

## Living Divided No More: A Journey into Health in the Twenty-First Century

By Erin Carter

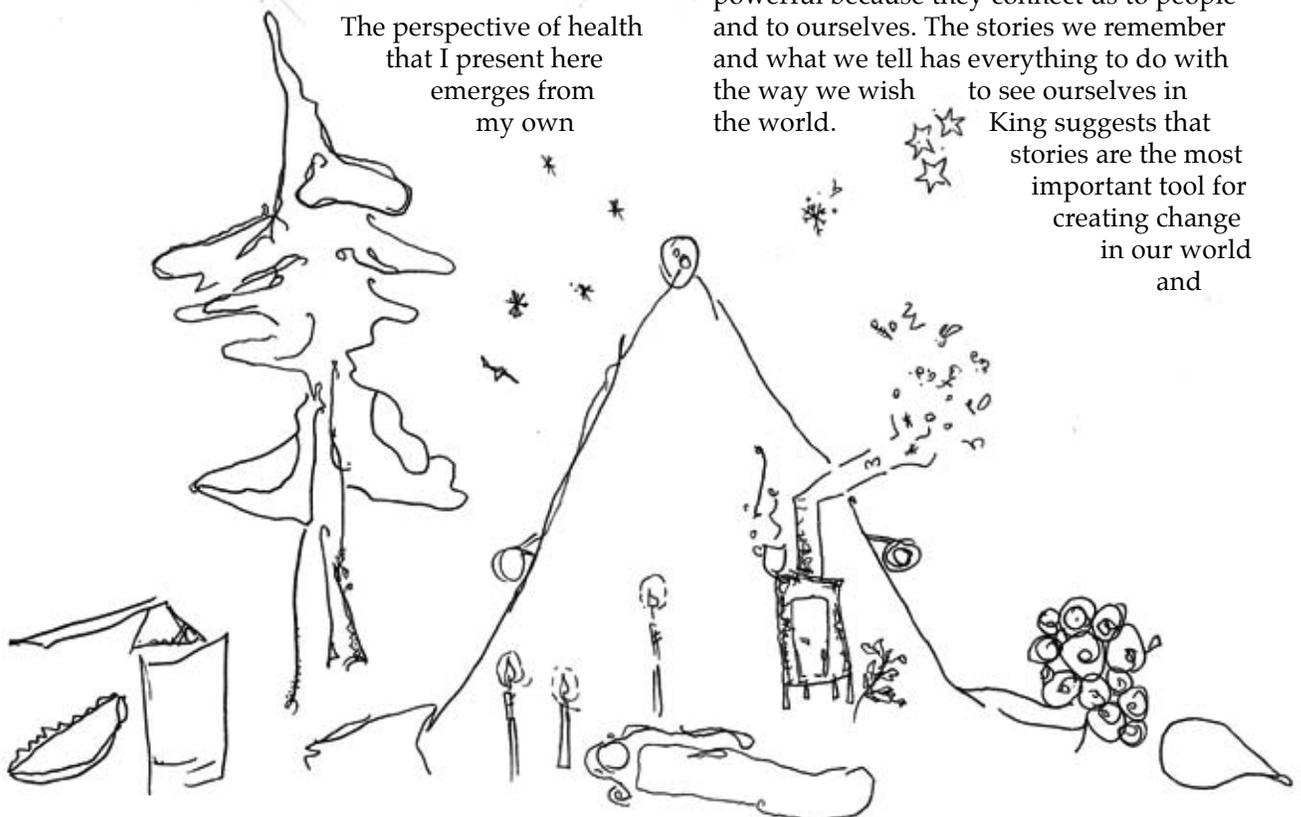
Most of us acknowledge that being healthy is a desirable goal. But what does it mean to be healthy in the 21st century? This article begins to explore the idea of health. It begins to ask questions about where the idea of health comes from, what it means to different people in different places and why it should matter. As society has been increasingly confronted with the realities of a more economically and technologically driven global society, health has evolved from the human sciences into new spheres, such as politics, economics, popular culture, commerce and religion, where it has arguably taken on new meanings. Health is not simply an optimum "number," "percentage" or "determinant," nor is it a problem with a simple solution. The full story of health is the unfolding journey of an idea and how this idea is changing the way we think, feel and act in today's context.

experiences over the last 31 years. These experiences started in childhood; they continued throughout my schooling years and, more recently, have persisted in my roles as athlete, activist, teacher and scholar. This journey is worth exploring because, as I will argue, it coincides with the evolution of ideas about health, from a reductive approach to an emerging approach that embraces health in a "whole"istic way. Whether teaching, working or advocating for environmental education, I invite you to engage in this dialogue about the relationship between human health and environmental health. So, put the kettle on. Here we go.

