

Fitness and Health

ACCORDING to Homer, one setting for the adventurous wanderings of Odysseus was on the island of the Phaeacians. There, King Alcinous arranged to have the best of his athletes perform for his guest. After a superb and spectacular display of sports feats, Odysseus was asked if he too wished to demonstrate his skill. Seizing a discus larger than had been used by any of his counterparts and dashing out onto the field with a heavy cloak restricting his movements, he opened wide the eyes of his competitors by showing his superior strength and fitness in hurling the missile farther than all the rest.

History is replete with illustrations of people throughout the world who considered physical prowess and strong, healthy bodies the vital ingredients for survival and power. The desire for physical excellence and well-being has its roots deeply imbedded in historical tradition. For early man the ability to survive was dependent to a large degree upon his accuracy with the bow and arrow, swiftness of foot, strength of muscle, and ability to withstand trying physical ordeals. Nature literally kicked man into activity, as one historian relates.

As man became more and more civilized, the concept of "survival of the fittest" was augmented by other catalytic agents which propelled him into action. Statements from two of the world's great

thinkers illustrate these motivating factors: Aristotle—"The body is the temple of the soul and to reach harmony of body, mind and spirit, the body must be physically fit." John Locke—"A sound mind in a sound body is a short but full description of a happy state in this world; he that has these two has little more to wish for."

As the motives for well-being have changed, so have the preventive and medical procedures for achieving and maintaining fitness and health. Herb medicines, witch doctors, healing chants, and bloodletting remedies have given way to wonder drugs, immunizations and vitamins.

Today we have much scientific knowledge to direct us assuredly along the path to good health. And according to the health experts, the way each human being lives will be a major determining factor for the health and fitness of that individual. Although heredity plays a part, to a large degree health and fitness are acquired characteristics. The food we eat, amount of rest we get, physical activity we engage in, and other health practices we follow play important roles in determining our welfare. In other words, it is important to follow a good health regimen if we are to be healthy and fit. This is especially important today in our automated society where advertising lures, medical quack-

ery, fake short-cuts to health, and other temptations embrace us on all sides.

Instruction in Living

In order to help people follow a healthful regimen, *education* is essential. It is important to educate people about English so they can communicate articulately with their fellow human beings, about mathematics so they can add their grocery bills accurately, and about the fine arts so they can appreciate and enjoy Picasso and Beethoven. It is also important to educate people about their physical selves so that they can function most efficiently as human beings and accomplish all they are capable of achieving. To attain this objective, they need to know scientific facts essential to good health, possess desirable health attitudes, develop skills to make activity exciting and enjoyable, and be physically active. The end result will be productive, vigorous, and rewarding lives. As Will Durant advises, health is mostly within each person's will. "In many cases, sickness is a crime. We have done something physiologically foolish, and nature is being hard put to it to repair our mistakes. The pain we endure is the tuition we pay for our instruction in living."

Much of this education needs to take place early in our lives when the organic foundations are being laid, skills are more easily learned, and attitudes are being formed. Too many of us, unfortunately, do not recognize the need for this education until cholesterol deposits have closed our arteries, ulcers have penetrated our duodena, or cancer has started its insidious attack upon our lungs. As one wise man has said, "We never appreciate health so much as when we lose it." Although it may be difficult to change the health habits of adults, we *can* and

should educate young people about their health and fitness. This is not only essential from the individual's point of view but also in light of our national posture. President Kennedy states: "The strength of our democracy is no greater than the collective well-being of our people. The vigor of our country is no stronger than the vitality and will of our countrymen. The level of physical, mental, moral and spiritual fitness of every American citizen must be our constant concern."

The facts that 10 million out of 40 million school children cannot pass a screening test of minimum physical fitness and that many young people have undesirable health practices, offer evidence that our educational programs are inadequate in this regard.

This journal is proud to present herewith a series of articles to help clarify the issues and provide helpful suggestions in the development of sound school health and physical education programs. To set the stage for this series of articles, the following definition of terms and concepts may assist educators in evaluating their own health and physical education programs:

1. *Fitness implies more than physical fitness.* Fitness is the ability of a person to live a full and balanced existence. The totally fit person possesses physical well-being but also such qualities as good human relations, maturity, and high ethical standards. He also satisfies such basic needs as love, affection, security, and self-respect. School health and physical education programs are vitally concerned with physical fitness but also strive to contribute to total health and fitness.

2. *Physical fitness includes more than muscular strength.* The term physical fitness implies soundness of such body or-

gans as the heart and lungs, a human mechanism that performs efficiently under exercise or work conditions (such as having sufficient stamina and strength to engage in vigorous physical activity), and a reasonable measure of skill in the performance of selected physical activities. The same degree of physical fitness is not necessary for everyone. It depends on the characteristics of the tasks to be performed.

3. *Physical education is not the same as health education.* Although closely allied, health and physical education are separate fields of endeavor, each requiring its own trained specialists. Whereas physical education is concerned primarily with education of and through the physical, the school health program is concerned with teaching for health (e.g., imparting facts about good nutrition), living healthfully at school (providing healthful physical and emotional environment), and providing services for health improvement (e.g., measures for control of communicable disease).

4. *Health and physical education both contribute to physical fitness.* The student needs to engage in regular physical activity but in addition needs to understand the impact this activity has on his organism. The student needs to have activities fitted to his individual requirements but also needs to have these activities conducted in a safe and healthful environment. The student needs to develop skill in various sports but also needs skill in first aid and home nursing. These are only a few examples of how the health and physical education programs complement and supplement each other in the achievement of the physical fitness objective.

