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History of the Physical Dimension

A glance through history illustrates that from the dawn of civilisation primitive man had to be very physically active to survive (Duncan & Watson, 1960). During ancient times, PE was given considerable emphasis by the Spartans, where PE was state regulated, age determined and involved similar experiences for men and women, boys and girls (Phillips & Roper, 2006). However, PE has always been philosophically associated with more than just the physical dimension. The following literature has been amended from Lynch and Soukup (2016).

The Athenians first acknowledged the power of the physical dimension to enhance and influence the other health dimensions: intellectual, emotional, social and spiritual. Similar to the Athenians, the Romans recognised the benefits of physical education for quality of life, but the Romans preferred milder forms of exercise (Phillips & Roper, 2006). It can be argued that the purpose of PE for the Athenians and Romans during this ancient time was similar to HPE today, underpinned by wellbeing—to educate the mind and the body embedded within all dimensions of health. Hence, this chapter connects with the whole child development element; community connections (strengths-based); and the movement

priority element of being, belonging and becoming physically educated (cf. Fig. 1.1).

Whipp encapsulates the historical and present implications of the HPE ideal closely associated with “wellbeing”.

In the past, the Greek ideal; “*Mens sano incorpore sano*”, stressed the importance of having a healthy mind within a healthy body... This communique highlights the importance of a comprehensive educationally-based and strategical approach to wellness that values the role of the health and physical educator. (2015, p. 111)

As addressed throughout the book, holistic HPE is not a new concept to education, but it has more recently been given greater recognition to the contribution that the learning area makes in developing the whole child and the important role the physical dimension plays in wellbeing.

The process of objectifying the body was evident in the second century AD when Galen opened the human body. Galen didn't believe he saw anything, but he only saw what he believed (Kirk, 1993). Leonardo da Vinci (1452–1519) was the first to give an accurate description of the muscles and their functions, which was not published until the end of the eighteenth century (Broekhoff, 1972). In 1679, Borelli metaphorically explained the human body as a machine and “paved the way for the emergence of rationalised systems of physical exercises” (Kirk, 1993, p. 14).

During the Middle Ages, PE held fluctuating relations with the Catholic Church, which was very influential on European culture. The Church “permeated every aspect of culture – scholarship, politics, economics, and even one's private life” (Mechikoff & Estes, 2002, p. 104). While there were occasions where PE was not supported by the Church (Lynch, 2004), it was advocated through key figures during this period: St. Dominic (1170–1221), St. Thomas Aquinas (1225–1274) and Pope Pius II (1405–1464) (Feeney, 1995). This association with the Church strengthened the affiliation between PE and the spiritual dimension of health (Lynch, 2015). Present-day research findings suggest that “potential for spirituality can be capitalized by assuring HPE curriculum is delivered in a quality manner” (Lynch, 2015, p. 217).

Europe has had a large impact on the PE discipline. An Italian teacher, Vittorino da Feltre (1378–1446) first introduced holistic PE as an essential part of the school curriculum, necessary for the “ideal citizen”, encompassing body, mind and spirit (Phillips & Roper, 2006). Another European educator, Johann Friedrich GutsMuths (1759–1839) was accredited for professionalising PE. Germany, at this time, along with Sweden and Denmark perceived PE mainly as military training. Hence, the focus for PE was on drilling and exercising, on coercion, discipline and control rather than enjoyment (Kirk & Twigg, 1993). GutsMuths developed a PE syllabus at Schnepfenthal Educational Institute, Germany. This syllabus became a platform for PE teaching and consisted mainly of gymnastics (Phillips & Roper, 2006). Sweden’s Per Ling (1766–1839) was the first to promote the medical benefits of PE, often associated with a scientific discourse and advocated the various health dimensions.

In late modern history, since the mid-1800s governing bodies otherwise known as organisations grew in numbers to represent people’s interests. William G. Anderson was considered the founder of what is today known as SHAPE America (Society of Health and Physical Educators), having established the organisation in 1885. In 2014, AAHPERD’s (American Alliance for Health, Physical Education, Recreation and Dance) board became SHAPE America. This was the 7th name change of AAHPERD since its original founding as the Association for the Advancement of Physical Education (AAPE) (Yang, 2015). PE has augmented significantly since Per Ling to the present day and “in many respects has thrived since the 1960’s” (Kirk, 2013, p. 974).

Exploring PE globally, considering the growth stated by Kirk and understanding that associations were representative of groups of people; one cannot ignore the impact of the International Council for Health, Physical Education, Recreation, Sport and Dance (ICHPER-SD). Acknowledging that there is no one representative voice for the PE field, there is no denying ICHPER’s influence. ICHPER was established so educators; “could work together on an international basis... an association which was not representative of any one country, or system, or one method of physical education” (Hircock, 1988, p. 73). ICHPER-SD was initiated by AAHPERD [SHAPE America], founded in 1958 in Rome, Italy, and the first ICHPER world congress was “Child health and the school”. The title of

this world congress proposes that health dimensions of PE were promoted. According to Corbin, this was consistent at this time, “central to the ‘new physical education’ was the education of the whole child” (Corbin, 2016, p. 14).

