context, it may be closely linked with related academic disciplines such as geography, economics, politics, history, cultural studies, anthropology, or psychology. A sociologist commonly tries to understand and explain the relationships between the situations of particular groups or individuals, and the broader economic, political, cultural and related forces, which have shaped their lives, whether or not they recognise or understand these historical or contemporary influences upon them.

Sociologists seek the causes of things in the fact of social group membership and in the ways that these group members have related to their environment and to each other over time. As individuals we have all been shaped by the major socialising (organizing, influencing and teaching) forces, which are relevant to the life of the society which has produced us. Principal among these socialising agencies are likely be our family in the early years of life, and then our friends, schooling, work, entertainment and related communications media such as television and newspapers, and our churches. These socialising agencies have in turn been shaped by their functions in the broader society and its historical development. The government (including politicians and the public service) and the courts play a major role in shaping contemporary societies through their decision making and administrative processes, whether or not individuals feel intimately affected by this in their daily lives. What is their history and how well do they serve contemporary social interests? A sociologist might be interested in this kind of question.

Socialisation is often an informal process, which occurs unnoticed. As a result of it people usually develop the accepted patterns of appropriate behaviour, as defined by the groups they belong to within the wider society. Often people conform to the general expectations or norms of a particular group unthinkingly. Or they may try particularly hard to behave according to requirements which are attached to the different roles they are called upon to fulfil by those individuals and groups closest to them. Taken for granted assumptions about the way life should be led are often passed on unquestioned, as if they are natural truths, rather than the social constructs of a particular group, which is itself the product of a specific set of economic, political, cultural and historical forces or circumstances. When representatives from different groups meet, they often have unknown or conflicting perspectives and interests, shaped by their different environments and related understandings. Honest and sensitive communication to try to understand the situation and approach of people who appear different from oneself is vital for healthy practice.

In taking a sociological approach to any broader health issue or individual health problem, one should study the social and environmental context in which it appears. One should also try to make a historically informed analysis of the structures, processes and interactions which appear most relevant for an understanding of the situation under consideration. One should study how key socializing agencies in the society or around an individual may have influenced or may explain their apparent situation as it is currently observed. One should also think about how one’s own socialisation might distort such observations, in order to be more aware and fair in regard to any account of phenomena or events, and in regard to any related recommendations for action.
Consultation and collaboration with all relevant groups and individuals is a vital part of the evidence gathering and recommendation process. Any group or individual being studied will probably know more about itself than any outsider can. If this is forgotten, research and treatment may become dominating or oppressive.

**SOCIOMETRY, SOCIAL DEVELOPMENT AND THE HOLISTIC VIEW OF HEALTH**

Durkheim (1958-1917) was one of the founders of sociology. He identified the characteristics of traditional and modern societies. The historical tendency has been for groups to move from the former to the latter and perhaps beyond, as discussed in the next lecture. In ‘The Division of Labour in Society’ Durkheim argued that traditional societies, which usually live off the land for their subsistence, are essentially homogenous or uniform. Common values are held throughout the group. The expected consequences of this are social conformity and social cohesion. This uniformity is normally coupled with a repressive and coercive legal system. Diversity in thought and values tends not to be tolerated and is seen as threatening to the maintenance of the society. On the other hand, modern or industrial, capitalist society, is one in which people primarily gain their living not from working the land, but from working in production and trade within an increasingly broad and diverse market place. Modern societies tend to become more tolerant and even admiring of diversity, in their attempts to meet technologically and shape the needs of an ever-widening range of primary customers and niche markets. However, the aggressively competitive process of seeking raw materials and transforming them in production also leads to the destruction of many earlier modes of life. The need for sustainable, cooperative development is now recognized in many societies, at least in the long run. (In the long run, the economist Keynes ironically reminded us, we are all dead.)

The traditional society is characterised by the centrality of uniform social units based on personal ties of kinship and neighbourliness. The status people have is defined by their family location. On the other hand, the market and its governance structures drive modern society, and so relationships are increasingly seen as contractual, undertaken for limited purposes and for personal gain. In modern societies a person’s status is more likely to be related to their successful performance than to their family ties. As the result of fierce competitive demands for increased, more diverse and cheaper production, modern societies are also characterised by an ever-increasing specialisation in knowledge and roles. Driven primarily by the pursuit of money and markets, these roles continue to grow and endlessly evolve to meet changing consumer demands, production requirements and special circumstances. Diversity in beliefs is thus a key characteristic of modern societies. Their legal systems tend to be restrictive rather than coercive and try to limit unacceptable actions and their social effects, rather than seeking to enforce conformity to a uniform set of social expectations.

