This course provides students with a broad introduction to the core principles and goals of public health from a kinesiological perspective. Topics addressed include: knowledge systems in public health; basic principles of the epidemiology of physical activity (PA); public health policy development to encourage regular PA; methods and study design in public health and PA; the design, implementation and evaluation of community level PA interventions; the impact of social, political and economic contexts on public health and how this relates to health disparities; and the significance of health systems and policy on the health of populations.

A central challenge I have faced when teaching this course is how to move beyond the notion that health is an individual’s responsibility (i.e., ‘if people would just exercise, they would be healthy’) to consider the larger social, political, economic and environmental factors that shape the health of individuals and populations. I view sustainability as a paradigm that will help students to think critically about, and better understand, health inequalities across and within societies. For example, I think sustainability is a framework that can be used to have students consider: who has access to safe spaces for PA and how does this differ by racial and economic status (i.e., issues of environmental and social justice)?; how does the built environment promote or prevent daily movement?; how might a consideration of cultural diversity and indigenous/traditional knowledge help us create effective and equitable PA programs and policies?; how does our culture of consumption and consumerism (as it relates to PA and especially the fitness industry) impact public health and environmental sustainability?

More specifically, I will integrate sustainability into the following aspects of the course:

**Chronic disease and PA**: Viewing this issue through a lens of sustainability will facilitate a consideration of the impact one’s environment (neighborhood) has on health, and how access to health promoting resources often differs by race and social class. Chronic disease and PA will also be examined in relation to the built environment, with a focus on how the creation of post-WWII suburbia in North America has promoted a car-centric and inactive lifestyle that is not only poor for health (physically and mentally) but also a threat to environmental sustainability. Also discussed will be the emerging link between departments of urban planning and public health, as well as reflection on how the field of kinesiology can contribute to the conversation.

**Consumer culture and the fitness industry**: Students will be challenged to think critically about consumerism as it relates to PA and the body. Drawing on social theories of the body that examine how bodywork (often conducted through the consumption of health & fitness products) is used to shape identities and signify our ‘worth’ as ‘fit’ citizens, we will reflect on the relationship between happiness and consumption, consider the physical, psychological and environmental costs of such bodywork/consumption, and consider how we, as kinesiologists, may perpetuate – and change – this situation.

**Community-development PA interventions**: Within the realm of public health, there is a growing movement towards the use of ‘bottom-up’ interventions that engage community members (especially those traditionally marginalized) in the creation of more sustainable and equitable health-promoting environments. We will examine the potential of PA interventions that utilize this community-based empowerment approach (with a focus on creating more culturally sensitive programming) and explore the role of socio-ecological models of active living and environmental sustainability within this.