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Teaching ‘health’ in physical education in a ‘healthy’ way

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Abstract. In many countries around the world, the subject of physical education (PE) is explicitly and directly responsible for the health education of children and young people. However, although the official policy texts for each curriculum describe health in a holistic way, referring to the development of mental, social, emotional as well as physical wellbeing, we highlight concerns that a more prevailing ‘healthism’ discourse relating primarily to fitness and physical wellbeing is influencing the way the PE curriculum is both interpreted and delivered. Consequently, this paper begins by offering a Foucaultian analysis of the healthism discourse that exists within the context of PE in order to provide a more in-depth understanding of the ways in which it is formed, reinforced and how manifests itself in the day to day practices of teachers and the experiences of the learner. From this, we explore the ways in which a broader form of PE might be delivered, a form that places the learner, and the needs of the learner, firmly at the heart of the teaching and learning process. Self-Determination Theory is presented as a useful framework to understand how this might be achieved. The paper concludes by suggesting that there is a need for researchers to work collaboratively with teachers in order to understand their practice and how this impacts on student experience. Such research is important if schools and PE teachers are to construct a more holistic view of health and ultimately enhance their teaching, learning and student health and wellbeing.

Key words. Physical education; health and wellbeing; healthism discourse; self-determination theory.

Introduction

In many developed countries around the world, schools and in particular PE departments, are viewed as logical sites where children and young people can be provided with opportunities to engage in physical activity, and develop their understanding of ways to lead a healthy and active lifestyle. This logic is directly associated with global health concerns about the prevalence of chronic conditions such as cardiovascular disease and other major health risks related to sedentary lifestyle and obesity (Cale, Harris & Chen, 2014; Johns, 2005). Indeed Horrell, Sproule and Gray (2012) describe how ‘supranational bodies’ such as the European Union and the World Health Organisation have emphasised the social and economic importance of addressing health issues relating to inactivity. Governments cannot ignore such powerful messages about health and many, including the UK, Canada, New Zealand and Australia, have developed a number of strategies that aim to promote and improve health and wellbeing within the wider social context and, more specifically, within the school context. The result of this is that the subject of PE has now become synonymous with the terms health and wellbeing and is the primary resource for the development of student knowledge, understanding and awareness of issues surrounding health.

For those PE teachers who have long felt marginalised within the education community, driving government policy provides an exciting opportunity to raise the profile of the profession (MacLean, Mulholland, Gray & Horrell, 2015). Leading the public health agenda offers PE more legitimacy and the opportunity to focus both the curriculum and pedagogy towards much clearer, tangible and publically endorsed goals. Indeed, in many countries around the world, PE now is explicitly and directly responsible for the health education of children and young people. In England, for example, the National Curriculum was revised with ‘healthy, active lifestyles’ now a prominent feature of the Curriculum for PE (Harris & Legget, 2013). In Scotland, PE forms part of a collective alongside physical activity and sport and is subsumed by the term ‘health and wellbeing’. This curricular area has been given a central role within the curriculum as a core area of learning. The key aims of health and wellbeing, and therefore the key aims of PE, are to develop students’ ‘knowledge and understanding, skills, capabilities and attributes which they need for mental, emotional, social and physical wellbeing now and in the future.’ (Scottish Government, 2009, p.1). In countries such as Australia, New Zealand and Canada, the subjects of PE and Health Education have been brought together to form what is now known as Health and Physical Education (HPE). Here, PE teachers are tasked with the responsibility of delivering a Health curriculum intended specifically to address government concern for ‘at risk’ students (Burrows, Wright & Jungersen-Smith, 2002). However, although all of these curricula present policy text that reflect health in a holistic way, referring to the development of mental, social, emotional as well as physical wellbeing, there are some concerns that a more prevailing ‘healthism’ discourse relating primarily to fitness and physical wellbeing is influencing the way the curriculum is both interpreted and delivered. This is perhaps unsurprising given the powerful messages that individuals are inundated with each day about an obesity epidemic, the perils of sedentary behaviour and increasing mortality rates. Coupled with this are daily images projected by the media about the value of being fit, looking slim and developing the ideal body. Unfortunately, discourse that focuses on the body in terms of ‘being’ healthy and, more worryingly, ‘looking’ healthy; and the ways in which individuals should look after their body in order to ‘be’ or ‘look’ healthy, has the potential to influence both what is taught in PE and how it is taught. When PE teachers uncritically accept and reproduce this healthism discourse, it can result in a very narrow form of PE, one that focuses on developing skills and practices that primarily aim to promote physical activity participation...
for the improvement of physical health. This may take the form of a PE curriculum that is dominated by activities such as jogging or fitness to music, and include practices such as monitoring energy expenditure and caloric intake. Whilst many politicians and academics may call for this form of PE, we view it as highly problematic. It ignores what it means to be physically educated and neglects the explicit development of other forms of health and wellbeing, for example, emotional or mental wellbeing. Perhaps more worryingly for some students, this narrower focus on physical health may even lead to PE experiences that are antithetical to health, for example, the development of low self-esteem, poor perception of body image, and in extreme cases, the development of eating disorders such as anorexia or bulimia (Evans, Rich & Holyroyd, 2004; Rich & Evans, 2005). For example, with a focus on fitness and the body in PE, some students may begin to see exercise as something that has to be done to regulate their ‘health’ or maintain a ‘healthy’ or ‘normal’ weight. They may then experience feelings of guilt or embarrassment if they are unable to meet the recommended amount of exercise or maintain a ‘normal’ weight, feelings can be intensified by the moral judgements of others.