Understanding the nature of a sociological approach is particularly important for health and related practitioners because the World Health Organization (WHO), a major agency of the United Nations (UN), has defined health holistically, as ‘a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity’. This definition implicitly links health with the concept of general wellbeing and the state of the environment. Such holistic analysis of health requires a sociological perspective, which is far broader than the medical model of health. The latter places a primary emphasis on diagnosing and finding a cure for the physical problems of presenting patients. In the medical model the problems of pain and disease are normally dealt with as if they have physiological, rather than social or environmental causes, and are treated with drugs or surgery.

In 1986, in contrast to the narrower, specialist, medical focus on supposed abnormalities of the body, the WHO stated that the determinants of health include peace, shelter, food, income, a stable economic system, sustainable resources, social justice and equity. A more holistic and therefore sociological approach to the health of nations, groups and individuals might examine the influence of
these factors on general community and environmental health, in order to make broad recommendations for action designed to prevent future problems. A holistic or sociological approach to health is much broader in every way than that of the medical model, because it encompasses and examines societies and environments surrounding specific groups or individuals. The medical model of health addresses the body, rather than the wider causes of its problems, which may partly or wholly lie in the social and related environmental context each individual inhabits.

In 1990 the WHO, the Harvard School of Public Health and the World Bank calculated the global burden of disease for eight demographic regions making up the world. They found that one death in every three was related to communicable, maternal and perinatal conditions and nutritional deficiencies. Virtually all these deaths occur in developing regions rather than in economically developed ones. In economically developed regions people have fewer children, live much longer and die predominantly from cardiovascular diseases, cancers, injuries and mental health problems which are related to their socio-economic status, work and lifestyle. In general, a longer life span has been positively though unevenly related to the gradual development of a global market and the increasingly effective production of goods and services for trade or sale. However, in many cases the positive relationship between the production of wealth and the extension of human life has also occurred at the expense of hunter gathering and farming people who have been dominated or left behind in the pursuit of cheaper production and broader markets. The development of global capitalism tends to promote human health but also to increase global inequality. What might the success of market exploitation do to biodiversity? Will powerful humans kill off competing life?

ELEMENTS OF A SOCIOLOGICAL APPROACH

Many different academic disciplines may contribute to a sociological perspective and also to its application in areas which are primarily health related. Some examples are briefly discussed below. The analysis of the health problems of a population should begin with an examination of the environmental and social context of the group under discussion. This may include their regional geography, relevant economic and political context and their related history, social organisation and other cultural or related psychological factors. The examples below may provide some idea of how these apparently different academic approaches may contribute in a variety of social contexts.

Geography: A society and its members may be strongly influenced by their geography. For example, Australia is huge, and far away from many of the major markets of the world. The historian, Geoffrey Blainey, has called this ‘the tyranny of distance’. As a result of these distance problems, Australian development since white settlement has always included a strong emphasis on improving transport and communications. This geographic and historical necessity may now put the nation in a good position to take comparative advantage of current information technology and communications revolutions, particularly as Australia is English speaking and close to Asia. Another example of the geographic influence is that the life of indigenous people living in the desert has always been harsher than that of people living on the coast. This may be reflected in differing cultural and social expectations in these tribal societies. Today, the concentration of the Australian population along a coastal rim has contributed to the comparative lack of access to health services for country people in general and remote communities in particular. In this national context, the development of communication, health and education services may be seen as regional priorities.
Economics: has been defined as the study of the choices people make when faced with scarcity. A study of the economic structure of a society or group may also explain how people feed, reproduce and generally develop or enjoy themselves as a result of work and related market exchanges. A study of work may try to explain how markets, national economies or organisations operate. It also provides information about the daily tasks people carry out and how they are prepared for them. The need to carry on such essential tasks will fundamentally shape the lives of the members of the group, and explain a lot about their health. If the group primarily feeds itself through a nomadic search for food, this crucial search will also influence a great many other aspects of social life, such as the general level of wealth, type of housing, or the nature of religious expression. Alternatively, the organization, work structure and health of a particular industrial community may be shaped by its role in the national or international economy. A mining town might be ‘a company town’ with most of the activities of its inhabitants influenced by a single employer and its international connexions. Giant fast food companies such as McDonald’s may influence the health of nations by producing and marketing cheaply, and especially to children, the kind of sweet, high fat food that many people like to eat, rather than food which is more nutritious. Overweight is now a major health problem.

Politics and government: Politics is the study of the expression of power and the related process of governing oneself, one’s group and others, in a wide variety of potential situations. In democratic societies we usually think about politics as the process of using power through elected governments, as distinct from through people and companies primarily acting in the market, or acting through the church or other social institutions. However, the study of politics is also the study of this broader power, which is the exercise of a capacity to influence the actions of others and therefore subsequent events, though not always with the desired outcome. The most primitive form of power is the ability to hurt or kill, which may be exercised by an individual, a group or nation. The Chinese leader Mao Zedong famously said that ‘Power grows out of the barrel of a gun’. On the other hand, an English proverb says ‘The pen is mightier than the sword’. The U.S. President, Lyndon Johnson said, also controversially, that ‘When you’ve got them by the balls, their hearts and minds will follow’.

