

## The Value of Health in the Writings of H.D. Thoreau

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### ABSTRACT

By means of a survey of Thoreau's writings, this article analyses his thoughts on health, emphasising some features that fit well with contemporary debates in the philosophy of medicine. Thoreau understands health as an environmental value, one that cannot be achieved without a personal relation to nature, but he does not provide a static definition of health within a fixed hierarchy of values. Thus he avoids a certain degree of essentialism that, when imposed on his work, makes it seem more utopian and anti-scientific than it really is. The meaning of health for Thoreau is often contradictory and hard to disambiguate, and his context was different in many respects to ours, but his ideas on this topic still serve to criticise some of modern medicine's views on health and disease, and to steer it towards a more environmentally-informed approach to these phenomena.

### KEYWORDS

Health, disease, values, philosophy, medicine, North American nineteenth century literature

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1. INTRODUCTION

The writer and naturalist Henry David Thoreau (1817–1862) is usually considered an environmental pioneer. His passion for nature, added to his hyperbolic and uncompromising prose, made him the ideal green humanist, one who could not preserve his ‘health and spirits’ unless he spent a minimum of four hours a day ‘sauntering through the woods and over the hills and fields absolutely free from all worldly engagements’ (2007: 187). He certainly is the epitome of ‘romanticism in ecological thought’ (Babe, 2006: 39–40) and a founding father of American nature writing. Thoreau was profoundly interested in the scientific works and methods of his time; he was a frequent visitor to the Harvard library, and in 1847 he collected zoological specimens for its museum. There is a growing body of literature on the complex relationship he maintained with science, a subject he often wrote about during his lifetime (Thoreau, 1999).

In this paper I briefly examine some of Thoreau’s ideas of health and disease in order to clarify the meaning of these concepts in his work. This goal is attempted through a reading of both his public and private writings – the books and essays published in his lifetime, and his journal and correspondence. These sources date from different points in Thoreau’s career as a writer; however, I do not mean to imply a unification to his views, since a consideration of the context and discussion of the whole of his writings is beyond the scope of this paper, and has been pursued elsewhere (see for instance Tauber, 2001; Cafaro, 2004; Robinson, 2004).

In trying to contribute to a more comprehensive image of Thoreau, I argue that his ideas on health are consistently based on a particular way of looking at the relationship between facts and values. It is possible to identify in his work a certain degree of tension (regarding the definition of and means to health) that is also present in current philosophical debates; in fact, this might be one of the reasons why his writings remain an important source of inspiration and controversy within the environmentalist movement.

2. THOREAU ON VALUES

Current controversies about the role of nature writing in environmental valuation stem from the feeling that in Thoreau, there might be many models of the writer’s relationship with the material world, some worse than others (Jamieson, 2006: 274). An uneasy tension between empiricism and idealism (or, as it was called in Thoreau’s time, ‘transcendentalism’) is quite

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visible in places, such as the 'Higher laws' chapter in *Walden*, his most famous book, which was published in 1854 but was begun in 1845–1847, while he lived in a cabin he had built by the Walden pond in Massachusetts. This tension is not resolved by Thoreau, whose refusal to choose between empiricism and idealism might be taken as a symptom of his basic honesty and pragmatism – after all, Thoreau's oeuvre is not a coherent whole, as he was not a systematic philosopher and did not mind contradicting himself; his concern was not with that consistency that his friend Emerson called 'the hobgoblin of little minds'.

Human health is often understood as one of the values in the service of which ecology was founded in the late nineteenth century (Phillips, 2003: 42–43). Indeed, a new way of talking about values began precisely in that period. Before then, the word 'value' had been used for centuries to indicate a certain property or relation of things. According to this use, value is attached to something, something 'has' value, and this is the traditional, relational, and economic meaning of the word: *traditional*, because it is the oldest meaning of 'value'; *relational* (or possessive), because it usually relates something to a given value; and *economic* because, at least since Aristotle, it is closely linked to economic exchange and price – even if Aristotle was critical of forms of exchange mediated by money. The second, new, entitative, or philosophical meaning of the term is the one we use today in phrases like 'health is a value'. This contemporary meaning is *philosophical*, because it has been brought about mainly by philosophers; *entitative*, because values in this sense tend to be conceived of as things; and relatively *new*, because it appeared only about 130 years ago (for a historical discussion of this process, see Menéndez Viso, 2005).

