Volume 24, Number 1 Spring, 2009



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SDAHPERD Aims:

- (a) To provide leadership essential to the continued development and improvement of sound and effective programs in the professionally related fields
- (b) To assist in research and experimentation and to disseminate information secured through these projects
- (c) To work cooperatively with other associations at the state, district, and national levels for the improvement of the profession
- (d) To advance the standards and quality of teaching in South Dakota in health, physical education, recreation and dance
- (e) To promote a healthy lifestyle among the citizens of South Dakota

Journal Goals:

- To provide structure and encouragement for collaboration among South Dakota practitioners
- To encourage practitioners to collaborate in systematic inquiry which addresses significant South Dakota problems
- To express the joy, fun, and satisfaction which can be realized by South Dakota practitioners
- To express the significance of our professions to South Dakota
- To help practitioners deal effectively with their complex professional lives
- To provide a "Sounding Board" for peer review and comment on practitioner's stated viewpoints
- To provide practitioners with current information on what is going on in the profession
- To keep practitioners informed of current legislative initiatives and actions that will impact on the professions
- To identify, discuss, and analyze current issues and trends of importance to practitioners in their respective professions

Letters to the Editor:

Editorial correspondence and comments are welcome. The Journal reserves the right to publish, in whole or part, all letters received. All letters received will be considered the property of SDAHPERD. Please address editorial correspondence to the Editor.

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Latest Survey Shows No Change in State's Percentage



PIERRE, S.D. – One-third of South Dakota students were overweight or obese in the state's latest school height and weight survey. The 2007-2008 survey found 16.8% of school age kids were overweight and 16.3% were obese. The percentages are essentially unchanged from the 2006-2007 school year.

"The good news is the number of obese kids did not increase from our last survey – the bad news is that it didn't decrease either. We're still too far from our Health 2010 objective of no more than 15% of students being obese," said Kristin Biskeborn (BIS'-kah-born), State Nutritionist for the Department of Health. "The goal is to help kids lead healthy lives and reduce their risk of heart disease, diabetes, liver disorders and other complications of excess weight."

The annual South Dakota School Height Weight Report is a joint effort of the Departments of Health and Education to track child overweight obesity. Since 1999, schools have submitted student height and weight data for the survey. Overweight is defined as between the 85th and 95th percentiles body mass index when compared to kids of the same age and gender; obese is above the 95th percentile.

A total of 249 schools participated in the 2007-2008 survey, accounting for 27 percent of students in the state. To help schools collect and submit accurate height and weight data, the department has provided 590 scales or measuring boards to schools over the last six years using federal grant funds.

Participating schools receive reports of their own data to use in improving nutrition and physical activity in their settings, for example, providing exercise equipment for students and offering healthy foods for snack time and parties.

Biskborn said there are six science-based strategies shown to prevent obesity and other chronic diseases:

- Increase physical activity,
- Decrease television viewing
- Increase fruit and vegetable intake,
- Decrease sweetened beverage intake,
- Decrease portion sizes, and
- Increase breastfeeding.

The full report is available on the web at http://doh.sd.gov/SchoolWeight. Improving the health of South Dakota children and adolescents by reducing overweight and obesity is one goal of the department's Health 2010 Initiative.



What's new on the SDAHPERD Website?

- The latest info on the FIT Kids Act can be found on the "News"
- Want some video lesson plans instead of the same old paper and pencil variety? Check out 'PE Universe' on the 'Resources' page.
- The latest info on the President's Challenge School Recognition Programs is also on the 'Resources' link under Physical Education

Check us out at sdahperd.sdstate.org

President Obama Supports PE

RESTON, VA: Florida AHPERD Executive Director Karen Dowd recently emailed me and told me she was listening to President Obama speak at a town hall meeting in Los Angeles and she thought she heard him say that "we need physical education in our schools." Well - Karen is right!