In *The Truth About Stories*, Canadian author Thomas King (2003) writes, "The truth about stories is that that's all we are" (2003, p.32). King's message is simple; narratives are powerful because they connect us to people and to ourselves. The stories we remember and what we tell has everything to do with the way we wish to see ourselves in the world.

King suggests that stories are the most important tool for creating change in our world and

The perspective of health that I present here emerges from my own



that there is power in repeating the stories that we want to create. He writes, “Want a different ethic? Tell a different story” (p. 164). This is a story about the changing ethic of health.

### Knowing Together

I grew up on a small farm in southeastern Manitoba. It was an environment that encouraged activity, prompted creativity and promoted learning. I was a spirited child with a high degree of energy and curiosity, which I demonstrated while roaming, exploring, playing, singing and dancing wildly. I discovered the world with all the senses and marvelled at its beauty. When I was six, the same year I started school, I started taking skating lessons. I fell in love with skating immediately, but unfortunately I didn’t have the same reaction to school. It was bewildering to sit at a desk to learn. What about our bodies? Weren’t our bodies an integral part of learning? Over time, school became a place where I felt confined and controlled, and where I understood that “mind-learning” was privileged over “body-learning”. Gym class was the only class where we were allowed to focus on our bodies and were allowed to run and play. This was the beginning of learning the world apart.

### Learning Apart

As the years passed, the body-mind separation approach did not change, but intensified. I gained knowledge about the world by sitting through classes such as biology, science and physics. I used my body after school in sports and extracurricular activities. In university this dualism was further reinforced. Kinesiology’s increased focus on the “scientization” of the body (Andrews, 2008) and physical education’s focus on popular industries such as sport, exercise and leisure (Kirk, Macdonald & Tinning, 1997) further entrenched the mind-body disconnection. More recently, however, increasing discourses around the “health crisis” inspired me to question the idea of health. I quickly realized that there is little agreement as to what the idea of health means (Godbey, 1999).

Before the late 1800s, “health” was considered simply the opposite of sickness (Donatelle, Davis, Munroe, Munroe & Casselman, 2004). In other words, people were healthy if they weren’t ill. In the early 1900s, as deadly epidemics spread through society, the idea of health became synonymous with good hygiene. Then in the mid-1900s, members of the United Nations created the World Health Organization (WHO) and defined health as “the state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity” (WHO, 1948). Incredulously this definition has not changed. This historical perspective provides two insights. First, that health is, in fact, an idea that dynamically evolves as new ways of knowing have evolved in time and place. Second, that our ideas of health over the last 60 years have remained relatively static.

Einstein once said, “No problem can be solved from the same level of consciousness that created it.” We can’t simply fix the mess we face with the same kind of thinking that caused the problems in the first place; what we need most is a new kind of change thinking. We need to allow room to reimagine and reconceptualize how we as *healthy* humans live in this world.

Rather than asking, “How do we solve the health crisis?” perhaps we should be asking, “How does the idea of health change the way we arrive at and achieve our personal and our collective goals?” By changing the question, we begin to realize the way we learn about health affects how we take action on health.

When I think back to my own story, I would argue that one of the greatest impacts on my health was sitting to learn, or learning to sit. Edward Eisner (1985) argues that “what schools do not teach may be as important as what they teach” (p. 97). In other words schools aren’t only teaching subjects; they are teaching social expectations, rules and values. While the industrial educational model has undoubtedly helped us to design steam engines and microchips, we now must use our ingenuities to consider the world anew. I argue that there is a growing

need for new approaches to teaching health that are 1) place-based—arguably our health grows out of the places we live, 2) complexity-based—arguably we are part of a larger social-ecological system, and 3) “whole”istic—arguably our health is determined by the balance of our physical, emotional, spiritual and mental states. As David Orr (1994) writes, “It is not education, but education of a certain kind, that will save us” (p. 8).

This paper is not meant to be an ending but a launching off point for more dialogue. While we have tireless champions like Richard Louv (2008), David Orr and David Suzuki advocating for environmental health, we need more people advocating for ecohealth—the idea that environmental health and human health are deeply connected. As David Suzuki (2009) once wrote, “What we do to our oceans, we do to ourselves.”



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