

HEALTH AND THE RUNNING BODY: NOTES FROM AN ETHNOGRAPHY

Abstract

This article aims to develop one of the major themes from an ethnographic study of the culture of distance running - the desire for health and fitness. Research was undertaken over a two year period using a variety of flexible qualitative data sources, most notably observation and in-depth interviews. The body, especially the 'running body,' is seen by participants in this study as a source of health and well-being and affirmation of their identity. The results highlight the various contradictions and tensions that emerged whilst exploring the behaviour of distance runners in their desire to achieve a healthy body and mind.

Key words: body, distance running, emic perspective, health, healthism

Introduction

The aim of this ethnographic study was to explore the culture of distance running and the meaning the participants gave to this type of leisure activity. In this article we discuss one of the major themes from an ethnographic study about the culture of distance running - the desire for health and fitness.

Distance running is unusual, though not unique, in that it demands continuity of effort rarely found in other sports (Yair, 1990; Smith, 2000). It began as a 'jogging' fad in the 1970s, but since then millions of people have joined the running boom on roads and in parks around the world, to an extent that would have been unexpected half-a-century ago (Bale, 2004). From beginning as an elite sport, distance running has now become accessible to all. In this study, distance running, 'jogging,' recreational walking and similar activities were examined as integral positive contributors towards achieving objectives linked to tackling obesity levels, healthy living, physical and mental health and well-being, and increased leisure participation and recreational activity (United Kingdom DoH, 2004). Sport contributes to health and to the quality of life, and the health and well-being of nations globally remains one of the most contemporary and controversial issues in western society. Similarly, exercise has increasingly been seen as an important facet of a 'healthy society', with active leisure and sport providing many of the activities through which it is hoped that this can be achieved (Abbas, 2004). This topic is all the more important for public health agencies around the world, given that millions of amateurs currently run long distances on a regular, casual basis (Allen Collinson, 2008).

The aim of this paper is to develop a deeper understanding of the experiences of one particular group, distance runners, and the way it is linked to their goal of achieving better health. This paper suggests that qualitative studies of leisure practices—like distance running, and the knowledge that underpins them, can inform our understanding of the relationship between health promotion and physical activity. In doing so, we also illustrate the complex interdisciplinary links and opportunities for further research between health and leisure studies. We shall argue that the perceptions of runners are dominated by ‘the running body’ and the various discourses that surround and influence it, including the wish to be well and healthy. However, these discourses contain paradoxes, tensions and contradictions that will be discussed.

Literature Review

Our initial literature review starts with a brief overview of distance running, followed by two important areas from which we have considered the data from the participants: health and healthism, and the running body. As is usual in qualitative research, the rest of the literature is integrated into the findings and discussion section.

For those who participate in distance running as a leisure activity, Smith (1998:176) makes a distinction and developed a basic typology of runners. This distinction, now briefly outlined, plays an important role in understanding the participants involved in this particular study. The first type of runners are (1) *athletes* – elite runners who are potential race winners; (2) *runners*, who ‘run and train, week in and week out, at levels far in

excess of that required for basic physical fitness, yet stand no realistic chance of winning, or doing well in *any* race' (Allen Collinson & Hockey, 2007:47); and (3) *joggers / fun runners*, who train infrequently, and only if the weather is fair, and race even more infrequently, if at all.

As Shipway and Holloway (2010) state, runners are committed to their activity, find their identity in participation in running as they demonstrate their skills, gain acknowledgment from others and affirm their beliefs in a fit and healthy body. Allen Collinson & Hockey (2007) identify that within the distance running subculture, certain values, dispositions and characteristics are highly valorized, including the qualities of stoicism and endurance. They suggest that the praxis of distance running is intimately connected with endurance; tolerating fatigue, discomfort and pain constitute an integral part of everyday training routines.

Health and healthism

When the ideology of health and fitness became prevalent three or four decades ago in the United States, the American sociologist and political economist Crawford (1980) coined the term 'healthism'. By this he meant a lifestyle that is focused on health and fitness to the exclusion of other aspects of the body. Although the emphasis on health is fostered by the state in modern societies (US Department of Health and Human Services 2008; Australian Government Department of Health & Ageing 2006; United Kingdom Department of Health 2004, 2009) and by the media, healthism individualises accountability for health rather than examines structural inequalities or responsibilities of

the governments. In Crawford's view, healthism is a trait of health consciousness in Western (and increasingly in Non-Western) cultures and the belief that health and fitness are common and life-enhancing goals. This is closely connected with health promotion strategies which concentrate in particular on weight and alcohol consumption. Human beings are exhorted to adopt practices which lead to better health and fitness, and that health and its achievement are 'qualities that define the self' (Crawford, 2006: 402).

The emphasis on health as highly valued has also become a device for social control (though this will not be followed up in this section), but even more, the term is linked to self-control, and self-discipline and self-regulation. As Cheek (2008: 974) suggests: 'health approaches sacred status'. Media and advertising base their arguments and discussions on internalised body-ideals - on what the healthy and fit body should look like, and how to gain body-satisfaction. Health is also connected to a positive body-image enhancing people's self-perception. The leisure industry centres not only on having fun, but also on fitness and well-being to gain body-satisfaction.

