Health and well-being are now firmly entrenched objects of research across social and medical sciences. Indeed they are part of a Kuhnian normal science. The possibility of their measurement is no longer questioned, only the particular measures are. They are no longer thought to be personal and idiosyncratic, and instead generalizations about them are put forward and tested at social, personal and subpersonal levels. Crucially this normalcy was achieved despite the long-standing unresolved philosophical disagreements about the nature of health and well-being. Can health be defined in a purely statistical way or is it a normative category? Is well-being a mere state of mind or requires mind-independent goodness? Looking at the current sciences it is tempting to conclude that these fundamental questions are irrelevant to them and a progress on these questions is not necessary for the success of the scientific enterprise. I argue that this conclusion is partially correct – in a true Kuhnian fashion the practice of the sciences of health and well-being requires “getting over” certain deep philosophical disagreements. But it does not follow that therefore these enterprises can proceed safely without any new work in philosophy.

What sort of philosophy do these sciences need? First, they need an account of value aptness – what sort of value judgments it is legitimate to make and which ones compromise objectivity of these pursuits? Second, they need an account of measurement that accommodates the many diverse practices that take place under the broad umbrella of these sciences, while at the same time retaining potential for criticizing some of the measures currently used. Finally, these sciences need substantive accounts of health and well-being that feed off the fundamental philosophical theories behind these concepts but also provide practical guidance for which conceptualizations of these states should be deployed in which contexts of research. All of these tasks require tools of philosophy of science and moral philosophy that only partially exist and on which I make progress in this talk.
Health and Well Being in the Changing Urban Environment –
An interdisciplinary program of the International Council for Science (ICSU)
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More than half of the world's population now lives in cities. This change is accompanied by a shift in the types of disease (from infectious to non-communicable); new environmental, social, and economic factors that have consequences on health; and a new set of challenges for those concerned with promoting human health and well being. During the next half-century, an additional 3 billion people—mostly expected to become city dwellers—will live on the Earth. We now stand at a crossroads where urban policies related to existing and newly constructed cities will have enormous future implications for human health.

Currently, there is limited understanding of how urban population health is shaped by complex systems of external influences, some at the local and some at the global scale. These influences are themselves produced by the interface of human choice and the natural world. Food, nutrition, water, transport, infrastructure, housing, and energy are all linked to health. Integrating causes and consequences is a complex web of human decisions about daily living and social and political changes. Running through all elements of the picture are health inequalities and differential impacts along axes of human diversity such as age, income, and social class. These interactions have always been with us, but they are increasingly urban.

Policy makers, who must make daily decisions that affect urban health and well being, urgently require sound scientific evidence that reflects the complex matrix of issues involved. There is, moreover, increasing recognition of the need to develop an innovative approach to understanding urban health and wellbeing that integrates interactions between various different processes and factors.

Systems analysis offers such an approach. A systems approach is comprehensive, taking into account as many aspects of the problem as possible as well as feedbacks crossing the boundaries of sub-systems and cutting across scales; it acknowledges the nonlinearity of many underlying processes, uncertainty and unexpected events. It provides an interdisciplinary approach, integrating information from different basic and applied sciences with health information. It has predictive capacity and allows policy makers to determine potential cost, as well as proposing methods to plan and examine different scenarios even when evidence-based information may be incomplete and when controlled experiments cannot be performed. A systems approach can reveal important issues regarding population health on which reliable scientific understanding or analysis are lacking and thus make an important contribution to setting the future global health research agenda and to improving health and well being in the urban environment. It can help to rank alternative policy responses in terms of their advantages and disadvantages, providing a platform for discussion and
decision-making.

In the presentation I will delineate the background and goals of this ICSU research program and describe the potential contributions of the ICSU unions to this interdisciplinary program.