Here is the blurb: "So the only way that we can initiate true health care reform is if we control costs. And one of the most important ways for us to control costs is to deal with the issue of prevention. Which means making sure that we have proper nutrition programs in our schools; making sure that we've got effective physical education programs for our children. (Applause)"

For the full article, see: http://
http://
latimesblogs.latimes.com/
washington/2009/03/obama-text-la.html

Paula Kun, Mgr, Public Relations, NASPE

GOPHER Donates PE Equipment

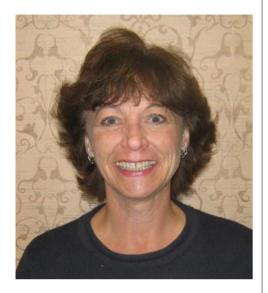
Tea Area Intermediate PE teacher Rob Ingalls is pictured with fourth graders Logan Hoon, Amanda Olson, Mallory Besta and Justin Newbold at the Intermediate School. Ingalls was awarded \$1000 worth of PE equipment from Gopher Sporting Company at the SDAHPERD conference held November 5th-7th in Pierre.



(Photo Submitted Becky Miller)

Join Us in Rapid City and

Be An Action Hero!!



Greetings from South Dakota! My name is Sheri Keck and I am SDAHPERD's President. I chose the theme "Be An Action Hero" because I believe Physical Educators are the schools' Action Heroes. An Action Hero is a person of strong moral character who has a willingness to serve others without expectation of reward. Action heroes (superheroes) are ordinary people who have developed their natural abilities to excel in life. They are people who have turned their greatest abilities into super powers. "Action Heroes" believe in the youth of our community and wish to serve and support this valuable resource. Action Hero simply means discovering our true gifts and using them to lead incredible lives. In the process, we bring ourselves tremendous fulfillment and joy through what we do - Teach!



President-Elect Notes

This snowy spring season finds us in the midst of MANY exciting projects in the health, physical education, recreation and dance realm.

At Spearfish Middle School in these final two months of school we have or have planned an outing to the bowling alley, a couple of quality days on the cross country skis and snow shoes, a 50s sock hop, a "Stop and Think" presentation from our community crisis pregnancy center, a NASP archery tournament, some sunny days on the tennis courts, a kindergarten PE day, a fishing derby with outdoor cooking, an introduction to track and field, and spring fitness tests. All that mixed in with the interscholastic track and field season (with all its postponements and interruptions) and organizing a 5K run/walk for the community in support of "Lach's Legacy" (the SD Foundation for support. education and research surrounding Sudden Infant Death Syndrome).

Once the whirlwind of excitement dies down at the end of the school year, I am looking forward to the Leadership Development Conference in Washington DC and the Central District Leadership



Summit in Nebraska. I have heard awesome stories about the wonderful learning experiences and am looking forward to making new connections and solidifying the connections I already have with all of the knowledgeable and fun-loving people in our profession.

I am excited to get the ball rolling as SDAHPERD's president-elect and hopefully carry that ball into a "winning season" as your president in 2010.

LeAnn Vette

Greetings from the Past President



Happy Spring! Hopefully this message finds all of you with warmer weather and sunny days. The school year is quickly coming to a close and it will be time to enjoy summer vacation. I had the opportunity to attend Central District in Rochester, Minnesota this spring. It was nice to see some friendly faces from the surrounding states. The sessions were wonderful, but I really enjoyed hearing Jean Blaydes Madigan talk about action based learning. I purchased her book "Thinking on Your Feet" and plan to share the information with the staff at my elementary school. She has some great activities that can be used in the classroom. The activities would be great for rainy or below zero days that keep the kids in from recess or a great way to get the kids moving while they learn. For more information check out: www.actionbasedlearning.com. **Kelly Knutson**



As the Executive Director, I spend a few minutes every month reviewing the membership database and sending reminders to those whose membership in SDAHPERD is about to expire. On occasion, I see a name of someone I have known for many years who, for some reason, is no longer a member. As someone who has always valued being a part of OUR association, I wonder why someone would let their membership lapse.

While I have no data to support what I'm about to say, I have a gut feeling that I'm right. I believe that many members do not renew their membership because they no longer see 'what's in it for them.'

Now before you get upset with me and stop reading this article, let me explain where I'm going with this.

I believe that a very real reason for spending your hard-earned money to join a professional association, is to 'get' as many suggestions as possible on how to become a better teacher, coach, leader. As a young teacher, we constantly seek new ideas, innovative lesson plans, a different approach to dealing with discipline or finding a way to motivate a student who just doesn't seem to value what goes on in our classes. These are logical expectations—we always hope to 'get' more.