The Running Body

Discourses of the body uncover how distance runners perceive that health and fitness are accomplished through their running activities. These discourses are not only based on individual identities but also influenced by elements of culture, location and history. Turner (2008:36) maintains that 'regulation of the body is in the interest of public health, economy and political order.' The body, both in its individual and its social dimensions,

has long been a focus of sociology and psychology (Foucault 1977; Turner 1984, 2008; Theberge, 1991; Shilling, 2003). Foucault discusses how social agencies regulate the body and biological processes such as health, fitness, life expectancy and others through the power which is embedded in the social structure. The body in leisure, especially the ‘running body’, is seen by participants in this study as of central importance not only because of the joy and interest it brings to their lives but also, as a source of health and well-being. Although the body was of particular interest to theoreticians some decades ago, the topic has been resurrected recently in the sociologies of leisure and health as well as in feminist research (Tulle, 2007; Allen Collinson, 2008).

Research methods

The main purpose of this qualitative ethnographic study was to explore the culture of distance runners and to examine the running world from their ‘emic’ perspective as participants in the distance running world. The approach adopted in this study is ethnography, a detailed, in-depth description of a particular community of distance runners. It is research into human behaviour which includes experience and interaction in context. Ethnography uses a ‘cultural lens’ to interpret the findings (Schensul, 2005) of research, and the running culture is the lens through which the data are seen.

Data collection

Sources of data for this study included participant observation and in-depth interviews as well as documents and research accounts from the relevant literature. Atkinson (2008) suggests that data derived from the process of participant observation at endurance events, such as marathons, are critical in developing a deeper understanding of the relational context in which endurance sports like distance running occur, and within which sub-cultural techniques of endurance are embodied and represented. The principal researcher - a distance runner himself - actively participated in the natural setting of the runners whom he interviewed. A series of national and international events were also observed and the research developed within the context of several running clubs. The research was based on a range of detailed 'narratives of the self' (Sparkes, 2000), linked to sport related activity as well as on observation and documents. The observation was unstructured and focused progressively on the issues that were seen to be important for the study.

A purposive sample of informants was interviewed. There were twenty participants in this study of varying ages and both genders (twelve males and eight females between the ages of twenty nine and sixty eight), who had between six and thirty two years of experience participating in distance running as a chosen leisure activity. Additional background details of our twenty long distance running informants are presented in Table 1. Pseudonyms have been used to ensure anonymity. The principles of voluntary informed consent, confidentiality and respect for autonomy were adhered to, and assurance was given that the voluntary participants could withdraw from the study at any

time. The proposal was approved by the university ethics committee. These ethical considerations were an integral part of the research.

Insert table 1 near here

The inclusion criteria for this purposive sample were threefold. Firstly the sample included people with a minimum of five years distance running experience at national and/or international level; secondly, who had been training and running for at least five times a week; and thirdly who ran for a minimum of five miles in distance for each run.

The Interviews

Participants were encouraged to express themselves in their own words and at their own pace, as Brewer (2000) suggests. Interviews were unstructured to elicit the experience of the participants, and the way they perceive and interpret them.

During the analysis phase a systematic examination and interpretation of the data took place and an ongoing thematic analysis carried out. Initially, the interviews were transcribed and organised, the fieldnotes ordered by importance. The data were categorised initially, that is, each main data section was given a label – a code. The codes that related to each other were reduced and collated to a broader theme. The fieldnotes too were analysed this way. During the analysis, and as an outcome of these procedures, major themes were developed, of significance and shared by the informants, and the

world of distance running. Eventually a common pattern developed which formed the basis of the research account.

The validity or trustworthiness of the research was established through member checks – asking participants for their views on what they had said or done after the data had been collected and by reflecting on the data themselves, making sure that they truly presented the views of the people involved. A peer review was also carried out - several peers independently checked the incoming data for meaning. In the original study ‘thick description’ – writing theoretically and contextualised -, and an audit trail – a detailed account of the steps of the research – helped to insure data quality. Reflexivity, the awareness and acknowledgement of the writers’ assumptions and involvement, also contributes to the trustworthiness of this study.

As customary in qualitative research, the literature was not examined in full detail before the research began, though there was an overview of foundational studies. The dialogue with the literature took place when the findings emerged, and was ongoing until the completion of the study and integrated. We would like to stress strongly however, that our own data had primacy, and the literature relevant to the themes was accessed after they emerged. The following discussion centres on health and the body, one of the most important themes arising from the narratives of the participants and linked to leisure. In addition, separate accounts of other important interdisciplinary aspects of this study appear in relevant journals within health and leisure studies.

Findings

The discourse of health and healthism

The participants in this study tell how they achieve a sense of well-being through running and avoid stress and depression. Their comments on this aspect of their running lives and careers are connected with the desire for good health and physical and mental well-being which they see as one of the functions of running. The words of Melvyn, a 53 year old with 29 years experience of running, are one example which illustrates how running can enhance well-being and combat potential physical illness:

I started running five years ago Now, I am never ill and have not had a cold or the flu since I started... My main motivation is to prevent a serious life threatening disease, which has affected members of my family in the past, but the benefits and rewards are immense: new friendships, being able to eat whatever I like without putting on weight, the feeling of complete well-being, achievement and satisfaction.