Power may often be gained through the possession of money and the related ability to influence others by paying them for activity. For example, the person who owns a factory and employs others to work in usually also directs the way work is done. There may also be an expectation that this occurs in a manner which is consistent with the law of the land. The power of workers to influence events in the company may depend primarily upon their levels of organization, or upon their specific and individual value to the employer. One should pay close attention to people’s titles. These may indicate the requirement of the job they do, and provide clues about their related degree of apparent power to influence events. The way power is gained and exercised also depends on the situation. For example, an individual may derive power through appointment or election to a particular position in some organization or area. The manager of a small company is likely to be an employee of the owner, but because of appointment to the position of manager, his or her power to direct activities is greater than that of an ordinary worker.

Power may also be achieved through being elected to a position of leadership, as often occurs in democratic self-government, and in voluntary organizations. In Australia, people elect leaders at the Commonwealth, State and local government levels. These leaders then have power to make government policy and related law, which ideally is the result of effective consultation and expresses community standards. They may also assist constituents to resolve particular problems. The role of the public servants who work under the elected parliaments is primarily to assist the society to implement law and related policy requirements of the elected politicians. By providing people with information and views to which they would not otherwise have access, the owners of television, newspapers, radio and many related researchers, writers and artists may influence their particular market and also gain the ability to influence public opinion more broadly in relation to many vital
matters, including election outcomes. Because of the power to influence others is unequal, people in a democracy must always be vigilant to ensure a deep commitment to truth, however unpopular. A democracy must also ensure that the maximum possible range of community and expert opinion is expressed, especially on matters of importance. Diversity is valued as a way to experience the new.

Power also exists in the structure of the family. Parents usually have the power to direct their children, because they are caring for people who are physically and intellectually immature, and economically dependent. Some sociologists have argued that there are differences in power between men and women which are biologically determined, and that this is a central factor influencing all facets of economic and social organization and personal life. This is discussed in later lectures.

At the individual level a person’s degree of power may come from their money or from their political, cultural or social position. Power may also be closely related to social status, which is the level of respect or devotion which is accorded to a family or person by others. Rarely, status may come from the occupation of a hereditary position, such as being the Queen. It may come from appointment to a respected historical office, such as being the Governor General. Status may also be accorded by groups of admirers because of a person’s attributes, such as being a famous actor like Russell Crowe, a sporting hero, like Cathy Freeman, or a popular singer, like Kylie Minogue. At a less elevated level, personal, family or organisational status and related power may come from apparently being tougher, richer, more talented, more educated, more persuasive or better looking than others in the shared environment. Status may also be derived from a family relationship or from a similar close relationship with a more powerful person.

History: History has been called the queen of the disciplines. We usually cannot understand our current situation without some understanding of our past as well. History is made through the active involvements and struggles of human beings, and yet at the same time as historical interaction forms those human beings, the passage of time may also produce outcomes which they neither intended nor foresaw. At an individual level, the effects of having gone through a war or a depression may be an influence throughout one’s own life and beyond. At a community level, if families have a history of fighting each other over land ownership, or of being in dispute over the distribution of other resources, that history of conflict will often influence the education and actions of generations to come, and may also be communicated through religious and other cultural practice.

The French philosopher Jean Paul Sartre said that freedom is what we do with what has been done to us. Until we understand the forces which have shaped us, both as a community and as individuals, we may not be able to make reasonably informed choices about what to do to improve our future. When Karl Marx said that the dead generations of the past weigh like a nightmare on the minds of the living, he meant by this that we are often imprisoned or feel imprisoned by decisions of our forefathers, even though we may not clearly understand our apparent surroundings, their origins or alternative possibilities. For example, the Australian Constitution may be far less relevant today than it was in 1901, yet in 2007 Australians are still stuck with its consequences. Most of us probably do not know what these are but this does not mean that their impact is negligible. We need to investigate the taken for granted assumptions and behaviours which have been handed down for generations. You can easily see Marx did not worship his ancestors or their aims and methods. What do you think of yours and mine?
Cultural and related language studies: The culture of a society encompasses its shared beliefs, values, habits and related practices, which are perhaps most powerfully transmitted through shared languages or ‘discourses’. The first of many are learned in the family. Many sub-cultures exist within the wider society and they are often based on family, vocational, ethnic, religious or other cultural identities and related group education, into which individuals are inducted through language and related development of skills, beliefs and actions. Broader cultures will influence the individuals who enter into producing the family and its micro-community, but the particular individuals produced by the latter will also shape the institutions established by the wider society. Specific forms of culture and power tend to reinforce each other. The more power a particular group has in the wider society, the greater ability it usually has to make and disseminate the cultural rules for all. According to Marx, the ruling ideas are the ideas of the ruling class. This does not mean that these are necessarily the only ideas, or that others who have a different situation, different interests, and a different perspective will not question such ideas or rebel against them, either overtly or covertly.

