58 - THE ROLE OF PHYSICAL EDUCATION IN THE PROMOTION OF HEALTH: EXPLORING TERRITORIES

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Introduction

The goal of this paper is to explore, based on a literature review, the role of Physical Education (PE) in the promotion of health. In the first part of the paper, I will explore some of the relationships between physical activity and health. I will also talk about a conception of health that not only takes into consideration the relationships between health and social, economical, educational and cultural factors, but also considers the different dimensions of being (physical, emotional social and spiritual). Besides, I will also explore some of the factors that tend to determine adhesion or the lack of adhesionto physical activity. In the second part of the paper, I will discuss some of the actions that the field of PE of could possibly take in order to help promote health.

Physical activity and health

According to various researches (e.g.; CORBIN, 1987; KOHL, 2001; 1987; PAFFENBARGER, HYDE, 1984; PAFFENBARGER et al., 1986, PATE et al. 1995; POWELL, 1988), the adequate and regular practice of physical activity can be an important means to promote health and prevent cardio-vascular diseases. Some of the main benefits of this kind of activity commonly remarked in the literature are the following:

(a) the reduction of `bad cholesterol` (LDL) and the raise of ´good cholesterol´(HDL), which fights obesity and reduces the risk of cardiovascular problems such as arteriosclerosis and myocardium infarct; (2) the increase of vascularization, which favors the nutrition of body tissues and combats hypertension (...); the improvement of heart efficiency, a result of the growth of heart cavities and of hypertrophy of the myocardium; (d) the strengthening of muscles, joints and bones, which diminishes the risk of injuries and makes it difficult the appearance of illnesses such as osteoporosis; (e) the increase of the respiratory capacity, which favors gaseous exchanges; (f) the improvement of muscular force and flexibility, which reduces back pain and the risk of joint lesions and optimizes the person's autonomy for daily activities, amongst other adaptations. The regular practice of physical activities has also been associated with benefits in the psychological sphere, such as reduction of anxiety, depression and stress (…) and with the improvement of mood (FERREIRA, 2001, p. 42, my translation).

Another benefit of physical activity to health well emphasized in the literature is the reduction of risks for cancer (FRIEDENREICH, 2001; THUNE, 2001) and for diabetes mellitus type 2 (HU et al., 2001).

While various studies have been developed aiming at investigating the possible benefits of physical activity to health, the majority of them have been restricted to a conception of health connected almost exclusively to the biological dimension of people. Opposing the strong biological bias implicit in these studies, some authors have been emphasizing that while this focus is important, it can become problematic, since health involves factors that go beyond the physical dimension. Some of these other factors that also need to be considered are, for instance, housing, basic sanitation, environmental conditions, work circumstances, income, nutrition, transportation, physical activity level, availability of leisure time, and access to health services (CARVALHO, 2001; FERREIRA, 2001; PALMA, 2001).

Another important aspect in the discussion about health that needs to be addressed is culture. At the same time that our culturethe Western culturevalues health, it also promotes an unhealthy lifestyle through the imposition of long hours of working; little time for personal development and leisure; degradation of the environment; bad alimentary habits; superficial and depersonalized relationships; materialistic and consumerist values and practices. This culture also promotes a series of fragmentations such as between the individual and the natural environment, between body and mind, work and leisure, and between different kinds and ways of knowing. These factors have been leading people away from their deepest and most genuine aspirations and needs. As a consequence, many individuals no longer feel happy and/or can find a significant meaning to their existence (DE SOUZA, 2000; OLIVER, GERSHMAN, 1989; ROCHA, 2002, 2004). To worsen this situation, this culture has also been fostering a process of “unembodiment” of experiences. In other words, it has been promoting a process in which people are losing contact with their body as a result of the use of technological apparatuses to execute their work, to move themselves around, to relate to people and to the environment where they live; and to enjoy the little time of leisure that lasts to them after long working days. This has been leading some peopleeven those who have better educational and financial conditionsto an increasingly sedentary and artificial lifestyle. In spite of the increase of longevity, people are becoming more physically limited, the social relationships are becoming more fragile, and psychological problems, such as depression, are becoming more usual (ROCHA, 2005).

Until recently, the conception of health was tied, almost exclusively, to the idea of “absence of illnesses”. Today, we can affirm with some certainty, that even though the condition of health is strongly connected to the biological dimension of human beings, this condition goes beyond this aspect. It encompasses the social, economical, cultural and natural aspects of the environment where we live. Therefore, to discuss health, I use as a starting point the definition of the World Health Organization, which considers health as a state of complete physical, psychological and social well-being. To this definition, I associate contributions of the holistic/systemic perspective (CAPRA, 1983), which considers the human being in all his/her aspectsphysical, emotional, cognitive, social and spiritualand takes into consideration the interconnections and interdependences that exist between all these dimensions and between the individual and the social and natural environment where he/she lives. I would like to remark that the spiritual dimension in this perspective does not have a religious connotation. It relates to qualities such as a sense of connection between the individual, other people and the natural environment; a level of self-knowledge and self-control so that people can live their life in authentic and coherent ways with their true aspirations and needs; and a sense of gratefulness and pleasure for being alive (DE SOUZA, 2000; ROCHA, 2002; ROCHA, 2004).

