Embodied Learning about Health and Healing Involving the Body as Content and Pedagogy

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L'auteure trace le démantèlement des mesures d'équité et en discute les implications sur l'éducation, surtout chez les

enseignantes et les étudiantes.

Embodied learning is a novel approach which challenges western ways of constructing knowledge of the body. Picture yourself in a room with 15 women learning a set of breathing exercises called *qi* gong (pronounced chee kung). Imag-

ine joining this group once a week to engage in *gigong* followed by thoughtful conversation about the body, health, and healing. How would you characterize this learning experience? At one well-known university, the professor called this self-learning and students who participated were granted a credit toward their graduate studies in sociology. After weeks of resistance and critical reflection I came to describe this experience as embodied learning. This is the story of my experience learning about health and healing in a classroom where the body was involved as course content and pedagogy.

Embodied learning is a parallel and complementary way of learning about health and healing. Like other feminist pedagogies embodied learning is concerned with transforming both what women learn and how they learn it. Embodied learning is a novel approach which challenges western ways of constructing knowledge of the body. Women are invited to critically analyze their knowledge of the body and their ways of constructing that knowledge. Equally important, embodied learning engages women in a political activity of resisting the traditional western discourse about health and healing.

The course in which I was enrolled

as a doctoral student was offered for credit in the sociology department at a large Canadian university. The course blended an examination of contemporary writings about health and healing systems, notably traditional Chinese medicine (TCM), with training in qi gong. The primary goal of the course was to examine how the body, health, illness, and healing were conceived and experienced in nonwestern societies. To achieve this goal, students participated in structured in-class and out-of-class activities. Inclass time was divided equally between discussing the assigned texts, and learning and performing qi gong. The syllabus explained that engaging in qi gong was intended to "complement and assess the readings." Outside the classroom students were expected to keep a reading notebook and a health journal. These out-ofclass activities were intended to facilitate critical reflection on the course content and the process of learning about the self.

The structured learning activities supported the exploration of two ways we come to know about the self, health, and healing. The first way of knowing is discoverable and mediated through systems of knowledge that are historically and culturally specific, and concretized in text. To investigate this way of knowing, the professor assigned a weekly set of contemporary writings that addressed issues relating to the body. Readings were supplemented with videos, tapes, and a guest lecture with a westerner trained in TCM. We read about ways of knowing the body from western sociological, psychological, and phenomenological perspectives. We also became acquainted with different ways of conceptualizing the body as these were reflected in stories about health and healing practices in nonwestern societies. By reflecting upon and discussing other systems of knowledge about the body I was able to examine, at arm's length, the process of making meaning of experiences of the body, health, illness, and healing.

The professor also challenged us to explore a second and parallel way of knowing the body by engaging in qi gong exercises. This way of knowing is discoverable through and mediated by our experiences as embodied subjects. That is to say, by reading the body as one would read text, we used our lived experience as another valid and valued source of information and knowledge about body. It was in this way that the body was implicated as pedagogy. Practicing qi gong offered me another way of examining the relationships between mind, breath, and body, and health, illness, and wellness. Reflecting upon the experience of performing *qi gong* allowed me to examine, in a novel and profoundly personal way, the process of constructing knowledge of the body. How I achieved that educational outcome requires some explanation about qi gong and embodied learning.

Qi gong is a set of breathing exercises, and part of a Chinese theoretical framework which combines Taoism, Yin-Yang, and the Five Phases. Tao is, by definition, undefinable but refers to the intrinsic order of things. Yin-Yang is an irreducible premise of Chinese logic and refers to the interaction of bipolar forces which are present in all things. The Five Phases refer to the five interactive and fundamental powers which describe and govern the forces of nature. Together, Taoism, Yin-Yang, and the Five Phases form a system of knowledge which orders the way one eastern culture conceptualizes and makes meaning of life, nature, and human existence. In this schema, there is an interpenetration of the soma and the psyche, the person and the universe. This way of thinking about the self contrasts sharply with the mind-body

nexus that orders my western thinking. I will come back to this point later.

Performing *qi gong* promotes the flow of *qi* throughout the body. *Qi*, which means energy or essence, flows like blood through the human body along the body's twelve meridians. *Qi* together with other processes govern the functioning of the organ networks. Performing a specific breathing exercise focuses the mind, body, and the breath on a given organ network. So for example, performing



Gail Geltner, "Aspiration," 1986.

the autumn breathing exercise "massages" the lung organ network. This stimulates the lung network, a Yin organ responsible for homeostatic functions, to collect, mix, and disperse qi throughout the body.