Consequently, this paper will begin by offering a Foucaultian analysis of the healthism discourse that exists within the context of PE. This will provide a more in-depth understanding of the ways in which it is formed, reinforced and how it manifests itself in the day to day practices of teachers and the experiences of learners. By understanding the nature of this discourse and how it is enacted within the PE curriculum, individuals are better placed to critically analyse, question and reject such narrow notions of health. In this vein, research that has examined critical pedagogy in the delivery of more a socially aware PE will be described. Importantly, we recognise that critical pedagogy alone cannot deliver a form of PE that promotes more a holistic conception of health. The subject of PE, even when closely or directly associated with ‘health’, has much more to offer than simply educating individuals about how to be ‘healthy’. We argue that PE is, and should, be fundamentally about learning, performance and improvements in performance and that this can be achieved in an environment that also promotes positive health and wellbeing. Taught well, learning in PE can be rich and diverse, and individual students can engage in a wide range of experiences associated with, for example, motor skill acquisition, game understanding, problem-solving and, cooperating and competing. Importantly, such skills, knowledge and competences can be developed within a learning environment that also promotes student wellbeing. Consequently, this paper will examine the ways in which a broader, more varied form of PE can be delivered. A form that places the learner, and the needs of the learner, firmly at the heart of the teaching and learning process to enhance their social, emotional, mental wellbeing as well as physical wellbeing, and to enhance their learning in and through various physical activity and sports. Self-Determination Theory (Ryan & Deci, 2000) is presented as a useful framework to understand how this might be achieved. This is a theory of personal growth and motivation that highlights the relationship between the needs of the learner and the ways in which the learning environment created by the teacher stimulates (or thwarts) the learner’s motivation, personal development, learning and wellbeing. The paper concludes by suggesting that there is a need for researchers to work collaboratively with teachers in order to understand their practice within the PE context and how this impacts on student experience. Such research is important if schools and PE teachers are to construct a more holistic view of health and ultimately enhance their teaching, learning and student health and wellbeing. In short, this paper seeks to examine the ways in which PE can promote learning and enhance student health and wellbeing in a in a much ‘healthier’ way.

Healthism discourse and policy interpretation

The extent to which PE nurtures children and young people more holistically will often depend on how teachers conceptualise the links between PE and outcomes relating to social, emotional and mental wellbeing. Teachers do not engage with policy text as naïve readers, they come with history, experiences and values of their own which enable them to contest, adopt or adapt the policy text (Ball & Bowe, 1992). Therefore, policy writers cannot fully control the meaning of their text as it enters into the field. Text is interpreted and recreated and subject to ‘interpretation, slippage and contestation’ (Ball & Bowe, 1992, p. 98). Teachers’ understandings are inevitably influenced by those within wider society and the cultural context within which they live their lives. Consequently, although many PE curricula around the world provide teachers with a broad remit where teachers are encouraged to plan learning experiences which encompass social, emotional and mental aspects of wellbeing as well as physical aspects, it is not clear how teachers’ interpretations and understandings of policy text align with this. It is important to know, particularly at a time when there is much societal and governmental pressure on PE teachers to play their part in promoting physical activity participation and preventing an obesity crisis (Horrell et al., 2012).

Michel Foucault’s theoretical works around the concept of discourse prove useful in understanding the intersections between policy formation, teachers’ understandings of policy and their practice and illustrate how teachers may be, or are, influenced by dominant societal discourses as they conduct their day-to-day teaching practice. Foucault (1973) defines discourses as sets of ‘truths’ inherently linked to diverse networks of power embedded within society. This ‘net-like’ power is considered to circulate in all relationships and at all societal levels rather than being projected centrally (Foucault, 1980). Knowledge and ‘truth’ therefore always arise out of power struggles at every level of society, although some groups or institutions within society (for example government) can become more dominant and exert more influence over others (Danaher, Schirato, & Webb, 2002). As Foucault (1980) explains: ‘Each society has its regime of truth, its ‘general politics’ of truth: that is, the types of discourse which it accepts and makes function as true; the mechanisms and instances which enable one to establish true and false statements, the means by which each is sanctioned; the techniques and procedures accorded value in the acquisition of truth; the status of those who are charged with saying what counts as true.’ (Foucault, 1980, p. 131)