People’s cultural beliefs and the organizations which support them will usually be closely related to how the larger society is organised economically and politically. For example, in ‘Hitler’s Pope’, Cornwall explains that the supposed infallibility of the Pope as a religious leader is not an ancient notion, but has more recent origin in the First Vatican Council of 1870. During centuries prior to this, the powerful rulers of the modernizing European states were inclined to separate the emerging rule of kings and queens, and the national church and government from that of the Catholic Church in Rome. This also promoted the establishment of strong decision making authority at the national levels of the Catholic Church, and the increasing refusal of the dictates of the Vatican in Rome. The states of Italy did not become a unified nation until the 19th century, and the forces for Italian unity increasingly took over formerly Papal territories in their march towards unification. The First Vatican Council of 1870 declared the Pope infallible in matters of faith and morals as well as supreme spiritual and administrative head of the Church. Cornwall interprets this as a veiled statement about future limitations on the scope of Papal earthly power in Italy. Thus, when one takes the broader and more informed historical perspective, an apparent gain in influence may perhaps be a loss. A focus on comparatively closed group interactions on a smaller scale often reminds us that these may develop an extremely complex life of their own, different from the surrounding society, and based on the nature and beliefs of the group and its interactions outsiders.

Anthropology: Anthropology primarily involves the study of the cultures of kinship groups. This may also require study of the political, economic and other interactions of such tribes, both internally, and with outsiders. The anthropologist often seeks to understand and interpret the world by first trying to understand and adopt the perspectives of the group, in order to describe them and their society appropriately, as an ‘insider’. Anthropology originally developed primarily as the study of people living in subsistence economies who were being dominated in the march of capitalist economic development, which was led first by Europe and later by the United States. In the 20th century, however, anthropologists also turned their attention to urban environments, studying immigrants and other social sub-groups in cities.

The perceptions of anthropologists and psychologists are usually more closely related to social interactionist approaches in sociology, rather than to the broader, macro-social structural approaches which are more common in functionalist or conflict social theories. The basic elements of these theoretical sociological approaches are discussed in the next chapter. Functionalists generally emphasise social agreement and the persistence of social institutions. Conflict theorists focus instead on social change produced by conflict between social groups with differing economic interests and related power and beliefs. Social interactionist approaches can be found as early as Freud, who wrote at the beginning of the 20th century and stressed the importance of the understandings.
apparently gained through interactions with immediate others, especially in the micro-community of the family, as the most powerful influences on individual and group development.

The Frenchman Levi-Strauss was a founding father of anthropology who argued that the apparently general prohibition on incest in societies is primarily driven by a positive social and economic desire for intercourse outside the immediate kinship group. According to Levi-Strauss, there is no immediate reason why a woman should be unfit for intercourse with the men of her own clan; but it is socially useful for her to be part of the exchanges through which each clan establishes reciprocal relations with another, instead of keeping to itself. The group should not squander for private purposes the women who constitute one of its possessions, but should use them as a means of communication with ‘the other’. If generally true, this casts the history of relations between white men and indigenous women and men in Australia in a somewhat different light from the usual.

**Psychology:** Psychology may be described as the study of the human mind and related individual difference. From a sociological perspective, this analysis and treatment process may be naïve without an awareness of the potential influences upon individuals of their history and the wider social and environmental context. The origins of psychology lie at the end of the 19th century, as Freud’s writings on the creation of the individual within the family commenced to inform Western thought thereafter. His studies heralded a comparatively new and increasingly widespread interest in hidden, underlying and instinctive urges and learned behaviours which supposedly make us tick. However, in psychological study today, a particular society or group tends primarily to be envisaged as the mass reflection of the views and activities of all the individuals found in particular family or community categories which are supposedly relevant for the study. The particular individual may then be defined against the norm. The questionnaire is thus a very popular method of investigation.

In my view, Freud’s perspective must be centrally addressed by sociologists interested in the relationship between sexuality, the family and the construction of society. I will discuss his work again in later chapters. He trained as a medical doctor and later founded the psychoanalytic movement. Its teachings were based primarily on practitioner analysis of discussions with disturbed patients about their earlier life within the family. Freud saw himself as a scientist, in spite of his unorthodox, personal methods of discovering and treating patients through communicating with them about their personal symptoms, perceptions and history. His views on the family, the unconscious mind and on personal defences have shaped expert and popular conceptions of the self enormously, although his specific theories have often been rejected or reversed by former disciples. Perhaps his incredible cultural influence derives from the ability of so many people to recognise their own situation in regard to the bodily and social theories he thought he had discovered about all people and societies, mainly as a result of the process of questioning the self and other. (His theories did not allow him to take what others told him at face value. Unlike some contemporary psychologists, who seem to accept what people write on questionnaires without too many questions.)