However, as we mature as professionals, we need to reflect on the role we play. At some point I would suggest that our perspective needs to change from our need for 'getting' to one of 'giving.'

You don't have to pass some arbitrary number (age, years of teaching, wins versus losses, etc.) to make the transition. All you need to do is to take a few minutes to take a quick inventory of your strengths. We all have talents that we can share, something we can 'give.'

At the risk of being accused of plagiarizing Michael Jackson, let me start with 'the man in the mirror.'

I have never been recognized as a teacher of the year, I've never coached a state championship team, and I don't consider myself to be a very dynamic public speaker. I do, however, have some skills and experiences that others might find beneficial. Putting this text into a journal article (and adding the work of others in a publication to share with our members) might be one; being willing to represent my peers as an officer in a professional association might be another; or sharing lessons learned through years of trial and error (a kind way to say I've made lots of mistakes) might be another.

So ... I'm happy to do my part. I like working behind the scenes. I'm happy to edit the Journal, to assist Patty in maintaining the website, or to do what I can to support both the officers and the members of SDAHPERD.

And I would suggest that you, too, can 'give' any of a number of valuable contributions to your profession, your peers, and YOUR association.

When you see something that seems to help you become more effective in your job, send it to me and I'll put it in the Journal, circulate it through the list serve, add it to the webpage, or find some other way to help others share your success.

Other things to consider:

 Spending a little time to write up one of your favorite PE activities for the Journal

- Share a website, lesson plan, classroom activity or other resource
- Nominate someone for an office in SDAHPERD
- Nominate someone for an award in SDAHPERD
- Conduct a Jump Rope For Heart or Hoops For Heart event in your school
- Send in a proposal to present at the SDAHPERD state convention in Rapid City in November
- Share ideas for maintaining the PE and Health requirements in your school
- Share funding ideas (grants, projects, special events)
- Be a mentor to a young professional
- Recommend an exhibitor for the convention or an advertiser for the Journal
- Be a champion for our profession!
- Count your blessings—and remember to 'give!'

Gale Wiedow Executive Director, SDAHPERD





SDAHPERD Leaders Recognized

Rhonda Kemmis (above left) and Jessie Daw (above center) were recognized at the annual convention of the Central District Association of the American Alliance for Health, Physical Education, Recreation and Dance held March 12-14 in Rochester Minnesota. Rhonda was recognized as the Central District K-12 Health Education Teacher of the Year. Jessie received the Central District Honor Award. Their citations read as follows:

"Every time I stop by her room I see something inspirational, motivational, emotional and always relevant to the life of a teenager. Rhonda is creative and always on the search for new ways to reach her students. Her students are always actively engaged in their learning." One of her students wrote that Mrs. Kemmis' direction has contributed to "my love for living a healthy lifestyle and to advocate to others the importance of taking a strong look into their health and decision making." She further states that "Mrs. Kemmis extends her love for teaching and her enthusiasm toward her students' extracurricular involvement by showing up at their sporting events, plays, dances and musical programs. Mrs. Kemmis always puts her students first."

Rhonda is a Health Education Teacher at Roosevelt High School in Sioux Falls, South Dakota. She facilitates the learning of her students and expects all of her students to be equally accountable for the learning that takes place in her classes. She draws students toward her as they discuss youth problems, goal setting and pertinent issues. Rhonda has a genuine concern and caring for young people throughout the world. Traveling to the remote bush of Cameroon, Africa was a life changing experience for her as she learned more about the

HIV/AIDS crisis. Rhonda and her students have raised thousands of dollars to help send African children to school, and her presentation "Heart of Africa" continues to educate people about this health issue.

Rhonda leads curriculum development projects within the Sioux Falls School District as department head and director of curriculum re-writing committees. She is a consultant and trainer for the South Dakota Department of Education, developing teacher trainings in the area of Health Education Standards and Assessments. Rhonda is a State Representative Team member to the national Health Education Assessment Project (HEAP), becoming the first teacher in the United States to use the HEAP's Webbased Assessment System. She is a member of her state and national AAHPERD organizations, presenting extensively both locally and nationally. Giving back to her community as a fundraiser and by volunteering for a variety of organizations is a passion she holds close to her heart.