The role of Physical Education in the promotion of health

Although the role of Physical Education in the promotion of health (in its biological dimension) is well evidenced through scientific studies concerning the subject and through the divulgation of these studies through the media, a significant percentage of the population does not engage regularly in physical. A study developed by Datafolha with 2.054 individuals between 18 and 60 years old in 98 Brazilian cities sampled randomly, showed that 60% of the interviewed subjects did not practice any type of physical activity (Folha de São Paulo, 27.11.97). Another study published by Pitanga e Lessa (2005) involving interviews with 2.292 adults in the city of Salvador from diverse social and educational levels, indicated that 72,5 % of the interviewed subjects are sedentary during their leisure time. It is important to remark though, that for these researchers, sedentary behavior usually shows in four types of circumstances: domestic activities, work, transportation and leisure time. This means that perhaps, part of the population that they interviewed, practices some type of physical activity for

transportation or domestic and professional activities. But still, the numbers related with sedentary behavior are alarming.

While various studies, including this one by Pitanga e Lessa (2005) indicate that the lack of adhesion to regular and permanent physical practices is more significant in populations with lower income background, social and economical factors by themselves are not able to explain the phenomenon of sedentary behavior. According to Nonomura (1998)who develops a literature review about the factors that determine adhesionor lack of adhesionto physical activity, there is a high degree of sedentary behavior also in developed countries such as the USA and England. These data lead us to conclude that, even though social, economical, educational, and cultural factors play an important role in the level adhesionor notto physical activity, they by themselves do not explain the low level of enrollment of people in this kind of activity. This phenomenon also occurseven though in lower proportionsin developed countries and in populations with high educational and economical conditions.

According to Nonomura (1998), some of the most important variables associated with sedentary behavior and/or with physical activity adhesion besides social, economical and educational factors are age, sex, civil state, state of health and type of occupation. Also according to him, the most important variables that tend to lead to sedentary behavior are lack of time, fatigue, lack of motivation, lack of knowledge and autonomy for the practice of physical activity, low level of physical and motor capacity, medical problems, lack of access to installations and equipment. Yet, factors that tend to lead to adhesion to physical activity are weight control, aesthetic goals, feeling of disposition and well being, health benefits, pleasure, anxiety and stress reduction, socialization, level of knowledge in relation to the importance of physical activity for health purposes, perception of available time, family support, access to environments, installations and equipment, previous participation in physical activity programs and self-confidence in being able to achieve good results in this kind of activity again.

As we can observe, there is a multiplicity of factors related with the adhesionor lack of adhesionto physical activity. While on one hand the PE cannot by itself take care of all these factors, it can certainly offer some contributions for a higher degree of adhesion to this kind of activity in different ways. One of them would be by promoting a higher level of consciousness about the importance of physical activity for the development and health of people. Although there is a lot of talk about the benefits of this kind of activity for the physical dimension of individuals (e.g.; force, flexibility, agility, aerobic resistance) and its potential to prevent cardiovascular diseases, there is little explored about its contributions for other human dimensions. In the psychological dimension, it can contribute, for instance, propitiating an alternative way for the individuals to express their thoughts and feelings. It can also contribute with stress release and self-esteem. In the social dimension, it can be a means to contact others and to deepen relationships. In the spiritual dimension, it can help promote the development of self-knowledge, self-control, self-discipline, self-transcendence a sense of connection with others and the natural environment (ROCHA, 2003a). Considering that the first years of life determine in significant ways behavior patterns and likes and dislikes, which can hardly be changed later in life, one of the most important roles of PE should be to nourish in children, since their first years of life, the taste and the habit of becoming involved in physical activities.

Another important role of PE should be to promote the development of physical skills that can be useful for life (CORBIN, 1987). The development of certain skills is fundamental, since as Steinback (2001) points out, the higher the participation level of the individuals in physical activities in infancy and in adolescence, and the better the degree of physical skills developed during the earlier years of life, the more elevated are their chances to engage themselves in physical activities also as adults. The habit to practice physical activity since early age is also important, considering that there are evidences that some of the risk factors for cardiovascular diseases, as for instance, arteriosclerosis, can start to develop, at a sub-clinical level, in early childhood (MAITINO, 1998).