A fit and healthy body, which athletes equate with being trim and slim, has greater 'social capital' than the unfit overweight body. The health discourse increases the incentive and motivation of leading a particular life style and confirms identities. Crawford (2006) insists that individuals often define themselves by the way they pursue healthy practices and achieve or fail in their goal-directed behaviour towards wellbeing and health. The

people in this study perceive distance running as a health-related activity. Indeed runners use gaining and maintaining of health and fitness as a rationale for their wish to run.

Mark, a 42 year old with 6 years of running experience, says:

When others at work are having time off with flu and general colds, I'm sure that running helps build up my immune system and allows me to fight off the common ailments which seem to cripple others.

Kara, a 45 year old with 14 years experience of running, is a member of a women's running network which encourages women to run, who explained how she felt that running can become a gendered activity related to health:

I love the Network and 'women only' section of my running club, as it means that us ladies can run together to improve health, confidence and safety.

Health seems to have become an obsession in modern life (Crawford 1980, 2006; Wright, O'Flynn & Macdonald, 2006; Kronenfeld 2006). As previously highlighted, Healthism is a term first coined by Crawford in 1980 by which he means a particular way of looking at health influenced by health consciousness and movements towards greater individual responsibility for health. Crawford called health 'a supervalue... a metaphor for all that is good in life...' (quoted by Greenhalgh & Wessely, 2004: 201). Runners are socialised into the norms of the culture in which they live, as well as those of the subculture that they have chosen – the running community. This community and social group provides a

strong social identity and hence a basis for health and well-being (Haslam, Jetten, Postmes & Haslam, 2009). However they do not only internalise the ideas of their group but also that of the wider culture. In the arena of health and well-being this means the guidelines and policies of government and advice of expert mediators of health policies, such as doctors and other health professionals.

Among the runners observed and interviewed in this study, running is a ‘bodily experience’; the healthy and fit body has become a preoccupation of the participants. Most use the phrase *I want to be healthy and fit*, expressing the desire for a healthy life style, both in terms of mental and physical health. Some of the participants interviewed suffered depression, and one woman tells the tale of recovery from this, which illustrates her feelings that not only physical health improves through running but that mental health is also enhanced:

I had very little self worth, but after completing the Marathon, I felt much better.

I’m still on the road to recovery, but the doctors seem to think that the running is playing a major positive part in my recovery.

All the participants’ stories confirm these views and stress health and well-being as a vital aspect of running. Aristotle already noted that the chief good that all human action strives for is happiness (Austin, 2007) and suggested that for an understanding of the good life, human beings seek physical health and material wealth because they can help understand and achieve our ultimate aim – happiness. Running, in the view of the

informants of this research, contributes towards this sense of contentment and happiness; it also improves health after major periods of unhappiness and ill health. Alison, a 29 year old with 6 years running experience, claimed to have found an antidote for a previous bout of depression through her running and stated that it is far more effective than her previous medication:

I wish I had found running earlier, as it would have been a healthier way to deal with my problems on a daily basis, before it got to the stage that it did. I'm fine now though.

Linked to lifestyle choice and the need to exercise were an understanding of the role of nutrition and hydration. This was vital to many runners, both in order to achieve most from their training sessions, but also to aid recovery after running and to provide the necessary energy to actually fuel the participants' need to exercise. Post training discussions on diet, nutrition and hydration were regular topics of conversation at several of the running events studied; monitoring diet and sleep patterns becomes of major importance to distance runners. Emma, a 55 year old with 18 years running experience, expressed comments that are typical of the participants in that they *spent hours researching nutrition*, and Mark sees diet and running as *integral parts of each other*. Most participants monitor their health carefully, feel responsible for it and are active in keeping well. They are also well-informed about appropriate diet and weight and have a conception of what constitutes a healthy body. Shilling (2002:622) speaks of the emergence in certain groups of 'vigilant approaches toward the healthy body and the

growth of information-rich consumers of health'. This reinforces the findings of Shipway, Holloway and Jones (2012) with regards to the dedication and commitment adopted by endurance participants in their approach to running, based on their acquisition of an understanding of nutrition, training and other running strategies.

Indeed, the recent upsurge of interest in distance running and the policies of various governments towards promoting healthy lifestyles and physical activity through activities such as walking, 'jogging', and running has contributed towards an increase in the number of people entering the social world of distance running (Bale, 2004; Allen Collinson, 2008). Their ideas on health fit in with various government's public health discourses about health and fitness, and the healthism perspective that many Western cultures now present (UK Department of Health, 2004, ACSM 2006; US Department of Health & Human Services 2008). Health for the whole population, healthy ageing, and the reduction of obesity is given high priority within public and private sector sport and leisure provision and promotion, an issue which is not only a genuine concern of governments but might also be an element of social control. Exercise in most countries has increasingly been seen as an important facet of a 'healthy society' (Abbas, 2004), with leisure providing many of the activities through which it is hoped that this can be achieved.