With a couple of exceptions in his journal, Thoreau sticks consistently to the first, traditional meaning of 'value'. This might be surprising, given that he is usually understood as being critical of economic views of what is really valuable or important. But Thoreau advocated a change in the kind of things that have value, not in the manner of valuing them. In their correspondence, he asked his friend H.G.O. Blake, 'Have you not a thinking-faculty of inestimable value?' (2004: 60; letter dated 9 August 1850). This value might not be quantifiable or subjected to economic exchange (because it is 'inestimable'), but it is still something that the world *has*.

In *Walden*, Thoreau often uses the word 'value' as a verb, writing about 'the most valued part of the day', or 'such things as farmers and traders value'. Value is often 'money value' or 'market value', and it is for the most part attached to something: the 'pecuniary value' of labour, 'the value of the farm', 'the value of the land', and even 'the value of a man'. Things and

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places can be ‘of most value as a neighbour’ or even ‘of absolute value’. Values are acquired by something or attached to something: Thoreau ponders ‘what a value is still put upon wood’ while he complains that we do not have the time ‘to acquire any new value for each other’, and that the ‘greatest gains and values are farthest from being appreciated’. There is not much talk about health or any other value as such, as abstract ‘values’. Actually, the closest he gets to acknowledging an abstract value in the whole book is when he claims to prefer some things to others, and especially to value his ‘freedom’.

Thoreau’s use of ‘value’ is mostly relational or economic: for him, certain things *have* value (for a discussion of ‘economic value’ in *Walden*, see Cafaro, 2004: 85–87). What is new about his view is rather the way he conceptualises those things. ‘Health’ is one such example. It is a word he sometimes uses more or less metaphorically (as when he writes, for example, that ‘nature’ is but ‘another name for health’, Thoreau 1962: V: 394–5). For that reason, it is difficult to relate Thoreau’s use of the word to its use in modern medicine without first examining his idea of ‘health’ as a concept.

### 3. FROM ‘SILENCE OF THE ORGANS’ TO HARMONY WITH NATURE

Shortly after Thoreau’s death, the critic James Russell Lowell concluded that his ‘whole life was a search for the doctor’. In *The Senses of Walden*, Stanley Cavell wrote that the quest of this book is for the recovery of the self, ‘as from illness’ (1992: 80). However, Thoreau’s views on health and disease have not been much studied. A survey of recent literature only yields one relevant result – a paper whose authors bring Thoreau’s writings to bear on the values of modern hospital care in the U.S., including a brief history of hospital design to show that patients were not always isolated from natural surroundings and a healthy diet (Branch and Peirce, 1996).

Throughout his life, Thoreau was exposed to several experiences of disease, from toothache to tuberculosis; indeed, he died of ‘consumption’ at the age of forty-four. This was a family illness: his grandfather had died of it in 1801, and when Henry’s father died in 1859, his symptoms were consistent with tuberculosis. His brother John was living with it, though tetanus took him first, and their sister Helen became a victim in 1849 at the age of thirty-six. Of course, these events are reflected in his writings, especially in his journal, which he began in 1837.

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Three years later, Thoreau began to write about health, using bold statements in which individual health is presented as essentially related to and affected by the environment: 'No man has imagined what private discourse his members have with surrounding nature, or how much the tenor of that intercourse affects his own health and sickness.' Of course, Thoreau's comments on health cannot be considered only in relation to his comments on nature, but must also be considered in relation to his attitudes towards the body. Those attitudes often seem to express his doubts about and impatience with bodily existence – partly a matter of his transcendentalist temperament, and also partly an expression of frustration with his own intermittently uncooperative and sickly body. At times, Thoreau adopts an attitude of non-interference towards this natural intercourse, so that 'the body takes care of itself' (1981: 181–2) and there is no conflict of interest between the diverse 'citizen[s] of the body'. Otherwise, he writes, '[s]ickness is civil war' (1981: 223), and a noisy one at that.