Consequently, socially constructed ‘truths’ have the potential to influence peoples’ perceptions of reality and can be accepted by them, even when they bear no relation to the objective correctness of the statement (Hall, 2001). Additionally, just as power can produce knowledge, it can also be produced by knowledge. These bidirectional processes enable and delimit areas of knowledge and inquiry and govern what can be said, thought and done within those areas. In other words, knowledge and power combined within discourse have the potential to control people’s beliefs and actions, creating a form of manipulated behaviour where individuals define themselves in particular ways (Evans & Davies, 2004). For example, discursive creations where truths linked to scientific principles, practices and ideas about, for example, health, diet, exercise and wellbeing have the power to make people believe certain ‘truths’ about the body and regulate their actions accordingly. As individuals take up and invest in the norms that are espoused by experts, and supported disseminated through government policy and the media, they then self-regulate themselves for the sake of their own health and self and for the sake of society.

Building on this theoretical framework, Foucault (1978) developed the concept of biopower to explain how government policy can be used to exert knowledge/power in order to govern and constrain individuals. Biopower is exercised when specific discourse or ‘truths’ are generated and applied to govern and regulate peoples’ bodies, regulating the conduct of large numbers of people, whole states or populations (Danaher et al., 2002). This is evidenced in the increasing pressures on PE teachers to ensure children are (and remain) active, pressures that have derived from the ubiquitous concerns about the physical health of young people, particularly in relation to declining physical activity participation and obesity. Policy makers and PE teachers are provided with ‘expert’
knowledge and statistics outlining how unhealthy, inactive and overweight people are and warned of the implications of this. Policy documents and initiatives are then developed in an attempt to improve physical activity levels and improve the quality of PE provision (Cale et al., 2014; Scottish Government 2003; 2008; 2010). Such formal documents, alongside informal and popular information, influence the ways that people think about health and have the potential to influence their ‘health’ behaviours. Furthermore, they provide prescriptive guidelines to shape the way people, including children, live their personal lives. For example in Scotland, young people are encouraged to partake in physical activity for at least 60 minutes a day and schools are encouraged to provide them with at least 2 hours of quality PE every week (Department of Health, 2011; Scottish Government, 2004).

Worryingly, there is some evidence to suggest that this dominant healthism discourse, combined with the pressures to respond to the obesity ‘crisis’ may also be influencing the way that PE teachers understand the role of PE in relation to health and the body (Horrell et al., 2012). Within a culture of healthism, health is narrowly defined as solely a physical concept and there is little room for broader and more holistic conceptions of what it means to be a healthy individual. For example, health is often considered to be achieved unproblematically through individual effort and discipline directed mainly at regulating the size and shape of the body (Crawford, 1980; Kirk & Colquhoun, 1989). There is also an underpinning moral imperative to the discourse that suggests it is both unhealthy and wrong to deviate far from the ideal physique (Lee & Macdonald, 2010). A healthism discourse therefore links to the neo-liberal principle that all members of a society should be responsible individuals who look after their bodies so they can contribute effectively to society as a whole. Indeed, research evidence suggests that both adults and young people internalise the tenants of a healthism discourse by considering health primarily as the individual’s responsibility to balance energy in and out by eating the ‘good’ food and doing the ‘right’ amount and type of activity, judging their success based on their external body image (Johnson, Gray & Horrell, 2013; Wright, O’Fynn, & Macdonald, 2006). The desire and ability to self-monitor is explained through the concept of surveillance (Foucault, 1977). Here, individuals are constantly exposed to ideas about what is right and wrong, good and bad including what to eat, how much to exercise and what comprises an/their ‘ideal’ body. This ‘knowledge’ creates and even constitutes a form of surveillance where those individuals under surveillance feel constantly aware of observations and evaluations and modify their behaviours accordingly (Webb & Macdonald, 2007). Importantly, such ‘gaze’ becomes internalized and is even more effective in the form of self-surveillance (Douaher et al., 2002). Worryingly, within such a context of scrutiny from others there is potential for those overweight or obese to be stigmatised and ostracised by societal members due to both their external ‘deformation’ and their perceived deviant personal traits (Goffman, 1963).

Within the physical activity and sport domains, there is also a tendency for individuals to associate their body weight and shape with sporting success and athleticism which they in turn correlate with being healthy (Papathomas & Lavallee, 2010). Supporting this view, Garrett and Wrench (2012) found that student teachers of PE, talking about health, prioritised physical aspects with little or no mention of social, emotional, cognitive or spiritual dimensions. There are therefore concerns that PE teachers believe that health is achieved solely through engaging in vigorous exercise and that it is exemplified in the size of the body. This in turn, may lead to very limited and even ‘unhealthy’ practices for health within the context of PE (Lee & Macdonald, 2010). When there is a disproportionate focus on the physicality and physical appearance of the body, the social, emotional, mental and physical wellbeing of young people may be negatively impacted upon as individuals strive to achieve the ‘ideal’ body and the ‘ideal’ vision of health. Implicated strongly within a healthism discourse, therefore, are ideas around the body and bodily appearance, which not only impact on the practice of PE teachers, but also on the ways in which the PE teacher evaluates, monitors and morally judges their students.