Many participants also feel that they lose the stress that work and family imposes on them, and they run to feel free and healthy. Dennis 32 years old with 9 years experience

of running, has a hectic work life as a city businessman and found that distance running provides an outlet for stress, anxiety, pressure and tension at work:

Until I started running I had no release from the time I woke up, until I went to bed. Ask my wife – I wasn't a very nice person to be around for a while, but that all changed when I started running.

Most runners suggest that running can be understood as escaping stress and seeking well-being. This is also confirmed by Sharkey & Gaskill (2007) who claim that physical activities can prevent anxiety and depression. Thus these athletes use running as a coping strategy and diversion from the pressures of every-day life. Robin 50 years old with 12 years running experience, for instance feels *tired and lethargic* sitting at his desk all day and uses running as a mental escape.

Runners 'make objects of their body', an expression used by Corbin (2003:.257) '...nurturing them through diet, training them to compete...' Emma for instance, spent hours on researching nutrition. As well as eating the appropriate foods, most runners were aware of the need to stay well hydrated in order to train and exercise properly. Colin, 46 years old with 16 years of running experience and a self confessed 'serious runner', echoes other participants' remarks; he drinks up to eight litres of water each day:

During the day I will constantly have a water bottle on my desk at work. I don't drink energy drinks, but stick to normal tap water. I also try to eat within an hour or finishing my run, starting with an energy drink to replace the lost fluid.

Louise, a 29 year old with 8 years running experience, suggests when asked about her motivation for running that she wanted exercise to for a fit and healthy body and feel well:

I became convinced that exercise was the only genuine answer, and my girlfriends were kidding themselves that a few weeks of eating lettuce and drinking copious amounts of water would do the trick.

Thus, linked to the importance of diet and nutrition is the determined desire and need to exercise amongst the running community. The slim body is equated with the fit and healthy body and general well-being. Karen, a 32 year old with 6 years of running experience, stresses the wish to keep fit and maintaining *a fit body for a good lifestyle*. Louise too links her initial motivation to run with lifestyle and the desire to keep well and slim:

I wanted to continue to eat and drink whatever I wanted, whenever I wanted. Now, friends and work colleagues are envious because I'm so slim. I might be slim, but I know that a period of inactivity will lead to an increase in my weight, and I don't particularly want that.

Occasionally participants in this research see the health aspects of running as a recovery from addictions. Indeed some of the runners in this research admit that running has become a replacement for (mis) using alcohol or food. Terry, a 65 year old with over 32 years experience of running, revealed that distance running had been the main driving force behind his recovery from alcoholism. Another runner too, claims that distance running had literally ‘saved his life’ following a period of alcoholism, providing a *feeling of well-being I wouldn’t have experienced unless I was dry*. Gavin, a 68 year old with 30 years of running experience, suggests that running is *an antidote to weight gain*. However, running too can become an addiction, like that to alcohol or food (Leedy, 2003). Paradoxically, the distance runners also enjoyed alcohol after their run which contradicts the healthism discourse which they supported and adopted. Indeed, participant observation demonstrates that alcohol plays a major role within the distance running social world as part of leisure time. This is partially due to the post race ‘running club’ environment and the social networks that are of major importance to runners (Shipway & Jones, 2007). Often, in the aftermath of training for a specific event, having a drink acted as a pressure release, whilst also serving as an opportunity to celebrate achievement, with both family and running peers from their club. Runners felt that eating and drinking with friends and family was *a reward for running and achievement*. However, while training for events individuals abstained from their indulgence in alcohol and food (and sex).

Controlling and ‘re-forming’ the body and health

Many aspects of running are linked to the desire for control and self-discipline, and the body is the object to be controlled and disciplined. The body becomes a ‘moral problem’ (Frank 1995) which these runners need to solve. The distance runners involved in this study indicate that running brings them closer in touch with their own body, and they therefore appreciate their body for what it does, rather than just what it looks like – though this also plays a part. Turner (1984) developed the notion of the ‘successful’ and ‘disciplined body’. This idea is influenced by the work of Foucault (1977) who saw the body as something to be controlled, formed and disciplined. Government agencies and health experts attempt to exert social control through the health discourse to create a healthy society; individuals internalise this echo by enacting self-discipline and self-control. These cultural and social elements influence the way individuals form their perspectives on health and well-being which are, after all ‘socially constructed’. The distance runners in the study desire this accomplished body, conforming to the body ethic prevalent in developed countries in particular. Indeed, the mind-body dualism of Western cultures, as promoted by Descartes (1596-1650), and the puritan ethic of self-control and discipline, shows the conflict of runners between their desire for food and drink and the wish for a healthy, fit, and slim body. In their view however, this conflict can be resolved in running and exercise.

Of course, self control is not the only important issue. A slim and healthy body symbolises success while obesity often has negative characteristics (Shipway & Holloway, 2010). Weight control and weight loss is an important motivator for many athletes in the study, and they often start their running career and maintain it inspired by

these goals. Simon, a 35 year old with 10 years of experience running, for instance expresses the sentiments of many of his running friends:

I always said I was too fat, I smoked, or I couldn't give up the time to train. Being there, having lost four stone, given up smoking, and having completed all my training was reward enough, from the very start!