In a famous expression, the surgeon René Leriche (1879–1955) stated that 'health is life lived in the silence of the organs' (Canguilhem, 1979: 180). This classical idea of health, one that can be traced back to Kant and Descartes, seems to be behind Thoreau's assertion that in health 'the hand stands still on the face of the clock, and we grow like corn in the genial dankness and silence of the night' (1981: 229–30). By using similes with natural phenomena, he seems to equate health with the 'silence of the organs'. When we are healthy we are hardly conscious of it; when we are not, as Thoreau writes in his journal, then 'the convalescent are conscious of the health of nature' (1984: 209).

Along with health-as-silence, there are a number of passages in Thoreau's writings that speak about health in relation to sounds and musical imagery. It is not only that in health 'all the senses are indulged and each seeks its own gratification' so that 'it is a pleasure to see, and to walk, and to hear' (1981: 204). Rather, Thoreau believes that 'a skilful physician could determine our health by observing how these simple and natural sounds affected us' (2007: 75), because 'in health all sounds fife and drum for us; we hear the notes of music in the air, or catch its echoes dying away when we awake in the dawn' (1980: 175).

Playing with the dual meaning of 'sound', health is defined by Thoreau as 'a sound relation to nature' (2002: 229). To ensure health this relation to nature 'must come very near to a personal one', so that one 'must be conscious of a friendliness in her' (1962: X: 252). 'Sympathy with nature is an evidence of perfect health', he writes (1962: X: 188), and this sympathy lasts as long as 'the bodily vigor' (1997: 157).

#### 4. THE MUTUAL DEPENDENCE OF HEALTH AND DISEASE

All attempts to define health and disease have to cope with the problem that both are mutually dependent notions, whereby the one can only be described by using the other as a complementary explanation. Thoreau acknowledges this problem to the extent of recording in his journal that it is impossible to draw the line between health and disease (1992: 463). This is consistent with what he writes in other passages; not only because he notes that differences between people in respect to health are always small, but also because of his observation that often 'the sicker man is the nurse to the sounder' (1980: 35–6). Since the fruit of disease may be as good as that of health (1981: 272), he writes that it may even be 'healthy to be sick sometimes' (1990: 178). Some forms of disease may even work as a prophecy or precondition of health (2007: 210). More than mere expressions of Thoreau's habit of being paradoxical, these passages are representative of his being at a crossroads in nineteenth-century science, and of his reaction to the rising tide of positivism which began to seep into the scientific community of the 1840s and 1850s (Tauber, 2001: 104–139). Concepts of health and disease were not alien to this debate on the nature and methods of natural science. For instance, the idea of a 'self-healing force' was interpreted in the seventeenth and eighteenth centuries as an organic phenomenon, whereas in the nineteenth century, the explanation was reduced to a materialistic mechanism (Lohff, 2001).

In a journal entry from 1851, Thoreau writes that disease is the rule, and that 'no man is quite well or healthy'. 'Seen in this light our life with all its diseases will look healthy', he adds, because disease 'is not the accident of the individual nor even of the generation but of life itself' (1992: 34–5). This is an important theme, which was later taken up by Nietzsche in his early writings, in which he saw life itself as characterised by 'the essential imperfection of things', thus raising the tension between disharmony and harmony at the psychological and social levels to the level of the biological organism itself. Although Nietzsche never mentions Thoreau, he shares the view expressed in some of Thoreau's journal entries that to be sick is not to strive, and conversely, health is the expression of the self's 'ceaseless struggle' (Podolsky and Tauber, 1999: 303; 309).

However, for Thoreau, nature is as well adapted to our health as to our illness. As a result, he writes in *Walden*, the only 'incurable form of disease' is the 'incessant anxiety and strain of some' (1971: 11). As he was about to die, in the last personal letter he dictated to his sister Sophia (the very last was addressed to Ticknor & Fields, his editors), Henry gave this answer to a friend who asked particularly after his health: 'I *suppose* that I have not

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many months to live; but, of course, I know nothing about it' (1958: 641). There was irony in it, as he was perfectly aware of the imminence of his passing away, but he may have also thought that, because health and disease are mutually interdependent, they become phenomena impossible to isolate, predict or even define.