The body is symbolic within society, often representing an individual’s worth, health and character, judged according to their outward appearance (Bourdieu, 1984; Goffman, 1969). Particular meanings associated with the body influence how people are categorised, labelled and positioned socially (Shilling, 2003). Indeed, even within educational and health settings, there is evidence of anti-fat bias amongst professionals (Garrett & Wrench, 2012; Peterson, Puhl & Luhrdick, 2012). For example, in Scotland, researchers found that some teachers morally judge their pupils based on appearances (Windram-Geddes, 2013). Teachers in this study were found to label overweight pupils as lazy, reprimanding them for refusing to participate. Such judgements are also made by young people themselves. For example, research with adolescent girls in Australia demonstrates how the participants considered overweight individuals as ugly, weak and unworthy (Garrett, 2004). Certain practices and bodies can therefore become classed as good, bad, right and wrong creating potential for overweight children or their parents to be labelled lazy, irresponsible and ‘couch potatoes’ (Evans, Evans, & Rich, 2003; Wright et al., 2006).

Whilst teaching within health and wellbeing is supposed to impact positively on students’ holistic health, for some children such practices within the domain of PE may have the potential to do the opposite. A significant problem with policy reform placing great emphasis on improving the health and wellbeing of children, young people and adults, particularly if interpreted as physical wellbeing, is that the principles that such policy is governed by are often thinly disguised statements about what we should eat, not eat and how much exercise we should engage in and consequently, what constitutes a healthy body (Burrows & Wright, 2007). Of course, such policies are not bad things, they provide PE teachers and those involved in physical activity promotion with opportunities to engage children and young people with physical activity that can enrich their lives. However, the worry is that they may instead frame PE and physical activity as repressive rituals that people must do in order to be ‘good’ people whilst over-emphasising the importance of bodily appearances. Consequently, students may learn to see food and exercise as something to be surveyed and monitored rather than simply enjoyed and physical activity may, in some cases, lose its intrinsic worth and instead become a tool to cultivate the ideal body (Burrows & Wright, 2007).

**Healthdiscourse and PE pedagogy**

Understanding health and PE in terms of increasing physical activity levels to achieve a certain body shape, one that is slim, athletic and reflects the ‘health’ of the individual, has serious implications in terms of what is taught in PE and how it is taught. For example, within the context of PE and Health in Australia, Wright and Dean (2007) highlight textbooks and websites as the main sources of knowledge for PE teachers and students about how individuals should lead their lives, particularly in relation to their bodies and the daily practices of eating and exercising. These texts provide students with information about how to be a healthy citizen, providing instruction on ‘how to assess and ‘know’ the body and detailed prescription on how to act to remediate deficiencies and to ameliorate ‘risk’ (p. 5). In order to ‘remediate deficiencies’ and to ‘ameliorate risk’ texts focus on providing the knowledge required to monitor energy in and energy out and the consequences of not achieving the desirable balance. Students are encouraged to self-monitor and to rate and measure their health by recording what they eat and the type and amount of physical activity they participate in. In Scotland, researchers have raised concerns that with the emphasis on the development of health and wellbeing, many PE teachers now view their role primarily related to the promotion of physical activity for physical health (Gray, MacLean and Mulholland, 2012; Horrell et al., 2012). This perspective is problematic, with claims by Horrell et al. (2012) that it could result in a form of PE that is more like ‘managed recreation’.
where the teacher’s role is reduced to one of setting up and managing physical activity rather than learning. Whilst some may call for a PE that is focused more on increasing physical activity participation and providing more health-related physical activities, this form of PE not only serves to reinforce discourse surrounding health and the ideal body, but it is also much narrower in terms of providing pupils with experiences that are of educational value. To endorse such a role for PE ignores the breadth of educational experiences PE can provide children and young people. It limits the extent to which a more holistic view of wellbeing is nurtured and, as a consequence, marginalises and even de-skills the PE teacher. Furthermore, in diminishing the skills and attributes that are valued in PE, only those students who are physically active, physically fit and who engage in a wide range of physical activities or sports will have opportunities to thrive, whilst those who ‘are not’ are left feeling isolated in PE and labelled as de-motivated and problematic (Astrom, 2012).