In the past Simon had problems with his health and attained physical well-being through losing weight and running. Becoming and staying healthy was indeed an important consideration for many participants; Dennis for instance told his story, and related how he kept healthy:

In 1986 I was admitted to hospital with chest pains after a suspected heart attack. I realised that things had to change. Less than a year before I had been diagnosed with Type 2 diabetes caused by my poor diet and sedentary lifestyle. I was 24 years old and weighed 21 stone. I decided to give myself a new start and began running (well, waddling and walking), but it has truly changed my life, as I literally ran myself out of obesity.

Even those participants who are not specifically driven to running by the desire to lose weight often discuss it as well as demonstrating an understanding of the role of nutrition, as already briefly discussed. As in ordinary life, ideas of discipline and self-control are related to fitness and slimness. Turner (2008:136) proclaims that 'gaining control over

our own feeding patterns involves growth in personal autonomy'. Participants 'survey' their own bodies, find it wanting and regulate the intake of food and drink. Weight loss is often the direct result of intensive training. Runners carry out comparisons between themselves and others; the 'running body' is compared to other bodies, but also in seen in relation to oneself in time. Comments such as *when I was not fit, when I was fat, when I was breathless*, are common. Some of their discussions illustrate the obsession with weight and fitness for many 'serious runners' (Shipway et al, 2012). For instance, Ewan, 46 years old with 7 years of running experience, made a good-natured comment about one of his colleagues:

You can tell that Tony is fit and healthy and getting the miles in. When he's not training, he looks a bit 'tubby', to be honest. I'll wait until he stops training and then I'll beat him, as he'll get that spare tyre back – fat bastard.

Frank (1995) suggests that individuals try to fashion their bodies in comparison with other bodies which they see as healthy and fit and whose goal is to achieve the performance of their colleagues, who expect it of them and who are their social audience. Frank and others suggest that the image of the body is influenced not only by the self but also by the media who perpetuate the norms of a slim body and ideal health.

Runners' experience 'body anxiety', and weight gain becomes a problem which has to be solved. This perspective again is influenced by the interests of government and health professionals so-called 'body experts'. As stated before, promoting healthy weight and

physical activity are areas of government interest in the UK, the US and Australia, as well as many other Western countries. Athletes evaluate fitness by the image they have of health and fitness, of their own and others' bodies, and linked to weight and body form. This in turn enhances their self-image and self-esteem, highlighted by Buckworth & Dishman (2002).

Trevor, a 55 year old with 12 years of running experience, was one participant who took up running to lose of weight:

I got fed up with being called the 'fat boy' of the office. It got worse when they released the film 'Run Fatboy Run' in 2007. Every time I left the office colleagues would mockingly abuse me by shouting 'Run Fatboy Run'. I had the last laugh though, because eighteen months later, and I'm four stone lighter!

Weight gain becomes a personal crisis because it indicates loss of control and lack of self-discipline. The ideology of healthism is a way of controlling and regulating the body. The body is made to obey the internalised ethic of puritanism and obedience. Enhanced body-image and self-esteem after loss of weight in turn, reinforced by the respect of others, can then become self-confirming. Runners not only adapt body weight and shape to cultural norms in the larger community but also to those of their own subculture of distance running as they need to make the body the instrument through which they achieve success. Their desire to adhere to the norms and values of the distance running subculture is closely linked to the unique ethos related to the 'social

world' (Unruh, 1980) and the strong sense of identity that participants have with the activity (Shipway et al, 2012).

The body as a source of meaning

The body has been the focus of people's experience of health and fitness and also occupies a central place in the consciousness of many people. Wainright, Williams & Turner (2005) suggest that the social context shapes ideas on the human body. The runners confirm the 'high' their body allows them. One of the participants expresses it most clearly by calling running *a life-changing experience* and this generates a confident self. Emma declares:

I found that having completed the training and finished the race, I felt more confident and powerful in all areas of my life. If I can run a Marathon, I can do anything.

After a Marathon event Alana, a 29 year old with 7 years of running experience, mentioned how important and influential the physical act of running had become in her life and the impact it has:

Euphoric was how I would describe feeling at the finish. Since finishing, I have smiled so much my face aches more than my legs. Running the Marathon was like

childbirth. I found reserves of strength I never knew I had. I realised my body was capable of wonderful things.

Body achievements enhance self-esteem (Corbin, 2003). Alana commented that *the human body is an amazing thing and I found strength I didn't realise I had*. Health and body-self are constituted by these runners through their leisure behaviors. As we shall see however, the self-image is often disrupted through injury, pain or ageing. Understanding of the body and the meanings attached to it are socially constructed, not only through experience but also through cultural expectations. The rewards are achieved through high commitment, and perseverance (Shipway and Jones, 2007). Training and preparing to run contributes to this sense of identity; interaction with others who have similar values enhances this and generates a healthy and confident self. In distance running, the body is used in terms of health, vigour, movement and other physical characteristics and in all sensory perception, as Higham & Hinch (2009) confirm. Sparkes (2000) also suggests that the integrity of the self is assaulted when athletes' notions about the well-functioning body are disturbed and the sense of wholeness of body and self is disrupted. He looks at the injured running self as a 'disrupted body project'. In the original ethnographic study which underpins this research, the strength of identification that participants had with the activity of distance running emerged as one of the central themes. Those findings, documented in several journals within sport studies (Shipway & Jones, 2007; 2008), provides further illustration on how meaning is created through engagement with the distance running social world.