Jessie Daw has served South Dakota for a number of years with passion and great knowledge. She built relationships with others across the nation in her position as Executive Director of SDAHPERD. Jessie contributed much to the state association, working on many projects with helped strength the organization. She was a leader with fire and humor.

Jessie is an Associate Professor and tennis coach at Northern State University, SD. She has given professional presentations and publications for state AAHPERD, Central District and National conventions. Jessie was a member of the development team for the South Dakota Model School Wellness Policy, was on the Healthy South Dakota Planning Committee and represented SDAHPERD on the South Dakota American Heart Association state advocacy committee.

Jessie has been a member of AAHPERD for 8 years. She served SDAHPERD as the Executive Director, was the editor of the SDAHPERD Journal and convention manager. She was VP-elect for Sport and PE in SDAHPERD and Chair-elect for Sport and PE for Central District. Jessie has also received the Kathleen Kinderfather Award and the SDAHPERD Honor Award.

2010 Central District Convention

The 2010 Central District convention will be held February 2–4 at the Fargo Holiday Inn, Fargo North Dakota.





Many Voices ... One Mission



Sally Scherrer Receives NASPE "Joy of Effort" Award



RESTON, VA – Hill City resident Sally J. Scherrer, executive director of the Central District Association of the American Alliance for Health, Physical Education, Recreation and Dance, was honored on Friday, April 3 in Tampa, Florida, at the annual convention of the American Alliance for Health, Physical Education, Recreation and Dance (AAHPERD), with the Joy of Effort Award by the National Association for Sport and Physical Education (NASPE).

The award was presented at NASPE's Hall of Fame Banquet where the National Physical Education Teachers of the Year for Elementary, Middle School and High School, the National Physical Education Administrator of the Year as well as the Athletic Director of the Year Award were announced. Softball Olympic gold medalist Dot Richardson, M.D. was inducted into the NASPE Hall of Fame.

According to NASPE President Fran Cleland of West Chester University of Pennsylvania, "This award is given in recognition of those individuals who, by performance and style, have personified the concept that the effort made to enrich the goals and objectives of physical education and sport is a labor of love, inspired by commitment and dedication."

A leader in the health, physical education, recreation and dance profession, Scherrer also served as the executive director of the South Dakota and Colorado State AHPERDS and president of the SDAHPERD and Central District AAHPERD, and helped those organizations work toward greater viability. On behalf of AAHPERD, she has served on numerous committees, including chair of the prestigious AAHPERD Award Committee and vice-chair of the Society of Association Management. In the 1980's Scherrer had one of the first Jump Rope for Heart Teams in South Dakota. Through her dedication, hard work and commitment the worthy cause took off in the state.

"No matter the task, the environment, the timeline or the collection of people, Sally Scherrer's participation ensures thoroughness, stretches the bounds of creativity, considers nothing is impossible and ignites commitment in others," said AAHPERD Past President Karen Dowd, Ed.D. "She is the embodiment of effortless joy!"

Her professional affiliations include the National Association for Sport and Physical Education (NASPE)/American Alliance for Health, Physical Education, Recreation and Dance (AAHPERD), the Central District American Alliance for Health Physical Education, Recreation and Dance (CDAAHPERD), and the South Dakota Association for Health Physical Education, Recreation and Dance (SDAHPERD), where she has served in numerous leadership positions. In 2007, Scherrer received the AAHPERD Honor Award for her contributions to the profession.

Scherrer received her Bachelors of Arts in Health and Physical Education from Ohio Northern University and her Masters of Education from South Dakota State University.

NASPE

The preeminent national authority on physical education and a recognized leader in sport and physical activity, the National Association for Sport and Physical Education (NASPE) is a non-profit professional membership association that sets the standard for practice in physical education and sport. NASPE's 16,000 members include: K-12 physical education teachers, coaches, athletic directors, athletic trainers, sport management professionals, researchers, and college/university faculty who prepare physical activity professionals. NASPE seeks to enhance knowledge, improve professional practice, and increase support for high-quality physical education, sport and physical activity programs through research, development of standards, and dissemination of information. It is the largest of the five national associations that make up the American Alliance for Health, Physical Education, Recreation & Dance (AAHPERD). For more information, visit

www.naspeinfo.org.