This uncertainty gives rise to a somewhat more prudential view of the means to health (although Thoreau always seems to retain his particular mix of down-to-earthness and idealism, on health as much as anything else). A few years earlier, when he was first coming to terms with his tuberculosis, he wrote in his journal that the 'care of the body is the highest exercise of prudence':

'Let us apply all our wit to the repair of our bodies as we would mend a harrow, for the body will be dealt plainly and implicitly with. We want no moonshine nor surmises about it. This matter of health and sickness has no fatality in it, but is a subject for the merest prudence. If I know not what ails me I may resort to amulets and charms and moon struck die of dysentery.'  
(1981: 272)

In his book on the woods of Maine, he wrote that every 'creature is better alive than dead, men and moose and pine-trees, and he who understands it aright will rather preserve its life than destroy it' (1972: 121). In this quest to sustain life, a person 'sits as many risks as he runs' (1971: 153), but run we must; once we accept that life is 'full of danger', we must learn to live without 'anxiety and strain'. Thoreau's totemic symbol in his journal is the same he chose as a motto for *Walden* – chanticleer, the rooster: 'I would brag like the chanticleer [sic] in the morning – with all the lustiness that the new day imparts – without thinking of the evening when I & all of us shall go to roost' (2000a: 172).

Thoreau received a classical education at Harvard, and the Stoic influence is quite clear in his work. However, in contrast to the popular notion of the grim Stoic sage with a stiff upper lip, Thoreau found in much Stoic writing 'a marked sense of gladness or joy' (Richardson, 1986: 190–191). Much of what Thoreau says about health is consistent with the Stoic idea that the laws ruling nature rule men as well, expressed thus by Marcus Aurelius in his *Meditations*: 'Universe, your harmony is my harmony: nothing in your good time is too early or too late for me. Nature, all that your seasons bring is fruit to me: all comes from you, exists in you, returns to you.' (Book 4, 23)

Because health is the 'free use & command of all our faculties' and its 'equal development' (1990: 192), Thoreau also advocates a sort of Aristotelian midway approach to it: 'Every Realm has its centre and the nearer to that

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the better while you are in it'. Health is thus 'the happiest of all mediums'; if there is excess or deficiency, disease will appear (1984: 207). To achieve this medium, Thoreau recommends several things. More important than *what* they are (some of them might look quite silly) is the fact that they are *simple* forms of action. Listening to crickets (1990: 274), or watching the sun rise or set, are healthy habits because these activities 'relate ourselves for our mind's & body's health to a universal fact' (1992: 270). Such affordable and natural facts represent for Thoreau a link of sympathy, a connection between the universe and oneself; indeed, those facts are for him the warrants of health, a guarantee that nature 'is doing her best each moment to make us well', as he wrote in a journal passage dating from 1853, which proved so important that it made its way into the manuscript of *Walden*:

'She [nature] exists for no other end. Do not resist her. With the least inclination to be well, we should not be sick. Men have discovered – or think they have discovered – the salutariness of a few wild things only, and not of all nature. Why, "nature" is but another name for health, and the seasons are but different states of health. Some men think that they are not well in spring or summer or autumn or winter; it is only because they are not *well in them*.' (1962: V: 394–5)

Thoreau's 'cure-all' or panacea – his 'tonic of wildness' (1971: 317–8) – can thus be summarised in a simple way: living out of doors (1997: 392–3) and living in the present (1997: 412). But he does not intend modern medicine to be abandoned or substituted by this tonic. Rather, he warns us that to ignore the environmental aspects of health is not a good way of fighting disease:

'Live in each season as it passes; breathe the air, drink the drink, taste the fruit, and resign yourself to the influences of each. Let them be your only diet drink and botanical medicines. In August live on berries, not dried meats and pemmican, as if you were on shipboard making your way through a waste ocean, or in a northern desert. Be blown on by all the winds. Open all your pores and bathe in all the tides of nature, in all her streams and oceans, at all seasons. Miasma and infection are from within, not without. The invalid, brought to the brink of the grave by an unnatural life, instead of imbibing the only great influence that Nature is, drinks only the tea made of a particular herb, while he still continues his unnatural life, – saves at the spile and wastes at the bung. He does not love Nature or his life, and so sickens and dies and no doctor can cure him.' (1962: V: 394–5)

In his edition of Thoreau's manuscripts entitled *Wild Fruits*, Bradley Dean provides an explanation for this Americanism, 'saves at the spile and wastes