PE and a ‘healthier’ conception of health

The subject of PE within health and wellbeing can offer much more than physical activity for the sake of physical health. Rather it can be rich, diverse and develop a wide variety of motor, cognitive and affective skills linked to learning and performance in a range of sports and physical activities (Bailey, 2006; Gray, Sproule & Wang, 2008; Scottish Government, 2004). Importantly, key to successful and positive learning in PE are teacher pedagogy (Bailey, 2006; Gray et al., 2008) and positive and collaborative student-teacher relations where the teachers listen to their students and value their opinions (Mitchell, Gray & Inclehey, 2013). Under the right conditions, the learning environment created in PE by the teacher can provide educationally valuable sport and physical activity learning experiences whilst simultaneously promoting positive mental, social and emotional wellbeing (Bailey, 2006). Notably, it is suggested that providing students with positive mental, social and emotional experiences in PE may be even more important than simply increasing physical activity levels in the pursuit of living a healthy lifestyle (Gard, 2011).

An important part of the process of developing a more holistic view of health (and PE) is deconstructing and challenging the current and prevalent narrow views of health. Suggestions have resulted been made within the literature around what may encourage and support such resistance to dominant discourses, with many academics in the field advocating a critical inquiry approach within PE (Leahy, O’Flynn, & Wright, 2013). For example, Wright et al. (2006) suggest students and teachers should be supported to understand all knowledge as disputed, unstable and contestable, including ‘truths’ regarding health and the body. Wright and Dean (2007) also argue that schools and teachers must critically examine ideas surrounding the body, health, food and physical activity, suggesting that they can support their students as they critically assess ‘truths’ surrounding health:

As a first step teachers must engage with the debates, read the different points of view and take up a position that is informed by critique rather than themselves accepting the rhetoric of the ‘obesity epidemic’ as fact. (Wright & & De, 2007, p. 14).

Whilst few in number, there are some examples of how PE teachers may encourage students to adopt a socio-critical approach within PE. Oliver and Lalik (2011) attempted to introduce critical inquiry within the ‘real world’ when introducing a curriculum that challenged taken-for-granted stereotypes and assumptions around the ideal body. Their attempts consisted of utilising journal keeping and conducting small group discussions, providing students with opportunities to examine and challenge taken for granted assumptions about the body. Critical to the success of this approach was the social environment created by the teacher, where opinions were heard, valued and respected and student self-reflection was encouraged. Students can develop critical capacities by reflecting on meaning construction and carefully considering their opinions and the knowledge they regard factual. Therefore, for critical inquiry to be productive, learners need to be provided with opportunities to speak up, negotiate and be critical whilst engaging in meaningful activities, working with others and feeling valued (Wright, Macdonald & Burrows, 2004). Through encouraging debate and critical reflection, teachers and students are in a position to challenge stereotypes, eliminate hierarchies and raise their awareness of the injustices that pervade society and manifest themselves within the PE context. However, a significant challenge for teachers is that activities such as journal keeping, negotiation and reflection are typically not associated with practical learning environments such as PE. For PE teachers to rise to this challenge, it is important to consider what journal keeping, debate or negotiating might look like in the practical PE setting. In other words, it would be both interesting and important to identify research that seeks to encourage critical thinking around health and the body whilst still attending to the broader goals of PE, for example, improvements in performance or the development of problem solving skills for skill learning.

O’Brien, Martin and Kirk (2008) provide one of the few research examples where a critical approach has been adopted in PE. In doing so, they describe a PE programme that focuses on integrating the body and the self rather than on appearance and competition. They use relaxation and creative dance to heighten awareness of internal body attributes, enabling pupils to focus on how the body feels or how it can express emotion. This links to suggestions that young people should be encouraged to develop self-compassion towards their own bodies and to take a non-judgemental stance towards the body as they care for it and use it (Paechter, 2013). Therefore, rather than continually judging the body in relation to external standards, young people can learn to value their bodies for how they feel and for the opportunities they offer. The idea here is that PE becomes a place where the body can be seen positively and enjoyed for what it is rather than for what it looks like. Adopting this approach also demonstrates that, whilst some physical practices can be viewed as negative and depressive, they also have the potential to be very empowering and positive for young people (Scott-Dixon, 2008). For example, Garrett (2004) demonstrates how physical activity engagement can enable some young people to feel strong, confident and skilled within their own bodies and can enable them to experience bodily movement as a source of kinesthetic and emotional pleasure. Therefore, the intrinsic enjoyment and a sense of achievement that can be gained from, for example, mastering a handspring in gymnastics, running fast during a race or gliding through the water when swimming in a streamlined position can lead young people to value their bodies, themselves and physical activity in positive ways. This is a philosophy that many PE teachers, who have a love for physical activity and sport and who have witnessed the positive influence they can have in their own lives, will be drawn to, especially those who want to inspire and pass that enjoyment and positive experience of activity on to pupils (Green & Thurston, 2002). Their challenge is to learn to adopt such an approach, not just in creative dance, but in the other activities that typically make up their PE curriculum, for example, soccer, swimming or badminton. As Garrett (2004) unfortunately notes, whilst feelings of empowerment and pleasure can be nurtured through physical activity, this happens less frequently through physical activity experienced within the school PE environment. However, PE does have an emancipatory potential and it is important that this is realised because, for many children, PE will be a key medium through which they foster a physical sense of who they are, what they can do and how they are valued.