5. *Health education and physical education must be integral parts of the in-*

structional program in order to achieve most effectively the goal of physical fitness. These subjects are not frills or appendages of the school's curriculum nor are they a means for entertaining students. They should be vital parts of every educational program in this country. Only as they are so recognized will it be possible to achieve the goal of fitness and health for all our young people. Furthermore, such recognition cannot be merely in the form of lip service, but must be repeatedly injected into programming, scheduling, and other practices that reflect the true educational philosophy of each school.

6. *Good leadership—the key to good health and physical education.* The good health or physical education teacher is not someone who merely looks healthy, can produce a string of sports victories, or give a good speech before the Rotary Club. Leadership is basic in education and this calls for men and women who know their subject, the boys and girls they are teaching, and the best methods and techniques for teaching.

7. *Physical fitness is not synonymous with physical education.* Physical fitness is one objective of physical education. It is important to have physically fit boys and girls. However, as long as the word "education" is a part of the term "physical education," there are more extensive responsibilities. Developing physical skills, imparting knowledge about the human organism, and using the body as a vehicle for achieving desirable social traits, also represent desirable goals. Any program or curriculum aimed merely at building strength and muscle is failing in its educational mission.

8. *Interschool athletics represent only one part of the total physical education*

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It seems to me that some of the major problems in physical education programs are these:

1. At the school level there is wide disagreement in the area of common goals.

2. Many schools still retain unrealistic systems of evaluation and marking.

3. There is little, if any, attempt to identify individual needs, and mass prescription remains in effect.

4. Notable inequities exist in the allotment of supplies, equipment, personnel and facilities in favor of the boys as against the girls.

5. The need for realistic progression in the teaching of motor skills to students as they advance from grade to grade is too often ignored.

6. The athletic tail wags the corporate dog.

Such a cataloging of problems is arbitrary, of course. "On the spot" checks show that few schools can be indicted on the basis of all six points. Unfortunately, one or more seem to apply in most of the schools visited.

Informed and imaginative physical educators are now looking for ways and means to solve these and other related problems. Evidence of new growth is reflected in numerous local projects which take the form of:

Pilot studies in flexible scheduling

Team teaching and ability grouping

Creation of cores of health, physical education, and recreation

Critical appraisal of existing marking systems

Structured leadership programs

Improved programs of rehabilitation

Increased opportunity for election

Recognition of the need to utilize the learning potential inherent in coeducational physical education.

It is along these lines, I believe, that physical education must work its way toward becoming more and more an in-

tegral part of the education of the whole person—not the whole of the education of one part of him.

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Editorial

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program that contributes to physical fitness. The school physical education program includes the class program for all students, the adapted program which fits the activities to handicapped or atypical individuals, the intramural and extramural program which provides a laboratory experience for the skills and knowledge imparted in the class program, and the interscholastic athletic program for those students with exceptional physical skill. All four of these aspects of the physical education program must function in a manner which affords balance and harmony, and which allows for the achievement of physical fitness and other objectives for *all* students.

9. *The development of physical skills—a major contribution to long-term physical fitness of students.* Obstacle courses and calisthenics represent forms of "canned" activity which yield organic benefits to the student; but a major contribution of any physical education program is to teach boys and girls a wide variety of physical skills. Such skills are the motivating agents which will enable the boy or girl to engage in activities and promote physical fitness, not only in the present but throughout a lifetime as well.

10. *Administrative support and understanding are needed to achieve physical fitness.* The quality of school health and

physical education programs will be largely determined by the administrative leadership of the school and community. Boards of education, superintendents of schools, principals and other administrative officials will decide the prestige these programs have in the eyes of the students. Their prestige is strongly influenced by such factors as these: Whether credit is given to the subjects when calculating the requirements for graduation, how much money is provided in the budget for their development, the attention given to girls as well as boys, the degree of emphasis on physically underdeveloped students as compared to gifted athletes, and other administrative matters which affect the physical fitness of students.

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Health Education

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others to the conquest of disease; and debated the question, "Should immunization be mandatory for all?"

They invited special resource persons, such as representatives of voluntary health organizations, a public health nurse, and a sanitary engineer, to talk with them about community disease control measures. They developed colonies of bacteria and observed stained slides of disease germs. They surveyed their community for the presence of insects that might carry disease and discussed control measures. They visited the community water and sewage disposal plants to observe protective measures. They discussed with the school physician the need for regular medical examinations. They surveyed community resources for the care of sick persons and

reported on types of treatment offered.

Individuals investigated contributions made by the State Health Department and the Public Health Service to the health and well-being of their community. They explored the role of the World Health Organization. These activities were kept solidly rooted in fact through constant reference to texts and resource books. Pupils who participate in this type of learning experience not only gain in factual knowledge, but also in the ability to make intelligent judgments about community measures for the control of disease.

Well-known are figures citing increasing longevity of American men and women and the comparative freedom from disease which we enjoy. Credit is due to widespread medical research, the availability of health services and, not least, to an educated citizenry impelled to take positive action in caring for its own health.

In a recent publication, the Educational Policies Commission stated that: "Health . . . depends upon a reasoned awareness of the value of mental and physical fitness and of the means by which it may be developed and maintained. Fitness is not merely a function of living and acting; it requires that the individual understand the connection among health, nutrition, activity and environment and that he take action to improve his mental and physical condition."

Modern health education helps children and youth gain understandings and develop attitudes that enable them to maintain and improve their own health and that of their families and communities. Health education contributes to the attainment of the purposes of education. It is a basic component of the school curriculum.

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