The body and pain

Runners construct a self which is consistent with 'being well and healthy' and feel troubled when this is disrupted. They monitor their own bodies, assess their own performance in the light of this evaluation, and become anxious when their body lets them down through weight gain or injury. The stress of running and training to run often leads to injuries, a regular occurrence for the majority of participants in the research. They often tend to ignore their body's demands and the advice to rest from others. This is in contrast to their knowledge, as experienced runners, that the body needs rest and recovery for best performance. Sometimes athletes don't 'read' their body, or more likely, they don't listen to it, and they *get carried away* (Trevor), that is, they run when they should not.

The discussions of the participants about pain and injury in running also conflict with the discourse of healthism mentioned earlier, another paradox in the findings of this study. From the perceptions of health and well-being, runners construct their own stories of pain and injury. They rarely mention the body when they feel well and healthy. Corbin (2003: 257) states that 'they [most people] take the body for granted and build their self-concepts and identities on what they can do rather than what they can't do.' The participants in this study, like other athletes, are more aware of their body because of their running performance; they read their body and understand it better than the ordinary person. Knowing the limitations that the body imposes on them helps them to improve

their running performance. When they experience pain and injury, they become even more sensitive to it.

The themes of *running in pain, dealing with injury, self esteem issues within running, and the health benefits of participation* emerged from both interviews and observation in this research. Physical injury becomes a *natural part* of the serious runners' condition. Just as professional ballet dancers have a stoical attitude to pain and injury (Wainright & Turner, 2004) so runners endure pain and injury, with the difference that running is not compulsory in distance-runners' professional lives. Pain and injury, however, cause 'disruption' to the taken-for-granted body-self. While dancers' identities are embedded in their work roles, the self of runners is involved in 'serious leisure' (Stebbins, 2007), their free-time pursuit. Runners who suffer – and indeed enjoy – intense physical agony, share 'habitus', internalised orientations - schemata of perceptions and actions influenced by their social location. Injury threatens the habitus of distance runners, the physical capital which they have accumulated and try to maintain. They often put this in jeopardy through training as they see the suffering of pain as an inevitable part of achieving their goal of optimum performance.

The stories of pain and injury are full of paradoxes and do not always follow the well-defined traditional lines of the health discourse as provided by social policies, medical guidelines or conventional perceptions of every day life. When the body is threatened, so is the self of the participants. The findings of the study suggest a tendency towards feelings of pain as being normal and routine, as almost an *occupational hazard* and the

price that has to be paid to be competitive at sport. Pain and injury are an endemic part of the distance running social world (Allen Collinson & Hockey, 2007; Allen Collinson, 2008). Sandra, a 55 year old who has been running for 8 years recalls the paradox of being in pain and very aware of her body, and the joy of running her first marathon:

Despite being in horrific pain for the last couple of miles (my feet actually felt they were on fire), I loved every single minute and have never been so proud of myself. I feel like a real champion, and I'm still buzzing from it all 5 days later!

'Feeling good' and 'feeling pain' are not synonymous, but these bodily sensations seem to be closely linked. Committed and dedicated runners will persevere through fatigue, pain and injury overcoming the feelings of physical discomfort, and they use the expression *no pain, no gain* regularly (Shipway & Jones, 2007). Indeed, the discourse of physical health has almost disappeared, and many participants see mental well-being and self-image as most important. Upon completing one Marathon event, Christine, a 45 year old with 11 years of running experience, noted:

I clearly remember running towards the finish and hearing the announcer telling us that we were achieving something only 1% of people in the country will achieve. They say that you finish a different person to when you start a marathon and they are right!

The findings suggest that there is a paradox in wishing to avoid pain and injury, keeping healthy and well, and achieving success which is seen as a way of overcoming obstacles and enhancing emotional and mental well-being. Ewan says:

When the medal was put around my neck I forgot all those hard miles; they melted into the background as I looked dazed and confused at the medal. I had done everything I had ever dreamed of. I have never felt more pride and happiness and I knew that moment would stay with me forever.

Although they see the link between body and mind when commenting on the advantages of the running body, some also use the metaphor of 'the body as a machine' - a concept deriving from Descartes - which has to be kept 'in gear', well-fed and watered, which contradicts the earlier discussion of the body as an integral part of self where a fusion of mind and body takes place. Andy, a 51 year old with 20 years of running experience, noted that:

Your body is like a car. You need to put the right fuel in the tank or you won't run properly.