A supportive learning environment

As well as considering the content and curriculum of PE, another way to respond to the concerns noted in the literature is to consider the nature of the learning environment that is constructed within PE. Azzarito and Hill (2013) illustrate how young people, in this case girls, often want to be physically active in a space where they feel safe and comfortable, where they do not feel judged or under negative surveillance
and where they are not pre-occupied with the social ‘risks’ of being active, for example the risk of embarrassing themselves. Their research stresses the importance of creating a non-judgemental social space where all pupils, not just those who are popular and talented, feel comfortable and accepted by both teachers and peers. The task of addressing body issues therefore also lies in the way that PE is taught, the ethos created within classes and the relationships that pupils develop with each other and with their teacher. This is important because critical pedagogy alone cannot achieve the broad range of learning objectives claimed by PE. However, given a greater understanding and focus on the student, truly placing them at the centre of the teaching and learning process, the teacher can create environments that promote meaningful and effective learning in PE as well as support students’ holistic health. A useful framework for understanding the relationship between the learner and the learning environment and the ways in which this relationship can support either positive or negative experiences in PE is Self-Determination Theory (SDT). SDT highlights the ways in which teachers can present tasks, interact with students and encourage interactions between students to create positive learning environments and support student holistic health.

SDT is a theory of motivation based on the assumption that all humans have innate tendencies to succeed, to thrive and to engage in activities that develop and support a sense of self. It is a useful framework for understanding student experience in PE because it recognises the role of both the learner and the environment in the individual’s endeavour to actualise their potential (Deci & Viansteenkiste, 2004). SDT proposes that the type and quality of a learner’s engagement in PE is related to the way in which the environment satisfies three main psychological needs: feelings of relatedness, competence and autonomy. The concept of relatedness is the degree to which an individual feels a sense of belonging to, or connection with the learning environment. For example, when a learner feels accepted among peers and teachers, and experiences a high degree of social support (Perlman & Goc Karp, 2010). Competence is the learner’s desire to interact effectively with the environment in order to experience success and control (Koka & Hagger, 2010). Finally, feelings of autonomy are associated with an individual’s perception of agency within the environment. It is the extent to which the environment affords them opportunities to express free will and choice (Ryan & Deci, 2006).

Given this focus on the needs of the individual, SDT is an important construct in the context of teaching, learning and health and wellbeing in PE because it has the potential to ‘illuminate individual differences and how well each need is satisfied within a given practice context’ (Santl, Patterson, Bray & Lee, 2013). Furthermore, ‘SDT posits that the fulfillment of the basic psychological needs for autonomy, competence, and relatedness is necessary for well-being to be attained and maintained’ (Gagné, Ryan & Bargmann, 2003, p. 375). When basic needs are satisfied, learners feel good about learning, they make clear progress in their learning, and generally experience positive wellbeing and performance outcomes (Burton, Lydon, D’Alessandro & Koestner, 2006).

Furthermore, learning environments that satisfy the individual’s basic needs contribute to the development of the learner’s concept of ‘self’ that is closely aligned with intrinsic aspects of the core self (Hodgins & Knee, 2002), very similar to the concept of self-esteem. Indeed, it has been reported that when basic needs are met in the learning context, over time, self-esteem is also enhanced (Deci, Schwartz, Sheinman & Ryan, 1981; Niemiec & Ryan, 2009). This is important, particularly in relation to a PE context where an individual’s self-esteem is often negatively affected by healthism, obesity and ideal body discourses, when they or others do not consider themselves (or their bodies) to align with the socially accepted ‘norm’ (Sykes & McPhail 2008).

SDT also emphasises the role of motivation in learning. Specifically, SDT suggests that intrinsic motivation and more self-determined forms of extrinsic motivation are enhanced in learning environments that satisfy the three basic needs. Additionally, autonomous motivation is positively associated with enjoyment in learning, positive mood, vitality and positive coping strategies (Burton et al., 2006). ‘Overall, research has indicated that having an autonomous self-regulatory style is associated with psychological well-being and positive behavioural outcomes’ (Burton et al., 2006, p.751). When individuals feel more self-determined they are more likely to make decision and carry out actions because of the inherent value of doing so. They are not overly concerned about outcomes, consequences or normative evaluations. Consequently, they are not negatively affected by negative outcomes or negative feedback (Hodgins, Brown & Carver, 2007). However, when basic needs are not met, it is proposed that externally regulated motivation ensues, often accompanied by some form of human distress (Ryan & Deci, 2000).

