

Professionalization of Exercise Physiology^{online}

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As An Exercise Physiologist Thinketh

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Every action and feeling is preceded by a thought.

– James Allen
As a Man Thinketh
1902

The Aphorism, “As a man thinketh in his heart so is he,” is the message that drives the ASEP organization. It is a simple message, yet it is a powerful directive with important implications for 21st century exercise physiologists. After all, if it is true (as I believe it is) that what we think determines our behavior, action, and destiny, then, exercise physiologists must start thinking as the ASEP leadership does about exercise physiology. Thinking is the sum of our thoughts that are either cultivated or neglected. Even during my early years teaching at Wake Forest University, I was bothered by the thinking that exercise physiologists were comfortable with the idea that they and what they did rightfully fall under the control of the American College of Sports Medicine (ACSM).

As I grew older, my thinking did not change. I encountered many instances of other healthcare professionals doing what they thought was right for their profession. They had their own code of ethics, accreditation

A goal without a plan is just a wish.
-- Antoine De Saint-Exupery

guidelines, certification, and standards of practice. It made sense to me. Later, when I was the Graduate Coordinator at the University of Southern Mississippi, I made several

attempts to change the PhD degree from Human Performance to Exercise Physiology. I tried different things to get the faculty and the administration of the School of HPER to support the notion of exercise physiology as a profession. I was unsuccessful on both accounts.

Frankly, I was stunned by the failure of exercise physiologists to think outside the box of ACSM. Their thoughts then (and now) bear directly on their future and that of their students. There is something that every exercise physiologist can do to start fresh.

A day without thinking about the professionalization of exercise physiology is a day wasted.

Tell the world, especially those who are driven and/or trapped by yesterday's thinking that exercise physiologists need to support their own professional organization. It is a beginning, and it is enough to know what you are and what you do.

There are many examples of others who know that they are physical therapists and not occupational therapists, nurses and not dietitians, lawyers and not physician assistants. The right thoughts shape the conditions of each of these professions that, then, set the stage for credible opportunities in their respective profession.

My experience as a college teacher and a counselor to students has taught me that much of the unhappiness students feel burdened by, much of the guilt, much of the sense of having been cheated by academia, stems from the failure of the faculty and the administration telling the truth about meaningless undergraduate degrees. That is why the work of the ASEP leadership is so important. It takes the form of a new beginning that is focused by the desire to help the students of the profession accomplish their goals. They understand the power in stating a vision for something better. That is why ASEP has a vision for exercise physiology. They get that the change process will take time, but that is not a problem as long as their thoughts continue to guide their actions. There is something in the human soul that causes us to think more of ourselves every time we do the right things for the right reasons.

The achievement of professionalism in exercise physiology is the result of a vision that goes beyond the sports medicine rhetoric. The vision is cherished because it defines "what is exercise physiology" and "who is an exercise physiologist." This is

clearly true of the ASEP vision. The shared honesty of wanting something better is both honorable and attractive. That is why the ASEP leaders push forward with their 21st century perspective regardless of the obstacles and flawed thinking of colleagues. The heroes of exercise physiology are not perfect, but they do have the faith to move beyond yesterday's thinking that fails to offer the students of exercise physiology the promise of a better future.

It would be odd to say that a code of ethics in physical therapy or nursing does not have an intrinsic value. How about exercise physiology? Such thinking should be the same, however challenging to write and/or imperfect in its original form and purpose. From the ASEP perspective, it is all about the effort regardless of the failure of others to get the message. No one should maintain the pretense of perfection or otherwise how will he or she learn and grow? There is little progress without making trying something new and possibly making mistakes. The ASEP emphasis on the exercise physiologist's capacity to safely promote health and wellness as a natural and acceptable outcome of their scientific expertise is not without criticism. Yet, there are few things as important as helping people become active so that they can enjoy the health benefits of physical activity.

The epidemic of a sedentary lifestyle and physical inactivity will only get worse if the exercise prescription is not embraced with mind and body expectations of something better even though there are some imperfections. My point is this: While it is true that exercise physiologists have made major strides in promoting the health benefits of regular exercise through their research and teaching, the process of developing the "exercise prescription" needs work. It is incomplete in its present form, especially the 100% emphasis on physiological considerations. No doubt this point will go against common thinking, but it is true. Hence, the critical distinction in the phrase, "As a man thinketh in his heart so is he" is that the traditional definition of the exercise physiology "prescription" is too simplistic.

Anyone who has never made a mistake has never tried anything new.

-- Albert Einstein

The value of prescribing exercise has been recognized for decades, as illustrated by the emphasis on a safe heart rate range. But, widespread interest in the use of one or more of the heart rate driven prescriptions is not enough to correct the dysfunctional mind and body conditions produced by the unforgiving dimensions of inactivity. Often, it is neither completely safe nor complete in dealing with the educational side of the current epidemic of sedentary lifestyles. That is, to a greater or lesser extent, we never entirely outgrew the thinking of the 70s and 80s. A part of us keeps thinking that attending to just the physical realm of us will correct everything else. It is not that we aren't willing to learn, we are. My suspicion is that we are charmed by the simplicity of the prescription.