During the 13-week semester, I learned a set of five breathing exercises. I learned the physical movements and the rhythm of breathing that governed the movement. The rate of breathing dictated the rate at which the body moved through a set of repetitions. Thus, I had to learn to

control my breath at the same time I learned to control my body. At first it required my full attention to coordinate both breath and body. As I became more practiced, I found I could focus on my breathing and the work of the body continued in orderly cycles. In learning *qi gong* I experienced the body in a new conceptual context.

What does this mean in experiential terms? I felt my feet rooted to the floor. I sensed the movement of my limbs located in relation to the space I occupied. I sensed the tension and relaxation of my muscles as a physical experience of my tissues. I felt the flow of breath that was at one moment a part of me, inside my lungs, and at the next moment, a part of the air that surrounded me. I experienced these things with my body, that physical part of my self.

There were times when I was so involved in the physicality of the experience that my surroundings faded from my vision. I was aware of the professor's verbal instructions and my efforts to

translate those instructions into coordinated physical movement. I was aware of concentrating on the cycle of my breathing. I knew these and other things from the cognitive part of my being. At times it was as if I were an outside observer watching the experience of my body. My mind, my body, and my breath were connected yet separate entities engaged in *qi gong*. It was like a revelation that day I was able to articulate a sense of bodymy body from those oppositional and interdependent positions. Through repetition of body movement which replicates the cycles of breath I was echoing the rhythms of life and nature. How Yin-Yang!

This experience illustrates the value of embodied learning to women. Embodied learning offers women a way to learn new knowledge about the body, their body. Embodied learning actively engages women in the construction of that knowledge. The experience also validates women's embodiedness and the knowledge that comes from being an embodied subject.

Keeping a reading notebook and a health journal offered two tools for reflecting on the synergism of concretized text and embodied text. The physical and spiritual discipline of learning to control the breath is essential to Taoist vitality and wellbeing. This fact is concretized in text and can be read and "learned." The diverse reading list allowed me to explore intellectually the many ways of knowing the body. Illuminating the essence of Yin-Yang as I did as an embodied subject may not be possible when learning through text alone. Additionally, qi gong training was embodied exploration of the invisible process of constructing knowledge of the body. However, coming to appreciate embodied learning was not easy.

Reading and critiquing text is a

traditional way for graduate students like me to engage in learning. The body as course content is becoming a popular academic focus for students of sociology, psychology, and phenomenology. As a nurse, an educator, and a student of sociology I have spent years reading text about the body. However, spending my time and money to engage in breathing exercises was anything but familiar or comfortable for me!

One of the problems in any teaching-learning situation is recognizing and managing learner resistance. In an exciting learning situation such as this one, students are often challenged to examine their beliefs. Belief systems are an essential way of making meaning of the world and ordering our responses to it. A challenge to an established belief system threatens our safety and disrupts our way of understanding our reality. Resistance is a normal response to this challenge, a tool for asserting control and maintaining a safe distance from the challenge. Resistance can be triggered when the student with strongly held views or traditional learning experiences is exposed to a non-standard classroom format. I was one such student.

As an educator I was familiar with, and supported experiential learning. I assumed that as a learner with preparation in the educational process that I would be open to an innovative learning experience. Instead of the positive learning experience I had anticipated I was frustrated, irritated, even angry. At first I was unable to recognize these reactions as a normal but difficult part of the learning process. My professor did and suggested that I reflect upon my resistance to learning in that setting.

I discovered over time my resistance to both the content and the process. The content threatened my reality as a woman and a nurse, and the process threatened my reality as an educator and student. First, I was challenged to re-examine my ways of conceptualizing health, healing practices, and my body. My western system of knowledge was essential to my

personal and professional identities, and my relationship to my work in health care. My personal experiences as a woman taught me to separate body, mind, and spirit. Maintaining discrete parts of my being was like a security system. Damage to one sphere could be contained to that area maintaining the integrity of the other parts of my being. Whether it was disease or divorce, heartburn or heartache, I could protect the whole by distancing the rest of me from the ailing part. My professional experience in health care had taught me when, how, and which resources to mobilize in promoting my well-being, and that of others. These were comfortable and known ways of understanding my way of being in the world. TCM was a different system of knowledge which challenged my way of making sense of an important part of my life.