ICHPER-SD has influenced many countries around the world and does acknowledge a HPE approach similar to the Athenians. One such direct influence was in 1970 in Sydney, Australia, at the ICHPER-SD first and only world congress to be held in Oceania. Australian Council for Health, Physical Education and Recreation (ACHPER) was formally known as Australian Physical Education Association (APEA), and the name change was a direct result of ICHPER-SD’s assembly. As cited in Kirk and Macdonald the conference report stated, “the Congress indicated that ‘we in Australia are now part of the international scene’, and it may have been this feeling of connectedness [belonging] internationally through ICHPER along with the great success of the conference that led to the acceptance of an Australian version of this name” (1998, pp. 6–7). The influence on Australia is evidenced in the first of the ten points made in the 1970 ICHPER World Congress Resolutions:

1. Health, physical education and recreation are allied and closely inter-related fields and should be coordinated in the best interests of the community. (ICHPER, 1971, p. 189)

Furthermore, as cited in Kirk and Macdonald, Elaine Murphy (ACHPER National President 1988–1993 and ICHPER-SD Vice President-Oceania) describes: “our description of physical education is just not adequate when health is such a large component (of what we do)... they wanted these words included otherwise they felt that physical education was too narrow” (1998, p. 7). ICHPER-SD “has also directed efforts towards developing countries in order to initiate and strengthen programmes and leadership within the schools and higher education institutions” (Kane, 1989, p. 107). While ICHPER-SD remains a branch of SHAPE America today, sharing headquarters in Reston, Virginia, USA, it is separately governed and operated. However, more recently such national and international organisations have found it increasingly difficult to maintain members and subsequently, remain financially viable. This has

forced contemplation of their purpose and need during a time of technological advancements which have allowed global connections, for example, through social media.

Navigating one's health with a health preventative focus involves connections and partnerships. This perspective offers guidance for education departments and governments when implementing HPE in schools, and sport generally within communities. Megatrends predict that in the future, education departments need to be prepared for a quality of life with limited world resources; world economy shifting from north to south, west to east; associated healthcare costs and the responses in lifestyles and services; and the rising importance of social relationships (Hajkowicz, Cook, & Littleboy, 2012). However, as the literature evidences, limited resources have been problematic for H/PE throughout modern history and remain a problem today (Cale & Harris, 2019; Commonwealth of Australia, 1992; Hardman, 2008; UNESCO, 2008, 2014). Furthermore, when faced with limited resources, educators find it easier to implement PE through adopting a behavioural approach which forms a barrier for health education (Westbrook, Durrani, Brown, Orr, Pryor, Boddy, Salvi, 2013).

Partnerships in HPE related areas sit within a “strengths-based” approach which “supports a critical view of health education with a focus on the learner embedded within a community's structural facilitators, assets and constraints, and is enacted through resource-oriented and competence-raising approaches to learning” (Macdonald 2013, p. 100). An example of a strengths-based approach is Antonovsky's salutogenic model which involves:

- A focus more so on the promotion of healthy living rather than on preventing illness;
- The viewing of healthy living as multidimensional and encompassing physical as well as social, mental, spiritual, environmental and community dimensions;
- Consideration of health as something dynamic, always in the process of becoming;
- Viewing health as something more and also something else than the absence of disease;

- Acknowledging humans as active agents, living in relation to their environment; and
- That health is not regarded as an end goal in itself, but rather as an important prerequisite for living a good life (McCuaig, Quennerstedt, & Macdonald, 2013, p. 113).

Adopting a strengths-based approach from a salutogenic perspective, specifically through partnerships advocates preparation for life and well-being where knowledge and skills can be transferred and adapted across contexts (Lynch, 2016).

It can be evidenced that the holistic HPE ideal has existed and evolved since the Athenians and was strong during the twentieth century, although it was referred to as “physical education”. As aforementioned, Robbins, Powers, and Burgess identify seven dimensions of health (HPE ideal), referred to as wellness: physical, intellectual, emotional, social, spiritual, environmental and occupational. Additionally, “there is a strong inter-connection among these dimensions” (2011, p. 9). Research suggests that “HPE should be embraced in all schools for its ability to offer opportunities in a holistic manner” (Lynch, 2015, p. 217). Throughout history, physical education has been an all-encompassing term, the one term consistently used to represent a number of discourses, ideologies, philosophies and aspects of movement development.

Exploration of the past reveals that physical education (PE) has been influenced by two philosophies: (1) body viewed as an object and (2) the view of the whole person: body, mind, spirit and wellbeing. It is important to understand these two philosophical influences in recognition that PE is socially constructed and subsequently semantics have evolved over time.

Literature suggests that on occasions throughout history PE has been responsible for “schooling” the body, where the body is viewed as an object. The body as an object occurs “in a society when man [and woman] has gained the capacity of looking at his [or her] own body as if it were a thing” (Broekhoff, 1972, p. 88). This concept is described by Kirk as a “useful and controlled body, one which is appropriately skilled with the capacities to meet the standards of acceptable social behaviour of any particular society and to make a productive contribution within the economic system” (1993, p. 13). Reiterating, the companion PE discourses to have

influenced this philosophy include military, scientific, health and sporting—which portray ideologies which include sexism, elitism, healthism, individualism and mesomorphism—which is discussed in more detail (cf. Chapter 9) (Colquhoun, 1991, 1992; Hickey, 1995; Kirk, 1992; Kirk & Twigg 1993; Scraton, 1990; Tinning, 1990; Tinning & Fitzclarence, 1992; Tinning, Kirk, & Evans, 1993). Wherein, students acquire knowledge and attitudes unintentionally while in the school environment (Kirk, 1992). Such ideologies are regarded as problematic as they give false messages (Kirk, 1992). The term “schooling” the body is appropriate for this “body as object” philosophy due to the dominant behavioural approach to health education it adopts.

The introduction of the socio-cultural approach saw a philosophical shift using a “holistic” discourse in PE. This holistic view was influenced by an inclusive ideology and in some regions of the world was relabelled HPE. This shift has occurred on numerous occasions throughout history but most recently began as a complex counter discourse to those associated with the “body as object” philosophy. This discourse changed perception of the body as a separate object, to that of the “whole person”: body, mind, spirit and wellbeing.

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