53rd Year of the Presidential Fitness Challenge

Become a State Demonstration Center!

Greetings from Dakota State University, Department of Exercise Science. My name is Andrew Shim and I am the new state coordinator for the Presidential Fitness Challenge for South Dakota. I am actively seeking Physical Education Teachers who support and institute the Presidential Fitness Test and provide additional educational materials for students to support a healthy and active lifestyle within their curriculum.

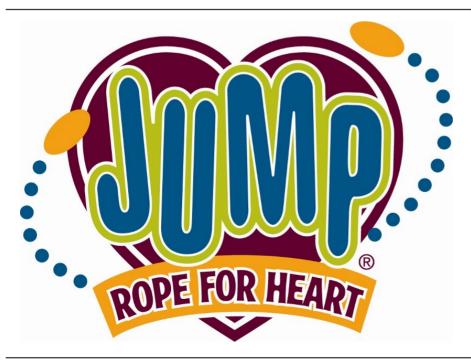
As a State Demonstration Center, you would be given a State Demonstration Flag to be flown with the 'Stars and Stripes' and the State of South Dakota Flag. Also, you would receive a certificate signed by President Barack Obama and several members of the President's Fitness Council, recognizing your program as a State Demonstration Center for the State of South Dakota. This prestigious award allows you to be recognized as a

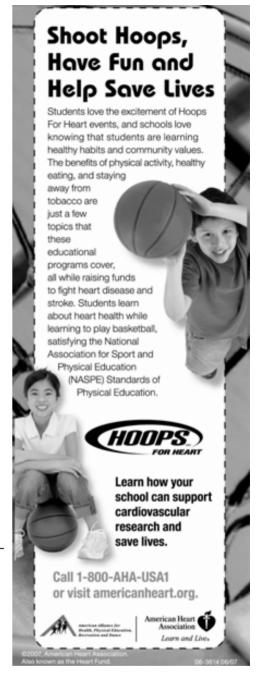
'role model' for other school programs to emulate. Your school would be listed on the government website, along with other states who have earned this status.

If you need any further information or want to discuss if your program is eligible for this recognition, please contact me using the information provided below or go to the following link: http://www.presidentschallenge.org/educators/school_recognition.aspx

Dakota State University College of Education 820 N. Washington Avenue Madison, SD 57042 605-256-5659 andrew.shim@dsu.edu











Eggs-ercise Hunt

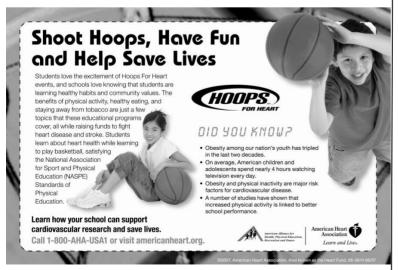
This is an activity that I do for grades k-5 for Easter. Depending on how many students I have, I hide their team color under cones throughout the playing area. Each team sends a runner to find an egg of their color and then they do the corresponding exercise together. Continue until all eggs are found.

Number	Exercise – each team member must do:
1	15 Jumping Jacks
2	10 sit-ups
3	10 push-ups
4	2 laps
5	bear crawl to 1/2 court crabwalk back
6	5 coffee grinders
7	15 mountain climbers
8	Skip 1 lap
9	20 jump ropes

When you complete all of them sit and stretch. I modify it any way that I need to.

My students really enjoy this activity!

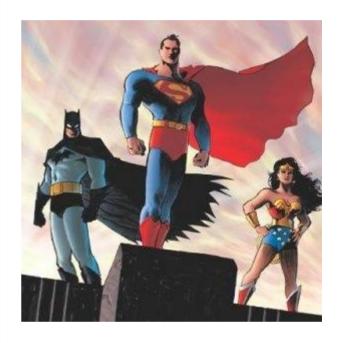
Dave Mudder Garretson School



Join us in Rapid City November 4-6, 2009 for the

2009 SDAHPERD Convention!

Be A Super Hero!



Where: Rushmore Plaza Holiday Inn

Keynote Speaker: Terry Eckmann, Ph.D.
Associate Professor of Physical Education/Corporate Fitness, Department of Teacher Education/Corporate Fitness Minot State University

Pre-Conference sessions on use of the HECAT (Health Education Curriculum Analysis Tool) and on Archery.