**FREUD’S CONCEPTION OF THE BIRTH AND DEVELOPMENT OF MENTAL HEALTH**

In Freud’s view, irrational forces, unconscious motivations and biological drives that first emerge at birth determine human beings. He thought the conscious mind rejects ideas which are unpalatable, and that disturbing thoughts or knowledge are consigned to the unconscious mind, from which they may emerge through a variety of illness symptoms or related coping mechanisms. Freud primarily thought of people as aggressively pleasure seeking animals growing up to be individuals destined to navigate three great polarities that dominate mental life: the tensions between activity and passivity, the self and the external world, pleasure and unpleasure. He believed that children first choose their parents as objects for satisfaction of all their rapacious, instinctual desires, which he also called libido. However, civilization demands that children are forced to relinquish these sexual choices as
unacceptable and are called upon instead to identify with their parents by taking their attitudes – their norms, injunctions and prohibitions – into themselves. The primary task for the male child is described as the need to overcome a primitive rivalry with his father for the affections of his mother and to learn to identify with him instead. Freud called this process the resolution of the Oedipus complex. He saw the primary task for the female as overcoming penis envy in order to make an effective female identification and reach contentment in marriage and mothering a son.

Freud saw character development, neurotic symptoms and conflicts centering on love and hate as compromise formations between inner urges and outside pressures. He also saw civilization as weak and always under threat. Destruction may appear to be the only available form of creative expression to those whose rapacious urges lead them to feel enraged. His theory of the existence of the unconscious mind involves the concept of three levels of personal functioning and development - the id, the ego and the superego. The id constitutes the instinctual being. Its contents are innate, blindly self-interested, and repressed through social training. However, these underlying urges may also emerge in destructive or playful and creative behaviour. The super-ego is the moral framework, which is consciously learned as the child matures into an adult member of society. Whereas the id is uncontrolled and unconscious, the mature superego will always seek to maintain conscious control over the person. A person’s ego supposedly develops as a mediator between the two. Its role is balancing the external and internal forces impinging on the individual in order to defend personal stability. The ego suffers from the dangers of the external world, the dangers of the id, and the severity of the super-ego. Strong ego functioning is thus seen as vital for the development of mature action. Ego-defences are useful for protecting any person from feelings of anxiety, threat and guilt. The task of the therapist is sometimes seen as helping people to question themselves, so they can recognise, address and balance troublesome elements of their id, ego and superego development.

Psychodynamic counselling has been described as an ‘uncovering therapy’, in that the techniques and theories are focused on discovering underlying unconscious processes governing an individual’s behaviour. How effectively it is possible for another person, however educated, to assist this process of self-examination and achievement of the goal of healing mental ‘dis-ease’ has always been a moot question, especially for Freud himself. Nevertheless, the whole of Western civilization has been enormously influenced by this intellectual giant. Perhaps this is because each of us have felt the truth of some of his beliefs in our analysis of ourselves, rather than accepting them for more conventional scientific reasons, which require comparatively dispassionate analysis of much larger populations.

Today, psychologists who are behaviour therapists argue that insight is not action, and that uncovering the underlying causes of an individual’s problems, even if it is possible, does not necessarily change their everyday life and behaviour. Behavioural counselling, therefore, is a process of trying to help people learn to solve certain interpersonal, emotional and related problems. It also assumes that clients can be given training which helps them change unwanted behaviour, in order to make apparently more sensible and fewer disturbing decisions. The client facing interpersonal difficulties is not seen as ruled by unconscious motivation which must be uncovered, but has simply learned ineffective patterns of behaviour, that can be studied and relearned. Behaviour therapy may be used when a person has an irrational anxiety, such as spider phobia. They are slowly taught that, in spite of their belief, handling spiders is not usually dangerous.

The existential-humanist tradition of psychology focuses on men and women as people who are ideally empowered to act on the world and determine their own destiny. This view claims we are positive and forward moving, and searches the world for meaning. While the roots of this tradition lie also in the work of French existentialist philosophers such as Sartre and Camus, the most famous existential and humanistic psychologist is probably Carl Rogers. In 1946 Rogers and Wallen wrote that counselling is a way of helping the individual help himself. The function of the counsellor is to
make it possible for the client to gain emotional release for problems and, as a consequence, to think more clearly and deeply about his or her situation. It is the counsellor’s function to provide an atmosphere in which the clients, through exploration of their situation, come to see themselves and their reactions more clearly. On the basis of this insight they are ideally able to meet life’s problems more adequately, more independently, and more responsibly than before. The client ideally experiences psychological growth in the counselling situation, as well as discovering a way of adjusting to the apparent realities and demands of life.