PE should also promote the autonomy of people for adequate and permanent practices of physical activity (ARMSTRONG, 1990; FERREIRA, 2001; PALMA, 2001). This way, as they leave schools and gyms and are no longer being cared by their teachers and trainers, they can “carry through their preferred practices within adequate physiological parameters” (PALMA, 2001, p. 32). Ferreira (2001, 45) explains:

Techniques and rules are not enough so that youngsters can regularly practice physical activities. It is necessary that they learn how to engage in these activities safely and efficiently. In other words, it is necessary that they develop a minimum level of autonomy to practice these activities by themselves. At last, it is necessary that they have access to the basic contents of o other fields of knowledge such as physiology, biomechanics, nutrition and anatomy. (my translation)

This author offers an interesting example of how a PE professional can promote the autonomy of his/her students. Taking running as one of the athletic modalities to be worked, he suggests that besides teaching the rules, techniques, and the history of running, the teacher should also introduce the student to questions such as

(...) the importance of cardiac frequency in the monitoring of the person's physical effort during physical activity and the correct ways of doing so; the best way of breathing; the adequacy of the clothing and footwear for the activity; the hydration and feeding before, during and after a long distance run; how to warm up properly; the contraindications of running; running for losing weight. These would be some issues that should be discussed with the students. Even injuries and discomforts (cramps and tendon inflammations, etc.) caused by badly guided running, which are subjects of habitual interest to even laypeople, could be explored to expand the knowledge of pupils. (FERREIRA, 2001, p. 45, my translation)

As we defend the development of autonomy so that individuals can engage themselves in physical practices, we cannot forget that autonomy takes more than knowledge, skills and the will people may have to practice such activities (PALMA, 2001; FERREIRA, 2001). Many individuals can never exert their autonomy for such practice for reasons that are beyond their control. Women, for example, who work 8 hours a day besides their domestic obligations and the time necessary to care for their children, do not have the freedom to practice, according to their desire and will, some kind of regular and systematic physical activity. People who work 10 hours a day in construction sites loading and carrying cement bags, bricks and roof tiles, rarely will find energy and motivation to get involved with other kinds of physical activity, considering the degree of fatigue that they find themselves at the end of the day. Or yet, those who hardly have what to eat will not have the energy for exercising. Issues such as those should be taken into consideration in PE classes, so that this way, children can gradually develop a level of consciousness about the difficulties of the world where they live. This way, as they mature, they will be prepared to join others to contribute for the transformation of the hard reality in which significant part of the population lives.

Another factor that interferes with the supposed autonomy of the individuals to engageor notin physical activity that needs to be taken into consideration, is the myth that the practice of this kind of activity demands expensive clothing and equipment, specialized spaces, and the presence of personal trainers and/or other highly qualified professionals. These are elements and conditions that great part of the population doesn't have free access to and doesn't have how to pay. The PE professionals should try to clear up this kind of mystification, even if this costs them have to assume the risk of restringing momentarily, their field of work.

Final considerations

As we explore the role of PE in the promotion of health, I'm aware that the PE alone cannot do much to improve the health conditions of the majority of the population. As I argued above, the condition of health has multiple faces and determinants that demand transformations at the political, economical, social, and cultural spheres. But while we make an effort along with professionals of other areas to promote all the needed structural changes in these spheres, we as PE professionals can also give our contribution in our specific field of action in different ways. Some of the actions we can possibly

take are to promote a higher level of consciousness both about the importance of physical activity for our health and about the factors that usually determine the regular adhesionor lack of adhesionto physical activity; foster a taste for physical activity and for the habit of practicing it regularly; promote the development of physical aptitudes; and promote the knowledge necessary so that the individuals can engage themselves in physical activity in regular, permanent and autonomous ways.

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THE ROLE OF PHYSICAL EDUCATION IN THE PROMOTION OF HEALTH: EXPLORING TERRITORIES

Abstract: the goal of this paper is to explore, based on a literature review, the role of Physical Education in the promotion of health, having as a basis a conception of health that involves the different dimensions of human beings (physical, emotional, social and spiritual). In the first part of the paper, I make a brief review about some benefits of physical activity to health. Next, I argue that although many researchers discuss health from a biological perspective, the condition of health is multidimensional. In other words, it involves the different aspects of human beings and relate to social, economical,

educational and cultural aspects. Therefore, all these aspects need to be considered when we discuss the relationships between physical activity and health. In the second part of the text, I present some factors that usually determine the adhesionor lack of adhesionto physical activity, and argue that, even though the Physical Education alone cannot take care of this multiplicity of factors , it can, amongst other things promote: (1) a higher level of consciousness about the importance of physical activity to health and about the factors that usually determine sedentary behavior and adhesion to physical activity; (2) a taste for physical activity and the habit of practicing it; (3) the development of physical skills; (4) the kind of knowledge needed so that the individuals can get engaged in physical activity in regular, permanent and autonomous ways.
Keywords: Physical Education; physical activity; health

