Extending the vocabulary of place pathologies: an exploration of place and mental illness

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Introduction

The Welsh word, hiraeth, describes a feeling that many of us may have felt at some point in our lives. It is the desire to be at home, yet it is more than homesickness (King, 2000). Hiraeth is a feeling of incompleteness and a longing to go to a place where you belong (Petro, 2012). It is a homesickness that creeps up on you even when you are at home; it is an inexplicable yearning to return home, even to a home that no longer exists or a place that never was (Jones, 2016).

More than a word that describes an indescribable feeling (Harrison, 2013), hiraeth can be used to understand the pathology of place (Casey, 1993) – that is, the role that place has in mental illness. It has been established that place has an important role both psychologically and anthropologically. For instance, the geographer Yi-Fu Tuan popularised the word ‘topophilia’, defined as ‘the affective bond between people and place or setting’ (Tuan, 1990, p. 4). Taking an environmental perspective, the word ‘biophilia’ has been used by psychoanalyst Eric Fromm to describe an innate propensity towards living environments (Fromm, 1974). These words describe the affection between human and place – specifically, how we interact with and make sense of external environments. However, hiraeth describes the internal affection between humans and sense of place, rather than the affection for a place itself. In this essay, I will describe three components of hiraeth: a longing for home, a feeling of uncertainty, and a sense of displacement. Using these as a guide, I will characterize and explore the role of place in mental illness.

A longing for home, even a home that no longer exists or never was

The longing for home that hiraeth describes is not to be taken lightly. Homesickness has been described as ‘mini-grief’, placing it in the same category as mental illnesses arising from grief and bereavement (Stroebe et al., 2002). This has implications for the way that homesickness is treated. In the same way that avoidance mechanisms can exacerbate grief as they increase numbness and detachment (Baker et al., 2016), we should not focus on distracting ourselves from wanting to go home. Instead, it is important to acknowledge the longing for home that many people feel.

However, a longing for home can occur even when one is at a physical location that they call home. The home that one longs for may not have ever existed. This is a defining feature of hiraeth. From this, the question arises – how can one long for something that doesn’t exist? This can partially be answered by the restorative capacity of place. That is, even if such a place does not exist, we long for the feelings of cognitive restoration, relaxation, and stress relief that certain places can give us. For example, it has been found that when compared to images of urban settings, pictures of nature had restorative effects, positively influencing mental states and psychological stress (Ulrich, 1981).

Furthermore, the restorative capacity of place is not limited to natural landscapes. Cultural landscapes and places of worship both have restorative capacities (Xu et al., 2018, Herzog et al., 2010). Importantly, it has been found that changes in the perception of an area’s restorative capacities are dependent on anticipated emotions, as opposed to previously experienced emotions (Ruiz and Hernández, 2014). Thus, the restorative capacity of place depends largely upon on how we perceive the place itself.

We are told that ‘there’s no place like home’ (Baum, 1958). Yet, for those who come home to children that need to be taken care of, chores that need to be done, and bills that need to be paid, home environments can be quite the opposite of restorative places (Hartig, 2012). In this way, there should be more focus on
the way that place has a preventative role in mental illness, rather than looking at place from the singular lens of homesickness.

**A feeling of uncertainty / change**

Another tenet of hiraeth is a feeling of restlessness, uncertainty, and lack of security. This can arise from environmental or cultural change, as experienced in the original conceptualization of the term following English occupation of Wales and the consequent social change (Petro, 2012, Thornton, 2017).

From a psychological point of view, it has been established that environmental change can tangibly influence mental wellbeing. For instance, seasonal affective disorder is a type of depression (American Psychiatric Association, 2013, pp. 187-188), hypothesized to be caused by circadian rhythm changes due to seasonal environmental change (Lewy et al., 2007). The longer and more drawn-out process of climate change can also cause significant mental distress. A case study from farmers in the Western Australian wheatbelt found that climate change undermined self-identity, leading to greater perceived risks of mental illnesses including depression and suicide (Ellis and Albrecht, 2017). Interestingly, these farmers reported feeling that their farms ‘reflected aspects of their own values or personalities’ (Ellis and Albrecht, 2017, p. 164). This identity reflection has been observed in other studies (Ngo et al., 2014), and this emphasizes the importance of place with regard to identity and therefore mental illness.

Additionally, it has been proposed that attachment theory can be applied to place attachment (Scrima et al., 2017). Attachment theory emphasizes the importance of emotional bonds, and place represents an important attachment ‘figure’ for many people (Scannel and Gifford, 2014). In the same way that attachment theory describes the distress experienced when one is away from their attachment figure, place attachment can therefore impact mental health.

As Scannel and Gifford point out, separation from a place that one is attached to does not have to be literal – place disruption and its associated separation distress can be secondary to potential separation as well as actual separation (Scannel and Gifford, 2014, p. 27). This reinforces the complexity of the person-place relationship. Lack of place attachment can cause feelings of uncertainty and discomfort – which are the same feelings that the word hiraeth describes.

**An inexplicable feeling of displacement, even when you have never left home**

Central to the concept of hiraeth is a feeling of displacement and lack of belonging. It is known that residential displacement can damage mental health. Residential displacement in the context of urban gentrification has been associated with higher rates of hospital mental health presentations and mental illness diagnoses (Lim et al., 2017). Displacement following environmental disasters is also detrimental to mental health, as evidenced by the increased demand for mental health services following Australian bushfire and flood/cyclone events (Reifels et al., 2014). Higher rates of stress and anxiety have been found in people who were displaced from public housing (Keene and Geronimus, 2011). Therefore, it is vital that there are services to help people overcome the mental health challenges associated with residential displacement.

However, a defining feature of hiraeth is that it is not exclusive to people who are away from home. Considering the substantial mental detriment associated with residential displacement, it may seem far-fetched to assume that such detriment can occur without the actual process of displacement. Nevertheless, the term ‘solastalgia’, coined by Glenn Albrecht, demonstrates how this can occur (Albrecht, 2005). Solastalgia is defined as ‘the pain or sickness caused by the loss or lack of solace and the sense of isolation connected to the present state of one’s home and territory’ (Albrecht, 2005, p. 45). That is, in the wake of events challenging place identity such as environmental or even potential change (Moratis, 2020), solastalgia describes the concomitant feelings of physical desolation, loss of belonging and mental distress.

Both hiraeth and solastalgia describe melancholia; a ‘homesickness one gets when one is still at ‘home’’ (Albrecht, 2005, p. 45). Whilst solastalgia describes a desire for something that has or will have been lost, hiraeth acknowledges the inexplicable feelings of displacement in the absence of change (Jones, 2016). This can be considered in conjunction with the damaging effects of residential displacement. Both terms...
emphasise the importance of place security and the need for mental health service provision for those experiencing displacement – regardless of whether that displacement is literal or non-literal.

**Conclusion**

As COVID-19 and climate change pose pervasive challenges to existing place identities, it is more important than ever to characterize and effectively define the role that place has in mental illness. As the word hiraeth describes, place plays an important role in our mental health. Places have restorative capacities, and in some ways, place attachment is similar to attachments that we have with other people. As issues with place attachment are not limited to people who have been displaced or places that have been destroyed, there is a need for interdisciplinary services addressing the mental health challenges arising from the pathology of place.
References