Second, the classroom format challenged my notion of what constituted "legitimate" academia. Legitimate academia was about annotated bibliographies, endless literature reviews, and tortured discussion all building toward the moment of revelation that could be captured on paper. Classrooms were about sitting and listening, thinking and questionning, challenging and synthesizing. It was only much later that I realized how traditional were my assumptions about teaching and learning. Feminist pedagogy is concerned with transforming both what is learned and how it is learned. Embodied learning challenged my ideas about both. To engage in embodied learning is to resist the dominant discourse about teaching and learning. My ways of understanding teaching and learning were central to my identity as an educator and a student. Familiar sign-posts of education did not include breathing exercises! I associated such activities with recreation. I separated activities and learning for the mind from activities and learning for the body. Examining issues about health, illness, healing, and the body was, for me, a cognitive activity which I dissociated from the experience of being an embodied subject. This statement highlights my assumptions about the separation of mind and body.

I had, until I took this course, accepted unreflectively the mindbody nexus. My formal training in sociology and health care are two of many contributors to this assumption which underlies my understanding of body and health. The underlying premise of disciplines such as sociology is the separation of mind and body. The historical development in classical sociology of the mind-body separation dates back to Descartes who postulated the ultimate human location was "disembodied reason" and continues to today's construction of the body as an "absent presence" (Shilling 19).

Similarly, western medicine neatly separates mind and psyche from socioeconomic factors, political forces, and environmental issues, for example. I realized that I accepted the universality of the human body and its biological base as well as a universality of health and illness experiences. That is not to say that I did not believe in individual difference. Rather, I assumed that health and illness had a physiological, pathological, and psychological basis that was universal. Furthermore, as a "student" of western medicine, I accepted a linear theory of medical development. I referred to allopathy as modern medicine. To me, the western system of medical knowledge was scientific, objective, proven, and, therefore, superior. Being "advanced," it was the system against which I evaluated all other healing practices.

Yet there was also evidence in my personal and professional history that I had questioned the partiality of allopathy or any single healing system. So I began to look at how I constructed what was valuable as a healing practice, who I valued as a healer, and the ways these values were concretized in my life. As a result, I exposed some contractions in my ways of viewing my own and other health systems. Parallel with this was my ignorance of the culturally and historically-specific nature of healing systems. This prevented me from appreciating the internal logic of the other healing systems. My unfair indictment of other systems of knowledge reflected my ethnocentricity and limited my ability to learn and appreciate other ways of knowing about the body, health, and healing.

As my story shows, learning and practising qi gong offered me another way of experiencing the body. Learning *qi gong* was also a tool with which I could view the process of constructing ways of experiencing or knowing the body. Thus, *qi gong* training was an experience as well as a means to explore ways of making meaning of an experience. Qi gong exercises offered experiential text for learning while writings about TCM and other healing systems offered text for "intellectual" learning. Engaging in these distinct but complementary activities I was able to learn by standing both inside my body and, at the same time, standing outside it. Ultimately I was challenged to look at what and how I learn about health and healing as well as what constitutes a "legitimate" educational experience.

Embodied learning was, for me, transformative learning. As with transformative learning I proceeded through a few steps before reaching the educational outcome. First, the professor assisted me to recognize assumptions underlying my belief system. She created a safe and supportive environment with appropriate activities for questioning and making explicit those assumptions. Then, she assisted me in integrating those revised assumptions into an overall perspective.

Embodied learning generates personal insights about self, the body, health and wellness, and how we come to understand these things. The feminist classroom can be the place for women to share those insights. This may lead to explicit consideration of how unreflective acceptance of the dominant discourse impacts on our ways of experiencing our bodies and our lives. Embodied learning, as a feminist strategy may help women embrace other ways of knowing and other systems of knowledge. Embodied learning is a structured and facilitated process of exploring knowledge and knowledge production. The experience of living is discoverable through our bodies. How we make meaning of that experience is mediated by systems of knowledge. How one makes meaning of health and illness is related to having or being a body. However, the corporeal experience of health and illness is understood in the context of knowledge that is both accumulated and internalized by the individual, and externalized and objectified in social institutions, such as hospitals and the health care system. Embodied learning offers a valuable mechanism for examining of knowledge production and an exciting alternative to traditional pedagogies. For teachers and learners prepared for such a transformative experience, embodied learning is an innovative and challenging feminist pedagogy.

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