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at the bung'. A barrel is filled through a 'bung-hole', which is stoppered with a bung and is usually located in the centre of the upright barrel. One uses the contents of a barrel by drawing small amounts out of the 'spile', a spigot usually located at the bottom of the upright barrel. Hence, explains Dean, the expression means 'to conserve or preserve a resource in one way and squander or despoil that same resource in another manner' (Thoreau, 2000b: 239). In other words, Thoreau warns about the foolishness of fighting disease while at the same time losing health by living an 'unnatural life', trying to stay healthy by throwing money at our personal health problems, instead of assuming responsibility for an environment that will keep us naturally healthy. Thus he argues that a more 'simple and wholesome relation to nature' (2000b: 58), in the many and culturally diverse forms that this relation exists, remains a source of public health but a relatively neglected form of medicine.

From the preceding review of his writings, one thing seems clear: even though he did not write about health as a 'value' in the entitative sense, Thoreau *valued* health, made it a subject of permanent consideration, and had practical advice to offer about it. This point has some historical interest, but what to make of his ideas on health today? In a context of technological medicine and medicalised death, it would be easy to dismiss his way of valuing health as old-fashioned and obsolete, but – as we will see now – it remains surprisingly contemporary.

#### 5. THOREAU AND MODERN MEDICINE

For a start, it is widely recognised that Thoreau was a pioneer of the possibility of recognising an element of salutary wildness inside everyday human existence (Haila, 1997). Even if the average scientist or medical researcher does not value wildness as such, the acknowledgment of a relationship between human health and ecosystemic balance is part and parcel of scientific discourse today, and Thoreau explicitly made that connection as early as the middle of the nineteenth century. However, it can be argued that the current Western medical system has not yet paid sufficient attention to the connection between human health and its main concepts or 'dominant narratives', which tend to see health mostly in military or commercial terms:

'Military metaphors play strongly in narratives of modern health care, as in the war against cancer or the fight against AIDS. Medicine is seen as an armed battle against disease, with health-care professionals serving as white-cloaked soldiers. The theater of operations is the hospital ward, where the army of

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doctors and nurses fight against invading viruses and the slow, subversive decay of the body. [...] [T]he effort to oppose disease is experienced as a battle to overcome or dominate nature.' (Branch and Peirce, 1996: 132–3)

'People think of health care as something to be bought, and, consistent with our consumer culture, people will likely be blind to the fact that the goods of the medical marketplace often come at considerable social and ecological cost. [...] Providers, likewise, may think about health care primarily in terms of profit. In practice, the desire to make a hospital profitable is often in tension with [...] ecologically sensitive policies and procedures.' (Branch and Peirce, 1996: 134)

In the philosophy of medicine, health concepts function somewhat like demarcation criteria in the philosophy of science: they mark off the jurisdiction of medical science, and protect it from an inappropriate intrusion by socioeconomic factors, which threaten the integrity of modern medicine (Khushf, 2007). There is a general consensus today that health should be understood as 'a functional ability of a person to realise vital goals necessary for minimal happiness'. Those goals are individually relative, and may vary from individual to individual; appropriate values are thus the values of this or that individual patient, not of 'patients in general' (Khushf, 2007: 23). This fits well with Thoreau, who also defined health in this individually relative way, and whose work 'offers a particularly useful examination of the assumptions that underwrite our current concept of health' (Branch and Peirce, 1996: 130).

We have seen how Thoreau diverges from the tradition of health as the 'silence of the organs' towards a more environmentally-focused approach. He defines health as a 'sound' relation to nature, but declares that it is impossible to draw the line between health and disease (because they are inter-related phenomena), thus favouring a prudential view of healthcare. Indeed, Thoreau's valuation of health, like his idea of nature, 'was richly informed by ecological, aesthetic, ethical, and spiritual concerns' (Branch and Peirce, 1996: 131), but his concept of health was not utopian, otherworldly or naive. Thoreau provides some instructive examples of new ways of imagining the natural world without disavowing or dismissing the insights of science. Indeed, Thoreau's writings on health provide some particular evidence to support such a claim.

Thoreau sees health and disease as part of nature, and therefore something inherently significant. They are 'essential facts of life' (1971: 90) but not objective facts, because observation, 'to be interesting[,] i.e. to be significant[,] must be *subjective*' (2002: 98). These facts are not value free. According to

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the philosopher Rick Furtak (2008), Thoreau does not distinguish between facts and values. In his writings, the latter are not introduced from without, from the top down; rather, they emerge from within the various self-maintaining processes of organic life. Values are not separated from facts, nor do they exist in an independent realm outside of nature.