Join us a for a variety of informative presentations, an exhibit area with the latest in equipment and supplies, and an opportunity to see old friends and meet new ones! Topics received to date include geocaching, tennis, golf; grant writing, western dance, triathlon, brain research, homemade games, yoga, kayaking, water aerobics, JRFH, technology in PE and more!!

Watch the SDAHPERD web site (sdahperd.sdstate.org) and the fall issue of the SDAHPERD Journal for more details!!

Treating Obesity in 12 to 18 Year Olds

by Barbara J. Moore, PhD

Reprinted with permission from Shape Up America! [www.shapeup.org]



The medical journal, *Pediatrics*, published a series of articles¹⁻⁴ on the assessment, ¹ treatment² and prevention³ of childhood obesity. Treatment of younger children, was covered in the October and November 2008 issues of this newsletter and in detail in the treatment report published in *Pediatrics*. ² This article is the last in our series on pediatric obesity treatment and briefly summarizes the recommended treatment of 12 to 18 year olds — a broad age range that covers a period of rapid social and emotional development and increasing autonomy.

The treatment approach for 12-year-olds, who eat most meals at home and are more strongly influenced by parents and family, will be very different than for older teens, who eat many meals outside the home and make fundamental lifestyle

decisions for themselves. For example, in older teens, assessing readiness to change is important. Overweight teens who are ready for weight loss may choose ineffective over-the-counter drugs, purging or other dangerous self-help strategies to address a weight problem. To keep teens safe, parents and health care providers should be aware of the various steps in the treatment process recommended for this age group.

Step 1: The first step in the treatment process for 12 to 18 year olds is assessment based on precisely measured height and weight and calculation of body mass index (BMI). Some teens who have a normal BMI or who are underweight have a distorted self-image and perceive themselves as overweight. Using objective criteria to discuss what constitutes a healthy

weight may be a valuable tool in reshaping a teen's impaired self-image.

Step 2: Determine the gender- and age-specific BMI percentile and mark it on the teen's personal BMI growth chart. Compare the current BMI percentile to that from previous years to see if a trend is emerging. Although you can expect some variation from year to year, growth should track, or follow a certain percentile, reasonably well over time.

Step 3: Use the BMI percentile to determine the teen's current weight category and to choose the appropriate treatment path for that category as shown in the table below. An explanation of the treatment strategies for the different weight categories follows this table.

BMI Percentile	Category	Treatment Strategy		
< 5th Percentile	II Inderweight	Professional monitoring (especially important if there is a downward trend, which may signal an eating disorder or other medical problem)		
5th to 84th Percentile	INormal weight	Prevention and at least yearly assessment of BMI percentile, noting trends either upward or downward		
85th to 94th Percentile	Overweight	revention Plus; advance to Structured Weight Management after 3-6 months if BMI perentile increasing, medically warranted and/or if parental obesity present. Goal is to maintin weight with growth of teen until BMI is < 85th percentile, or slow weight gain to chieve a downward trend in BMI percentile		
Percentile Obese		Prevention Plus; advance to Structured Weight Management after 3-6 months if BMI percentile increasing, medically warranted and/or if parental obesity present. Goal is to <i>lose weight</i> until BMI is < 85th percentile (See note)		
> 99th Percentile Obese		Prevention Plus; advance to Structured Weight Management after 3-6 months if no improvement, then advance to Comprehensive Multidisciplinary Intervention after 3-6 months if medically warranted and/or if parental obesity present. Goal is to <i>lose weight</i> (See note). Advancement to Tertiary Care Interventions may be warranted if comorbidity is present		

Note: The expert committee treatment report² states that for obese teens, the rate of weight loss should not exceed 2 pounds per week. If weight loss exceeds this rate, the health care provider should evaluate further for causes of excessive weight loss.