LE RÔLE DE L`EDUCATION PHYSIQUE DANS LA PROMOTION DE LA SANTÉ : EXPLOITANT TERRITOIRES

Résumé : l´objet de ce travail c´est celui d´exploiter le rôle de la EP dans la promotion de la santé, ayant comme fondement une conception de santé qui enveloppe les diférentes dimensions humaines (physique, émotive, sociale et spirituelle). Dans la première partie du texte, je fais une brève révision sur quelques-uns des bienfaits de l´activité physique à la santé. Par la suite, j´argumente que bien qui aujourd´hui beaucoup de gens discutent la santé `a partir d´une perspective biologique, elle est multidimensionelle (ça enveloppe les différents aspects de l´être humain) et se met en rapport avec des facteurs socio-économiques, éducationels et culturels. Donc, tous ces aspects doivent être considérés quand on discute les rapports entre activité physique et santé. Dans la seconde partie du texte, je présente quelques facteurs qui determinent habituellement l´adhésionou le manque d´adhésion à l´activité physique, et j´argumente que, quoique l´ educacion physique ne puisse pas rendre compte toute seule de cette multiplicité de determinants, elle peut, parmi d´autres choses, encourager : (1) une plus grande conscientisation sur l´importance de l´activité physique pour la santé et sur les facteurs qui déterminent habituellement le sédentarisme ou l´adhésion `a l´activité physique ; (2) le goût pour l´activité physique et l´habitude de la pratiquer ; (3) le dévéloppement d´aptitudes physiques ; (4) les connaissances nécèssaires pour que les individus puissent s´engager en des activités physiques de forme autonome, regulière et permanente.
Clé de mots : education physique ; santé ; adhésion à l´activité physique.

EL PAPEL DE LA EDUCACIÓN FÍSICA EM LA PROMOCIÓN DE LA SALUD: EXPLORANDO TERRITORIOS

Resumen: El objetivo de esto trabajo es explorar el papel de la Educación Física en la promoción de la salud, teniendo como fundamento una concepción de salud que incluye las diferentes dimensiones humanas (física, emocional, social, y espiritual). En la primera parte del texto, hago una breve revisión sobre algunos de los beneficios de la actividad física para la salud .Después argumento que aunque hoy en día muchos discutan la salud a partir de una perspectiva biológica, ella es multidimensional, incluyendo los diferentes aspectos del ser humano y se relaciona con factores socio-económicos, educacionales y culturales. Por lo tanto, todos los aspectos necesitan ser considerados cuando se discute las relaciones entre actividad física y salud. En la segunda parte del texto, presento algunos factores que acostumbran determinar la adhesión o falta de adhesión a la actividad física y argumento que aunque la educación física no pueda dar cuenta por sí misma de la multiplicidad de determinantes, ella puede ,entre otras cosas, promover: (1) Una mayor concientización sobre la importancia de la actividad física para la salud y sobre los factores que suelen determinar el sedentarismo o la adhesión a la actividad física; (2) El gusto por la actividad física y el hábito de practicarla; (3) El desarrollo de aptitudes físicas; (4) Los conocimientos necesarios para que las personas puedan sentirse atraídas a una actividad física de una manera autónoma, regular y permanente. Palabras-llave: Educación Física; salud; adhesión a la actividad física.

O PAPEL DA EDUCAÇÃO FÍSICA NA PROMOÇÃO DA SAÚDE: EXPLORANDO TERRITÓRIOS

Resumo: o objetivo deste trabalho é o de explorar, a partir de uma revisão de literatura, o papel da Educação Física na promoção da saúde, tendo como base uma concepção de saúde que envolve as diferentes dimensões humanas (física, emocional, social e espiritual). Na primeira parte do texto, faço uma breve revisão sobre alguns dos benefícios da atividade física à saúde. A seguir, argumento que, embora hoje muitos discutam a saúde a partir de uma perspectiva biológica, ela é multidimensional (envolve os diferentes aspectos do ser humano) e relaciona-se com fatores sócio-econômicos, educacionais e culturais. Portanto, todos estes aspectos precisam ser considerados quando se discute as relações entre atividade física e saúde. Na segunda parte do texto, apresento alguns dos fatores que costumam determinar a adesãoou a falta de adesãoà atividade física, e argumento que, embora a Educação Física não possa dar conta sozinha desta multiplicidade de determinantes, ela pode, entre outras coisas, promover: (1) uma maior conscientização sobre a importância da atividade física para a saúde e sobre os fatores que costumam determinar o sedentarismo ou a adesão à atividade física; (2) o gosto pela atividade física e o hábito de praticá-la; (3) o desenvolvimento de aptidões físicas; (4) os conhecimentos necessários para que os indivíduos possam engajar-se em atividade física de forma autônoma, regular e permanente.
Palavras-chave: Educação Física; atividade física; saúde.