We have seen that Thoreau's general use of the word 'value' is different from the contemporary one, in which we often indulge in 'value talk' by saying that these are 'our values', that there is a 'conflict of values', that this or that value is 'in danger'. This fact might seem like a trivial point about language use, but there is more to it. For when we talk of values as independent entities, it is easy to be essentialist, and think of them as Platonic ideas. As John Dupré puts it, 'the existence of such real essences would imply that there is some unique, privileged scheme of classification, which assigns everything to a class defined by common possession of the appropriate essence' (1993: 60). If health *is* a value then it seems as if it was always the same kind of thing, as if we already knew what it really is. But if we begin by saying that health (or different conceptions of health, since there are many diverse ones) *has* value, it easily follows that it will have different value to different people. This does not mean that human health concepts are relativistic or arbitrary, but rather that knowledge about them is personal and value-laden. As another philosopher who has written on Thoreau puts it,

'knowledge is inexorably valued; it is both useless and irrelevant divorced from the reality of the personal domain. This does not mean that knowledge is necessarily subjective, contingent, or arbitrary. These personalized elements certainly may be at play and compromise the pursuit of more objective or neutral assessments. We can hardly deny their role. But the challenge is to comprehend how such factors affect decision making and to recognize their influence and legitimate claims. To clearly understand the complex interplay of facts and values is the beginning of creating knowledge that acknowledges the complexity of choices and the agents who make them. [...] [H]ow we understand this relationship actually reflects a deeper concern about medicine's ethics.' (Tauber, 2005: 42–43)

Furthermore, when talking about values in the entitative sense, questions of hierarchy arise. If health is a value and so is economy, as the issue is often presented in environmental debates, sometimes it seems impossible to realise one without neglecting the other; the discussion revolves around which value will take priority, which one is the *real* value that one should maximise. But if we believe that health has a value and that so has economy,

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these values may fluctuate without one necessarily having to take precedence over the another. In this way, we would not construe problematic cases as a 'conflict of values', but rather as a complex evaluation of different processes over time.

Thoreau favours the relational sense over the entitative one; and by doing so he does not commit oneself to any given hierarchy of values. To speak of values in the relational sense does not presuppose a fixed axiological and ontological order, and arguments can get started without a prior agreement as to what values are at stake. Keeping in mind that 'the universe is wider than our views of it', as he wrote in *Walden* (1971: 320), it is as if Thoreau suspected that any given axiological hierarchy can always be disrupted by a promiscuous reality. In this light, health becomes something volatile and radically open to interpretation, something 'we have to stand on tiptoe to read and devote our most alert and wakeful hours to', as Thoreau put it (1971: 104).

## 6. CONCLUSION

Thoreau's writings on the value of health provide a non-essentialist account of human phenomena such as health and disease. In order to arrive at this hypothesis, I have echoed certain developments in contemporary philosophy of science to argue that Thoreau excludes a simple criterion of demarcation between health and non-health, but offers instead the 'consolations of pluralism' (Dupré, 1993: 242). Of course, Thoreau's work does contain a certain degree of unresolved tension between different conceptions of health, illustrating both his philosophical evolution and the variations in his relationship with science. But I have tried to show that Thoreau's view of health, complex as it is, is compatible with the basic consensus in the (quite convoluted) contemporary debate on the definition of health, which in general sees it as a personal ability to realise some basic vital goals, and therefore as value-laden. Both his description of health as 'the happiest of all mediums', and the prudential means he recommends for achieving it, are consistent with a modern, scientific ethos. He is as much a naturalist and a stoic as a romantic idealist. However, the value of health according to Thoreau – or rather his way of valuing it – clashes with contemporary medical science when this is mainly understood as a technological business in the war against disease. Again and again, Thoreau suggests that we have to stop valuing health in that way, because it cannot simply be isolated and put on the market for human consumption. His emphasis on the influence of

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the environment on human health is perhaps at odds with many of our current practices, but this fact only makes his position a radical, not a utopian one. In any case, Thoreau still has plenty to offer today's environmental philosophers and bioethicists.

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