Underweight: Teens who are underweight should be evaluated by a qualified health care professional. Although it can be expected that some very thin teens

are perfectly normal, to be on the safe side, professional evaluation of teens at the 5th percentile or below is needed to rule out the possibility of eating disorders, distorted self image or some other medical or developmental problems that should be addressed. *(continued)*

Treating Obesity in 12 to 18 Year Olds (continued)

Normal weight: As for all children, the growth pattern of normal weight teens should be monitored by assessing them yearly and plotting BMI percentile on the teen's BMI growth chart. Although you can expect BMI percentile to vary from year to year, annual updating of the teen's growth charts permits detection of an unusually large change that may signal unhealthy weight gain (or loss). Prevention: Strategies to prevent unhealthy/excessive weight gain in normal weight teens are discussed in detail in the prevention report.3 They include playing and being physically active for 60 minutes or more per day; limiting TV and other sedentary recreation to no more than 2 hours per day; removing TV from the bedroom; eating 5 or more servings of fruits and vegetables per day plus other healthful foods (whole grains, lean meats, eggs, fish, poultry and low fat or fat free dairy) needed for growth; limiting or eliminating soda, pop or other sugar-sweetened beverages and fruit drinks; limiting eating out; starting each day with a healthy breakfast; enjoying regular family meals and activities that involve the whole family.

Overweight (85th-94th percentile): More frequent professional monitoring of weight status and lifestyle (every 3-6 months) of overweight teens is needed, particularly if medical issues or parental obesity are present; this is referred to as Prevention Plus. To the basic Prevention strategies described above, Structured Weight Management (SWM) may be added that targets the entire family rather than the teen. Thus, family readiness to change must be assessed, and for older teens who are more autonomous, individual readiness must be determined. If ready, SWM involves structured daily meals and snacks that emphasize healthful foods that are low in calories yet high in nutritional quality; limiting meals taken outside the home, including fast food. Further reductions in daily TV and other sedentary recreation to no more than 1

hour per day may be needed. It is helpful to keep a diary of daily physical activity and all foods and beverages with amounts consumed at home and when eating out. Food diaries should be monitored by a qualified health care professional, usually a registered dietitian (RD), but sometimes a physician or nurse practitioner with appropriate training. The emphasis is on healthy lifestyle change for the entire family. (Note: A teen who steadily tracks in the overweight range, i.e., no upward trend in BMI percentile, and has no medical or family risks is likely to be at low risk for excess fat. This teen can remain on the regular prevention strategy that applies to normal weight teens)

Obese (95th - 99th percentile): The treatment progression for obese teens is similar to that for overweight teens described above, but monthly follow up with assessments is recommended. If progress is not made after 3-6 months, conduct family (and teen) assessment of readiness to change (see details in prevention report³) and move to SWM if family is ready. Greater support, increased structure of daily routine for both healthy eating and exercise, and greater oversight of eating and activity to insure compliance is recommended. Reinforcement for the achievement of behavioral goals is suggested. Lack of improvement may warrant advancement to Comprehensive Multidisciplinary Intervention, which is briefly explained below.

Obese > 99th percentile: For these teens, in addition to the above treatment strategies, a Comprehensive Multidisciplinary Intervention (CMI) strategy may be warranted. The CMI team might include a specially trained psychologist, exercise specialist, nurse practitioner and/or dietitian in addition to a physician. CMI is marked by increased intensity of behavioral change strategies, frequency of visits (initially weekly for a minimum of 8-12 weeks, and then tapering off to at least monthly) for professional monitoring that includes assessment, counseling and guidance, and service delivery by appropriately trained specialists. The five components of

CMI are: 1) parental involvement; 2) assessment of family and teen lifestyle and BMI (or body fat) status; 3) behavioral change plan that includes goal setting and training in anticipating challenges and problem solving; 4) parent/caregiver training; 5) specific diet and activity interventions that result in negative energy balance (i.e., calories expended exceed calories consumed) while safeguarding nutritional quality and avoiding a rate of weight loss that exceeds 2 pounds per week.

High risk *Tertiary Care Intervention (TCI)* may be warranted for an obese teen who is afflicted with obesity comorbidities (e.g., type 2 diabetes) provided the teen fully understands the possible risks of treatment and possesses the maturity to responsibly engage in both the treatment process and necessary follow-up. *TCI* may involve meal replacements, very-low-energy diets, medications or even bariatric surgery, which carries significant risk even under an experienced doctor's supervision. The treatment report² provides more details.