Trait and factor theory is a related form of decisional counselling in which the task of the counsellor or therapist is to assist the client in making better choices for living more effectively. It underpins vocational counselling, which supposedly requires:

- A clear understanding of yourself, your aptitudes, abilities, interests, ambitions, resources, limitations and their causes
- A knowledge of the requirements and conditions of success, advantages and disadvantages, compensation, opportunities and prospects in different lines of work
- True reasoning on the relationship of these two facts

According to Ivey and Simek-Downing, many other schools of psychology and counselling have sprung from the streams outlined above, and may mix a variety of elements from each of them. These writers state that while there are still many who argue that one single school of therapy is ‘best’ and should be adopted by all, most psychologists and researchers now recognise that different therapies are effective with different people. Speaking as a sociologist, this flexible approach seems most reasonable to me. In most situations the client and their community should probably have the major role in determining treatment. But this is discussed in later lectures.

HEALTH RELATED USES OF SOCIOLOGY

To practice health related sociology is usually to analyse the major social structures, processes and relationships in an environment in order to gain a better understanding of their outcomes on health, in order to improve it. The causes of many health problems in populations can only be identified, and their potential solutions can only be effectively discussed, after an understanding has been gained of a range of apparently related stresses which are produced by a specific geographic, economic, political, historical and cultural climate and context. The more specialised the sociologist becomes, the more he or she risks sacrificing or distorting the holistic understanding and endeavour which is the essential aim of the discipline. For example, it is probably impossible to understand effectively or address indigenous health problems in the absence of a holistic understanding of the impact of cultural dispossession by white society on the lives of indigenous people. Since white understanding of this is inevitably and essentially limited, indigenous understanding and self-determination are vital for indigenous health improvement at the community and individual level. This is now recognised in Australian government policy but not effectively implemented in practice.

Speaking more personally, sociology, like history, provides a good method for gaining an improved individual and collective understanding of why we are the way we are, so that we can act better to achieve our future aims. In this sense the practice of sociology is also intimately related to the practice of all personal, organizational and community inquiry and management, in order to improve development outcomes. We need to try to understand ourselves and our communities through personal and more broadly evidence based inquiry. We should also ponder why we have become who we perhaps appear to be to others and to ourselves. This is necessary in order to make appropriate choices, informed by an understanding of apparently relevant facts as well as our
emotions. We need to keep trying to grow our understanding of our past and present, so that we can make positive choices about our future, with more awareness of a potential range of outcomes.

Attempting to undertake a dispassionate analysis of their past and current environment and its related interactions may help any person to understand and treat their own behaviour, in order to improve their coping skills, and grow. A sociological approach is thus potentially useful in a wide range of occupations, where practitioners might usefully seek to treat the problems of social groups or individuals through taking a broad, holistic view, in preference or in addition to a specialist focus, such as that of medical science. A holistic approach is akin to a sociological approach. It studies the broad environmental and social context in order to more fully understand a specific occurrence, such as a disability or disease, and its effects. A holistic approach contrasts with a specialist approach, which, in the case of a disease, might focus much more narrowly and deeply on studying a specific part of a patient’s anatomy, in order to make a diagnosis of malfunction, and to perfect a cure.

THE SOCIOLOGICAL IMAGINATION

The U.S. sociologist C. Wright Mills wrote ‘The Sociological Imagination’ in 1959. In it he states that a sociological imagination enables us to grasp history and biography and the relations between the two within society. The sociological imagination enables its possessor to understand the larger historical scene in terms of its meaning for the inner life as well as the social situation of groups or individuals. The first lesson is that individuals can understand their own experience and gauge their own fate only by locating themselves within their historical period. They can know their own chances in life only by becoming aware of those of all individuals in similar circumstances. Wright Mills argues that by living, each individual contributes, however minutely, to the shaping of this society and to the course of its history, even as he or she is made by society and by its historical forces. In this context freedom can be conceptualised as what we do with what has been done to us. French existentialist philosophers writing during the same historical period, such as Camus, Sartre and de Beauvoir, and who were concerned with defining reality from the subjective centre of the individual’s primarily emotional responses to their world, said that we are not simply free – we are condemned to be free. Doing nothing about a situation inherently involves bypassing the choice of a different activity. We cannot escape the personal responsibility and effects of our action or inaction, even if we are locked in a cell.

According to Wright Mills, it is the capacity to range from the most impersonal and remote social transformations to the most intimate features of the human self – and to see the relations between the two, which is the essence of the sociological imagination. At the back of its use, there is always the urge to know the social and historical meaning of the individual in the society and in the period in which he or she has his quality and his being. According to Wright Mills, people need to understand what is happening in themselves as midpoints of biography and history within society. This process of self-examination should also assist one to communicate with others in a more informed, dispassionate and empathetic fashion. This is vital for the health of the individual and also for the health of the international community to which we all belong.