Under these circumstances, individuals perceive the environment to be more controlling, and thus they call into question their sense of self worth. This more controlling environment inhibits the extent to which individuals feel like they can be themselves. They behave in a particular way because they believe that they should, rather than out of a sense of freedom, intrinsic interest or enjoyment. Unfortunately, research suggests that certain practices within the PE are strongly associated with a more controlling environment, and that this can have negative implications for students, especially in relation to the body. For example, Crombie, Brunet and Sabiston (2011) found that girls felt anxious about their bodies in PE, primarily because they feared the observations and evaluations of others in the class, including the teacher. Individuals under this form of ‘surveillance’ then modify their behaviours accordingly (Webb & Macdonald, 2007) either by adopting behaviours that have the potential to enhance health, or by ‘opting-out’ because of fear of failure or ridicule. In some cases, those who do not conform to the societal norm can even be excluded, teased or bullied because of the way they look (Atkinson & Kehler, 2012). They may also begin to consider their own bodies and own selves to be of little value when they fail to meet such norms (Halse, Honey & Broughtwood, 2007). The role of the PE teacher is therefore critical in terms of adopting practices that focus less on observations, public evaluations and normative comparisons, and more on individual learners and individual learning. This has the potential to make students feel like they have some control over their learning and that they can focus their efforts on improving their own learning, rather than being overly concerned with the learning of others. Importantly, whilst the focus of learning is on the individual, it is also important for students to recognise and, importantly, value individual differences. Valuing individual differences not only teaches students something about the multiple demands, roles and responsibilities of different activities, but also encourages them to consider the role of ‘others’ in their learning and how they can support each other in the learning process. Importantly, opportunities for student interaction might also be used as a vehicle for initiating critical discussions relating to the body, physical ability and individual differences.

Much of the research that has been carried out to investigate learning in PE through SDT reiterates these conditions. For example, Noumanis, Pensgaard, Martin, and Pipe (2004) suggest that PE teachers should focus more on student improvement, develop more supportive relationships with their students and be less critical towards performance. Goodwin (1999) states that teachers should plan lessons that are challenging and that the challenges have to be set at an appropriate level according to the different abilities of the learner. Additionally, students have to recognise that success is achievable when appropriate effort is applied. Consequently, PE teachers should praise effort and achievement as it relates to the individual, avoiding the use of praise when it is inappropriate to do so (Goodwin, 1999). For some students, using praise when behaviour or performance is poor can reduce the level of challenge for that task and may also contribute to the development of a fragile form of self-esteem. Instead, PE teachers should encourage students to investigate and understand poor performance in order to re-assess learning targets and guide future performance behaviours.

Research also suggests that teachers should learn and use their students’ names, get to know their students to show that they care for and respect them (Goodwin, 1999; Mitchell et al., 2013). This means...
listening to them and taking account of their views as part of the teaching and learning process. Student experience in the PE environment is deeply associated with the feeling that a teacher genuinely likes, respects and values them (Niemiec et al., 2006). Having a supportive PE teacher, one who helps pupils in their learning, shows them how to do new activities and promotes a sense of fun, is a significant factor in shaping pupils’ attitudes towards PE (Inchley, Kirby & Currie, 2008). Ryan, Stiller and Lynch (1994) found that adolescents who did not feel a sense of belonging in terms of their relationship with their teachers attempted to cope with emotional concerns on their own. This resulted in negative consequences for both autonomous self-regulation and wellbeing, which included low self-esteem. By contrast, negative perceptions of PE are expressed when teachers are perceived to be unapproachable or too critical (Inchley et al., 2008). Furthermore, Mitchell et al. (2013) demonstrated that when teachers provided their students with opportunities for consultation and support in the PE environment, they generally had more positive PE experiences. The students in their study felt like they had a voice and that their voices were listened to and acted upon to inform future curriculum decisions. Importantly, for this to be achieved, it required a teacher–pupil relationship based on trust, understanding and respect (Mitchell et al., 2013). Supporting this view, Flintoff and Scraton (2001) suggest that student affective experiences in PE might be improved if teachers provide supportive environments, recognise the different aspirations and motivations of their students and, importantly, listen to their students. Importantly, such ‘safe’ environments, where pupils are given a voice, can speak confidently and feel valued and respected, is also the type of environment which is required if a socio-critical approach to health, the body and other socio-cultural issues is to be implemented effectively (Oliver & Lakl, 2001).