Some runners echo Terry who also seems to see the body as a machine and speaks of '*re-charging the body*' by taking a day of rest. This objectification of the body echoes the bio-medical model of Western medicine which means that the mechanical 'system' has to be maintained and repaired if it doesn't function, otherwise it breaks down. In the

runners' view it needs either exercise or rest. This fits the mind-body dualism of Descartes which sees the mind as distinct from bodily phenomena (though this philosophy sees the corporeal as less important than modern medicine). For Descartes, the body is physical, a system of flesh, blood and organs interacting with each other. However this is also linked with the notion that the body is an enemy which has to be conquered, a comment that relates to early Greek ideas and to the Christian tradition. Runners in this study often do believe in the value of conquering the body. The expressions such as *fighting through injury*, *overcoming pain* are common. Anthony, a 44 year old with 16 years of running experience commented:

I have spent months agonizing over training schedules, and worrying over illnesses and injury. I confess to being a complete anorak and not deviating from my training schedule at all. Race day was the reward for the hard work of the previous four months.

This observation indicates that pain and injury also bring achievement and rewards. Again a paradox exists in the mind of the runners. Pain, injury or exhaustion is often seen as physical evidence of commitment to their group and their activity, and this becomes '*a badge of honour*', as one participant calls it, and Thornton (2004) confirms the same in his own work.

Conclusion

The results from this study indicate that distance running might assist with social interaction, improved health, and enhanced body image. The health benefits of running tended to be a primary concern of the participants in this research, linked to the 'presentation of self' as a fit person with a positive body image. Webb, Quennerstedt & Öhman (2008:353) maintain that the body is socially and culturally constructed and through 'the display or absence of certain markers of health'. These signs have been discussed and confirmed by the participants in this study. These runners accept the discourse of healthism which fits in with the prevailing focus on the culture of health and fitness. However, these discourses clearly contain numerous paradoxes, tensions and contradictions which have also been identified.

The performance of the physical or biological body, and the way in which its health and fitness is valued by runners, becomes an expression of the self and self-esteem. On the whole, runners take their bodies for granted and do not mention it when the running is successful and assures their well-being. When the body-self is disrupted, they become body-conscious and experience anxiety – and they are in conflict with their own self-perception as fit and healthy human beings. On the one hand, distance runners are health conscious, driven by a wish for a fit and trim body through exercise; proper nutrition and hydration; on the other, they practise running to excess, forget about pain and injury and celebrate success by eating and drinking (alcohol). They know the boundaries of their physical body, but are willing to go beyond them during training. Runners take up running to free themselves from addiction, but many become instead addicted to running. They had an instrumental perspective on the body and see it as a machine to be

maintained, but they also feel that they can ‘cure’ depression and stress – mental states – by distance running. The life of the running community in this research is full of these conflicts and paradoxes. We have discussed both social and individual conceptions of health and the body. The runners in this study not only mirror ideas on health and well-being of their social environment but have internalised them, which again demonstrates the interaction between individuals and their social context.

References

Abbas, A. (2004). The embodiment of class, gender and age through leisure: A realist analysis of long distance running. *Leisure Studies*, 23 (2), 159-175.

Allen Collinson, J. (2008). Running the routes together: Corunning and knowledge in action. *Journal of Contemporary Ethnography*, 37 (1), 38-61.

Allen Collinson, J. & Hockey, J. (2007). Working out identity: Distance runners and the management of disrupted identity. *Leisure Studies*, 26 (4), 381-398.

Atkinson, M. (2008). Triathlon, suffering and exciting significance. *Leisure Studies*, 27 (2), 165-180.

Austin, M. (2007). Chasing happiness together: Running and Aristotle's philosophy of friendship. In Austin, M. (ed.), *Running and Philosophy: A Marathon for the Mind*, 11-20. Oxford: Blackwell.

Australian Government Department of Health & Ageing (2006). Lifestyle prescriptions. Canberra: AGDH & A. Available from www.health.gov.au/lifescrpts {Accessed 15 February 2012}

American College of Sports Medicine (2006). Charting and Changing the Policy Landscape: Promoting Physical Activity and Reversing Physical Inactivity through Policy Solutions. Available from www.asm.org {Accessed 16 February 2012}.

Bale, J. (2004). *Running Cultures: Racing in Time and Space*. London: Routledge.

Brewer, J. (2000). *Ethnography*. Buckingham: Open University Press.

Buckworth, J. & Dishman, R.D. (2002). *Exercise Psychology*. Champaign, IL: Human Kinetics.

Cheek, J. (2008). Healthism: A new conservatism. *Qualitative Health Research*, 18 (7), 974-982.

Corbin, J.M. (2003). The body in health and illness. *Qualitative Health Research*, 13 (2), 256-267.

Crawford, R. (1980). Healthism and the medicalization of everyday life. *International Journal of Health Services*. 10 (3), 365-388.

Crawford, R. (2006). Health as meaningful social practice. *Health*, 10 (4), 401-420.

Foucault, M. (1977). *Discipline and Punish*. New York: Vintage Books.

Frank, A.W. (1995). *The Wounded Storyteller: Body, Illness and Ethics*. Chicago: The University of Chicago Press.

Greenhalgh, T. & Wessely, S. (2004). 'Health for me': A socio-cultural analysis of healthism in the middle classes. *British Medical Bulletin*, 60 (1), 197-213.

Haslam, S.A., Jetten, J., Postmes, T. & Haslam, C. (2009). Social identity, health and well-being: An emerging agenda for applied psychology. *Applied Psychology*, 58 (1), 1-23.