A feminist slogan of the 1960s and 1970s stated, from a perspective somewhat similar to C. Wright Mills, that ‘the personal is the political’. This means that larger social forces have in reality shaped many apparently private lives, and that as a result of this, the situation and emotions experienced by a single individual may often be comparatively common in the wider society. For example, I may think of myself as totally hopeless at using computer related technologies, but be unwilling to talk about it for reasons you may speculate about. However, I am probably far from alone in this feeling given my age, especially at such an early point in the historical development of these products. One ought also to point out that the personal is unlikely to be political enough. In other words, being
driven by purely personal interests and related group aspirations is unlikely to be a sufficiently broad perspective for improving general health and welfare. Feminism, like many professional perspectives, may be limited by its lack of a holistic understanding. The result of this is that it may become an ideology – a narrower set of ideas which primarily justifies and seeks to enhance one’s own position and the position of one’s group, rather than a tool with which to find a broader truth.

A SOCIOLOGICAL DESCRIPTION OF MYSELF

I will illustrate the sociological process by providing the example of myself, for you to think about. This process has an added advantage because it will show you how any other ideas or information I present may also have been influenced by my age and background, and the broader social and historical context which has produced me. There is no possibility of any individual or group escaping to some completely neutral or objective territory in order to describe ‘reality’ or provide information. One’s perspectives and choices are always influenced by factors such as the times, including one’s particular family, work and cultural history within the broader economic, political and environmental context. This is so even when people rebel against their past or those in charge.

In order to understand themselves and others better, a person should generally try to understand the forces which have influenced their particular social context. If you know more about me, you will also be able to judge the things I say in the light of this extra personal knowledge, as well as in terms of whether my views seem to you to make sense as a result of the information I present, and in the light of your own search for information and understanding. You should then undertake the exercise of placing yourself in historical context, and think about how your situation might provide you with potential strengths and weaknesses if you were a health practitioner. If you are unwilling to honestly question yourself in this way, you might ask yourself why you think that, as a health practitioner, you should gain access to any intimate information about others. Perhaps you don’t feel that you could, or should, intimately inquire into yourself or others. What might this mean for your practice?

I am a sixty year old woman who came to Australia as a small child, accompanying my parents and an adult sister. They were British migrants from Southend on Sea, coming to Australia on a government assisted migrant passage during the 1950s. My parents were sick of war in Europe and my father had also had tuberculosis and thought Australia would be healthier. My father worked on my uncle’s pineapple farm in Queensland, sold sacks, farmed chickens, and then became a milkman. My mother helped out in any way she could, and there were many. My father was an atheist and my mother wasn’t sure that God existed. Nevertheless, I would describe the culture of our household as strongly Methodist. Defining and accepting social responsibility, speaking freely and telling the truth were all taken very seriously, although the family was comparatively dismissive of education, career success and related status. The highest goal for a daughter was to have a happy marriage and to be a good mother. I was the fourth child, born after my siblings had all grown up. My parents were unhappy in their marriage, but I was adored and spoilt by both of them, and was good at school. My father taught me boxing and about all the famous boxers.

At the time our family came to Australia, the country was going through a long period of post-war economic growth and over two million migrants came in two decades. This uninterrupted growth also provided the potential for upward mobility, especially for young people of English speaking background. Primarily because I wanted money and the choices it provides, I left school at fourteen, which was then common, and became a shorthand typist. Because of high levels of industry protection, economic growth and Australia’s white Australia policy, jobs were easy to get, and trade
unions were strong. (I joined a trade union as soon as I received a letter from my employer telling me my employment would be terminated unless I did so. This was my first experience of trade unions.) At this time there was a general social expectation, often enshrined in law and practice, that while most working class boys would enter an apprenticeship for a trade, girls would work only until they marriage and motherhood. They would then depend upon their husbands’ income. My family, who tended to distrust the men in professional occupations, shared this expectation. My parents’ view was that professionals are expensive and primarily attend to their own living and career aspirations, which are built on the misfortunes of others. As a result of this, my father in particular believed that their ideas should not be taken too seriously. He liked to do as much as he could for himself.

My life changed dramatically when rejection by my boyfriend made me start studying at night school. I also began to study because I hated my boring job which I was not very good at, and I had nothing to take my mind off my troubles. It was the sixties and higher education was expanding rapidly, to meet the needs of the expanding economy and workforce. I won a government scholarship to go to the University of Queensland. Following my interests, I decided on an Arts degree, majoring in English and History (which was then popularly known as Marriage I). As a result of my studies and the social dissent and ferment caused by the war in Vietnam, I learned new perspectives and skills which have strongly influenced the rest of my life. I became a teacher – a common occupation for an upwardly mobile young woman in the expanding Australian economy. I taught first in West Africa as a member of the Australian Volunteers Abroad Scheme and later in Australian high schools, before returning to university postgraduate study and teaching. These experiences strongly reinforced the socialist and feminist beliefs I had first been introduced to by friends and teachers at the University in Queensland, during the period of protest against United States and Australian military intervention in Vietnam. Had I entered the private sector workforce I would have been exposed to different influences and would probably have developed differently.