Supported by SDT, the research described above suggests that, when presented appropriately, PE can promote learning and the development of mental, social and emotional skills that will contribute to students’ overall positive wellbeing. Presenting PE appropriately is a challenging task, one that is not overcome by adopting one particular pedagogical approach. In order to present PE appropriately, PE teachers must firstly consider their students: who they are, their interests, their aspirations, their perceptions and their abilities. Understanding SDT, and the relationship between teacher behaviours/ pedagogy and the satisfaction of basic needs therefore, is critical for the development of flexible, informed, meaningful and effective pedagogy within the PE context. PE teachers know about pedagogy and they have an extensive knowledge base around physical activity and sports. However, a greater understanding of basic needs and how they are affected by teacher behaviours might enable them to structure their lessons in a more motivationally adaptive and ‘healthy’ way (Niosmanis & Standage, 2009). Importantly, critical pedagogy also plays an important role in developing this ‘healthier’ form of PE. Indeed, it is proposed that a more complex and multi-faceted approach to teaching and learning in PE is necessary if PE can achieve what is claimed in this paper. This will be an approach that offers opportunities for various forms of learning, cognitive, social, emotional as well as physical) in a supportive environment, but that also encourages discussion, reflection and critical analysis in order to question and even transform knowledge and understanding around the body. In fact, this approach to teaching and learning in PE would not limit critical discussions to ideas around the body, but would extend the debate towards other important and relevant issues in PE, for example, issues around gender, race, disability and equality for all. This will be extremely challenging for teachers, particularly given that there is no single pedagogical approach or curriculum model that provides a ‘one size fits all’ solution. However, we also recognise that, as teachers develop their knowledge and understanding of SDT, they will not only extend their pedagogical repertoire (Eisner, 2005), but will also be able to explore the possibilities of the more holistic PE curriculum models (e.g. Sport Education, Teaching Games for Understanding, Cooperative Learning and others, see Tannehill, Van der Mars & McPhail, 2015) that have recently been developed to extend beyond the limited focus of the traditional, activity/performance approach. Subsequently, we propose that SDT will be of particular assistance to teachers as they seek to help their students (and themselves) recognise and discuss the different physical, mental, social and emotional learning that holistically connects their experiences across the different curriculum models (Kirk, 2013).

Conclusions and future research

In many developed countries around the world, the subject of PE is now directly, and in some cases solely, responsible for the promotion of health, physical activity and healthy living. Whilst we remain critical of such developments, we are optimistic that if presented appropriately, PE can have a positive influence on the health and wellbeing of young people. We argue that this is more likely to be realised if policy makers, teachers and young people remain aware of health as a holistic concept encompassing social, emotional, mental and physical domains. However, research suggests that PE teachers may not interpret curriculum documentation in this way, and that powerful discourses linking physical activity and eating well to reductions in obesity and illness may influence curricular decision-making and pedagogy (Gray et al., 2012; MacLean et al., 2015). This is highly problematic because feelings such as anxiety and guilt can develop when students fail to achieve targets that represent the ‘norm’. Furthermore, they begin to monitor physical activity and eating in relation to their impact on the body, rather than for the intrinsic pleasure that can be experienced when participating, learning and improving performance in physical activities. Importantly, PE that is valued by students for intrinsic interest is more likely to reach policy objectives concerning health, wellbeing and physical activity levels than a PE that is explicitly concerned with encouraging children to engage themselves in weight monitoring, self-surveillance and goal setting behaviours (Gard, 2011). Consequently, we call for future research in schools in countries where PE is held partially accountable for improving the nations’ health, to illuminate and understand the healthism discourse that pervades PE cultures, to better understand what it is that enables and constrains both teachers and pupils as they negotiate these discourses around health and the body in different ways. Such research may lead to a greater awareness of how PE teachers understand the curriculum and how their understanding impacts on their professional practice. Equally, the way that students experience their PE curriculum and the impact that their engagement has on their holistic wellbeing is an important area for future research. Moreover, the enduring difficulties faced by PE teachers in the pursuit of knowledge that might support them in their educational and professional progression provide a convincing rationale for further research to be carried out in this field; research that aims to support them as they attempt to change their practice and provide their students with a broader and more socially aware learning experiences that impact positively on their mental, emotional and social wellbeing. In order to achieve this, there is a call for researchers to work with teachers, rather than for researchers to carry out research on teachers. This has the potential to provide teachers with the theoretical knowledge and skills to transform their understanding of health and wellbeing and develop a critical view about current and prevalent pedagogical practices. Additionally, developing a critical ability to deliver theory-based, student-centred teaching approaches may provide PE teachers with the capacity to make a positive contribution to their students’ wellbeing whilst simultaneously delivering an educationally broad, diverse and valuable PE curriculum, one that offers more than simply opportunities for movement. This research is important as it allows PE to contribute towards what we know about health, wellbeing and learning, supporting Gard’s (2011) suggestion that the PE profession should be ‘contributors to new knowledge about the body rather than simply recyclers of it.’ (p. 400).

References


Gard, M. (2011). A meditation in which consideration is given to the past and future engagement of social science generally and critical physical education and sports scholarship in particular with various scientific debates, including the so-called ‘obesity epidemic’ and contemporary manifestations of biological determinism. Sport, Education and Society, 16(3), 399-412.