Higham, J. & Hinch, T. (2009). *Sport and Tourism: Globalization, Mobility and Identity*. Oxford: Elsevier Butterworth Heinemann.

Kronenfeld, J.J. (2006). Changing conceptions of health and life course concepts. *Health*, 10 (4), 501-517.

Leedy, M. (2003). Commitment to distance running: Coping mechanism or addiction? *Journal of Sport Behaviour*, 23 (3), 255-270.

Schensul, J.J. (2005). *What is ethnography?* Available from: <http://cira.med.yale.edu/events/mbseminars/mbs070705.pdf> {Accessed 15 August 2011}.

Sharkey, B.J. & Gaskill, S.E. (2007). *Fitness and Health*. 6th ed. Champaign, IL: Human Kinetics.

Shilling, C. (2002). Culture, the sick role and the consumption of health. *British Journal of Sociology*, 53 (4), 621-638.

Shilling, C. (2003). *The Body and Social Theory*. 2nd ed. London: Sage.

Shipway, R. & Jones, I. (2007). Running away from home: Understanding visitor experiences in sport tourism. *International Journal of Tourism Research*, 9(5), 373-383.

Shipway, R. & Jones, I. (2008). The Great Suburban Everest: An 'Insiders' Perspective on Experiences at the 2007 Flora London Marathon. *Journal of Sport & Tourism*, 13 (1), 61-77.

Shipway, R. & Holloway, I. (2010). Running Free: Embracing a healthy lifestyle through distance running. *Perspectives in Public Health*, 130 (6), 270-276.

Shipway, R. Holloway, I. & Jones, I. (2012). Organisations, Practices, Actors and Events: Exploring Inside the Distance Running Social World. *International Review for the Sociology of Sport*, 0 (0), 1-18.

Smith, S. (1998). Athletes, runners and joggers: participant-group dynamics in a sport of 'individuals'. *Sociology of Sport Journal*, 15, 174-192.

Smith, S. (2000). British non-elite road running and masculinity: A case of "running repairs"? *Men and Masculinities*, 3 (2), 180-208.

Sparkes, A. (2000). Autoethnography and narratives of self: reflections on criteria in action. *Sociology of Sport*, 17 (1), 21-43.

Stebbins, R. (2007). *Serious Leisure: A Perspective For Our Time*. New Brunswick: Transaction.

Theberge N. (1991.) Reflections on the body in the sociology of sport. *Quest*, 43 (2), 123-134.

Thornton, A.(2004). Anyone can play this game: ultimate frisbee, identity and difference. In Wheaton, B. (Ed.) *Understanding Lifestyle Sports: Consumption, Identity and Difference*. London: Routledge, 175-196.

Tulle, E. (2007). Running to Run: Embodiment, Structure and Agency Amongst Veteran Elite Runners, *Sociology*, 41 (2), 329-346.

Turner, B.S. (2008). *The Body and Society: Explorations in Social Theory*. 3rd ed. London: Sage.

Turner, B.S. (1984). *The Body and Society: Explorations in Social Theory*. Blackwell: Oxford.

United Kingdom Department of Health (2004). *Choosing health? Choosing activity. A consultation on how to increase physical activity*. London: Department of Health.

United Kingdom Department of Health (2009). A plan to getting the nation moving. London: Department of Health.

Unruh, D. (1980). The nature of social worlds. *Pacific Sociological Review*, 23, 271-296.

US Department of Health & Human Services (2008). Physical activity guidelines for Americans. Available from www.health.gov/paguidelines {Accessed 21 February 2012}.

Wainright, S.P. & Turner B.S. (2004). Epiphanies of embodiment: Injury, identity and the balletic body. *Qualitative Health Research*, 4 (3), 311-337.

Wainright, S.P., Williams C., & Turner B.S. (2005). Fractured identities: injury and the balletic body. *Health*, 9 (1), 49-66.

Webb, L., Quennerstedt, M. & Öhman, M. (2008). Healthy bodies: Construction of the body and health in physical education. *Sport, Education and Society*, 11 (4), 352-372.

Wright, J., O'Flynn, G. & Macdonald, D. (2006) Being fit and looking healthy: Young women's and men's constructions of health and fitness. *Sex Roles*, 54 (9-10), 707-716.

Yair, G. (1990). The commitment to long distance running and levels of activity: personal or structural? *Journal of Leisure Research*, 22, 213-227.

TABLE 1 – INSERT NEAR PAGE 9

Interview	Pseudonym	Age	Gender	Approximate Years Running
1	Melvyn	53	M	29
2	Mark	42	M	6
3	Kara	45	F	14
4	Alison	29	F	6
5	Dennis	32	M	9
6	Robin	50	M	12
7	Colin	46	M	16
8	Louise	29	F	8
9	Emma	55	F	18
10	Terry	65	M	32
11	Gavin	68	M	30
12	Karen	32	F	6
13	Simon	35	M	10
14	Ewan	46	M	7
15	Alana	29	F	7
16	Trevor	55	M	12
17	Sandra	55	F	8
18	Andy	51	M	20
19	Anthony	44	M	16
20	Christine	45	F	11

Table 1 – Summary table of distance runner interviews