Besides my teaching work, I was active in socialist and feminist political and community movements. Partly as a result of this experience I got a job in the Department of Industrial Relations in the state government public service in the mid 1980s. As a committed socialist, I was naively astonished by how badly the public service appeared to be run, and by how little interest there seemed to be in providing good service to the public. I was strongly influenced by the ideas I learned in the state public service during the next decade of state Labor and Liberal governments. The emphasis of both sides of politics was increasingly on the difficult task of identifying and setting up the structures necessary for better management of public resources.

In 1989, the hostile division of the world into Capitalist and Communist camps crumbled with the fall of the Berlin Wall. The 1990s commenced a period where there was growing international recognition of the importance of effective market competition on one hand, and effective government regulation on the other, in order to bring about international free trade and democratic societies which primarily operate in the interests of everybody rather than just the most privileged groups and their supporters. In my job I began to learn something about medico-legal and insurance issues. I was suddenly retrenched, and took up a job as lecturer in the Faculty of Health Sciences at Sydney University. I taught there for eleven years and retired in 2007.

You can see even from this brief description that my views and I are the product of a particular set of historical and personal factors. Many of these larger factors also uniquely affected the lives of other Australians of my generation. When you read my views, or think about what I say, you know that my perceptions are influenced by this background – and also by other more intimate events and relationships that I have not told you of, for reasons which you should freely speculate about. The understanding and declaration of personal influences and their related potential biases is part of the
attempt to be intellectually objective. Am I simply too shy to try to tell you how I think my more intimate personal relationships have influenced my adult life?

SOcioLOGICAL ANALYSIS: YOUR TURN

I want you to undertake a brief sociological analysis of your own life, or of the life of a parent. Explain yourself (or your parent), in the context of the forces which you think have produced you as you are today. You might consider issues such as:

- your gender
- the key influences upon you from your family
- their level of wealth or social status
- their cultural, ethnic and religious background
- key events or actions which shaped their/your personal history
- key cultural, economic, and political forces or changes which shaped their environment

Below are some questions for you to think about:

- How do you fit into your family and into the broader historical, social and environmental context of which you are all a part?
- Consider and describe the effects of this social and environmental context upon your general health.
- How well do you think your background equips you to be a health worker?
- What do you think are the strengths and weaknesses you inherit from it?
- What kind of clients do you think you might work well with, and who do you risk treating less appropriately or effectively?

Wright Mills gives the following examples of the questions that the sociologist commonly asks about society. Answering these questions may also provide information related to the health of particular groups and individuals in the society.

- What is the structure of this particular society as a whole?
- What are its essential components, and how are they related to one another?
- How does it differ from other varieties of social order?
- What is the meaning of any particular feature within it in relation to its continuation or change?

Wright Mills also offers the following broader set of sociological questions:

- Where does this society stand in human history?
- What are the mechanics by which it is changing?
- What is its meaning and place within the development of humanity as a whole?
- How does any particular feature we are examining affect, and how is it affected by, the historical period in which it moves?
- What are the essential features of the historical period and how does it differ from other periods?
- What are its characteristic ways of history making?

Finally, Wright Mills says we might ask:
• What varieties of men and women now prevail in this society and in this period?
• What varieties are coming to prevail?
• In what ways are they selected and formed, liberated and repressed, made sensitive and blunted?
• What kinds of ‘human nature’ are revealed in the conduct and character we observe in this society in this period?
• What is the meaning for ‘human nature’ of each and every feature of the society we are examining?

SUMMARY AND CONTEXT FOR FUTURE DISCUSSION

Sociologists generally study human societies and interactions. Their subject matter includes the social structures (organization), social processes (activities), and social relationships which make up the pattern of a particular social formation or society. Sociology may be closely related to other disciplines such as geography, history, economics, politics, cultural studies, anthropology and psychology. Sociologists often try to establish the relationship between what happens to individuals, and the larger historical processes of cultural, economic and political change which may explain their situation. The WHO has defined health holistically, as ‘a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity’. This requires a wider perspective and a more injury prevention related focus than the medical model of health. The latter focuses on the body rather than its environment, and seeks to diagnose and find a cure for the physical symptoms of the presenting patient. In contrast, a sociological or holistic approach examines the influence of broader environmental and social factors on the health of nations, social groups or individuals, in order to improve their broader situation. In general, the poorest people die earliest and experience the greatest health problems whether one is considering a regional, national or global context. Improving the surrounding environment may be the most effective way of improving health in both developing and developed economies. In taking a sociological approach to any broader health issue or individual health problem, one should study the social and environmental context in which it appears, while trying to gain a historically informed understanding of the most relevant social structures, processes and interactions which may be related to the situation under consideration, in order to improve it. One should also think about how one’s own socialisation might distort such observations, in order to be more aware and fair in regard to any account of phenomena or events, and in regard to related recommendations for action aimed at solutions. Communication and/or collaboration with those groups and individuals most relevant to improving the general situation is usually a vital part of the evidence gathering and recommendation process.

FURTHER READING