To a degree, this problem is an outcome of organizations that certify personal trainers as though they are qualified to safely prescribe "exercise as medicine." It is unfortunately but true that thousands of clients, patients, and athletes are encouraged to engage in repetitive bodily movements that are not safe or structured properly to develop health-related mind-body wellness (i.e., aerobic fitness, muscular strength and endurance, and flexibility). Then, too, given the failure to recognize that walking is more often than not the right exercise prescription for the majority of Americans, more often than not personal trainers push vigorous exercise that increases the likelihood of musculoskeletal injuries. The illusion of high-intensity exercise as being necessary to increase health and well-being is problematic among trainers.

The embarrassing secret is that millions of sedentary people need an exercise prescription that is multi-dimensional. It is embarrassing because it has been known for decades that the all-too-human flaws represent a combination of mind and body and not

just the body. This understanding and distinction between a good exercise prescription and an excellent one is an important and timely one. While it should have been the case decades ago, it wasn't. Since the relationship between the mind and body works both ways, it is half the lesson learned when healthcare professionals fail to plan for both. Planning for and

All your dreams come true, if you have the courage to pursue them.
-- Walt Disney

anticipating the influence of the mind, everyday emotions in and out of work, and the

individuals' intellectual capacity all help in keeping us from becoming helpless, passive, and preyed upon victims of society.

The greatest gain in longevity comes with understanding the psychophysiological variables, the nervous and immune systems, and the risk factors for cardiovascular diseases, obesity, diabetes, cancers, and osteoporosis. The risk of failing to understand the scientific aspects of the psychological factors as well as the physiological factors is high when relying on non-academically educated trainers with "just any certification." After all, many of the personal trainers do not have an academic degree much less a degree in exercise physiology. That is only partly why the central characters in the development and the prescription of low- to moderate-intensity exercise as medicine should be exercise physiologists.

Board Certified Exercise Physiologists have demonstrated that they understand the role of stress, emotions, and anxiety and how they affect the immune and other systems throughout the body. They are educated to help their clients, patients, and athletes in ways to enhance the mind-body complex. Not only the cyclists and runners

Nobody will believe in you unless you believe in yourself.

-- *Liberace*

benefit from the exercise physiologist's analysis of the cardiovascular variables, but so do the walkers and low-intensity exercisers.

The risk of musculoskeletal injuries from training properly is significantly reduced by exercise physiologists. They understand the importance of not continuing to push the extreme forms of non-scientifically tested training techniques (i.e., win-at-all-costs).

In individuals with underlying heart disease, the wrong kind of exercise and/or the wrong intensity can trigger chest pain that may lead to a myocardial infarction. Doing whatever is popularized by many non-exercise physiology gyms today, last month or last year to increase physical fitness and/or enhance athletic performance is entirely different from a properly prescribed exercise program to reduce psychological stressors and/or risk factors associated with common chronic diseases. That is why I tend to be suspicious of book, articles, and so-called fitness experts that tell us, "Start my program and life, health, and happiness will be yours." Life is too complicated to realize our

goals and dreams without taking the prescriptive process seriously with a credible healthcare professional.

In summary, the first thing exercise physiologists have to do is free themselves of the idea that they must be loyal to sports medicine. There are many kinds of healthcare professionals, and exercise physiologists are learning to think exceptionally well with the best of them. Because the ASEP leaders want to help the students of exercise physiology, they have worked hard to think differently from many of their counterparts. Such thinking has freed them of the unrealistic notion that if they part ways with traditional thinking, they will cease to exist. This knowledge is engraved deep within their minds. It is driven by the appreciation that time is precious and the change process is always ongoing. The knowledge that they are responsible for their own credibility gives them the opportunity to declare that certain things (e.g., exercise prescription and exercise is medicine) are supremely valuable to the profession of exercise physiology.

You cannot make yourself feel something you do not feel, but you can make yourself do right in spite of your feelings.

-- Pearl S. Buck

The second thing exercise physiologists must do is to challenge the illusions of yesterday's thinking that defines how they think today. Only when they give up the decades-old association with sports medicine and learn to see that they are responsible for their destiny will they begin to become what they truly are: healthcare professionals. What we thinketh in our hearts is what gives up the power to be ourselves. As Maria Robinson once said, "Nobody can go back and start a new beginning, but anyone can start today and make a new ending." To start today the new ASEP transformation, it is necessary to stop doing the sports medicine thing.

There is power to the thoughts that we have. The thoughts that we entertain will become the decisions that we act upon. It is vitally important to understand and know that we have the power to change our thoughts, to expel thoughts, to eradicate thoughts, and to take up new thoughts.

-- Ruthe McDonald