The scientific evidence on the recommended components of treatment of teens is of variable quality. The staged approach to treatment is a responsible one that is based on the best evidence currently available. As the evidence strengthens with more research, refining these guidelines by subdividing teens into at least two groups, based on age or level of maturity, may eventually become possible. In conclusion, health care professionals who treat overweight and obese children of any age are reminded to:²

- 1. Encourage healthy behaviors in their patients and their families
- Employ motivational techniques for patients and their families ready for lifestyle change
- 3. Establish office systems that support monitoring and ongoing care
- 4. Implement a staged approach to interventions as described above
- 5. Tailor the intervention to the individual child and family



Treating Obesity in 12 to 18 Year Olds (references)

Barbara J. Moore, PhD, is President and CEO of Shape Up America!

¹ Krebs NF, Himes JH, Jacobson D, Nicklas TA, Guilday P, Styne D. Assessment of child and adolescent overweight and obesity. *Pediatrics*. 2007; 120:S193-S228. Available at: http://www.pediatrics.org/cgi/content/full/120/Supplement 4/S193

² Spear BA, Barlow SE, Ervin C, et al. Recommendations for treatment of child and adolescent overweight and obesity. *Pediatrics*. 2007;120:S254-S288. Available at: http://www.pediatrics.org/cgi/content/full/120/Supplement 4/S254

³ Davis MM, Gance-Cleveland B, Hassink S, Johnson R, Paradis G, Resnicow K. Recommendations for prevention of childhood obesity. *Pediatrics*. 2007; 120:S229-S253. Available at: http://www.pediatrics.org/cgi/content/full/120/Supplement 4/S229

⁴ Barlow SE and the Expert Committee. Expert committee recommendations regarding the prevention, assessment, and treatment of child and adolescent overweight and obesity: Summary report. *Pediatrics*. 2007;120:S164-S192. Available at: http://www.pediatrics.org/cgi/content/full/120/Supplement_4/S164

Eat well, move more, be well.

Beth Graham, MPH, CHES, National Network Manager
Alliance for a Healthier Generation

A partnership between the American Heart Association and the William J. Clinton Foundation

830B Howard Avenue • Myrtle Beach, SC • 29577 • 843.213.1135

I hope this note finds you well and enjoying the springtime in SD! I so enjoyed my visit to present at the SDAHPERD convention last fall. For a southern coast-er, the blizzard was a real treat.

I want to share with you some exciting news here at the Alliance as we have launched our Healthy Schools Program's Network — which may be a helpful resource to schools and the school communities SDAHPERD members are working with.

The Network was created to allow any individual (parents, teachers, school administrators, community members, etc.) the opportunity to join the Healthy Schools Program and gain immediate access to the wealth of resources, toolkits and materials to help our schools become healthier places to learn, work and play. Of course, schools are still encouraged to enroll in the Program and progress through the Healthy Schools Builder to achieve sustainable change and receive recognition for their efforts nothing has changed in that regard. The Network merely takes away the individual's responsibility of committing his or her school to the Program in order to access information and resources. (The Network also allows numerous individuals concerned about the same school to access and interact with the Healthy Schools Program.) Network membership thus empowers all individuals to engage in the Healthy Schools Program and to advocate for healthier schools in their communities.

To empower all in your school communities, I ask you to share (feel free to copy and paste) the following information and/or the flyers on page 20 with colleagues/SDAHPERD members, school

administrators, teachers, parents and friends!

Do you want to help a school become a healthier place for students to learn and for staff to work, but you don't know where to begin? Do you recognize the positive benefits of healthy eating and physical activity for students, but you don't know how to incorporate these lessons into your work? Are you convinced that you cannot get any assistance in creating a healthier school environment without paying for this kind of support? For the help and tools you need, join the Healthy Schools Program's Network for free!

The Alliance for a Healthier Generation — a joint partnership between the American Heart Association and the William J. Clinton Foundation working to combat childhood obesity across the U.S. — knows schools are powerful places to not only teach children the academic skills they need to succeed, but also healthy habits for life. The Alliance Healthy Schools Program provides free, comprehensive support and recognition to develop healthier school environments.

Anyone interested in making schools healthier places for students to learn and staff to work can join the Healthy Schools Program's Network at HealthierGeneration.org/schools and receive access to a wealth of resources at no cost. Sign-up is quick and easy, so join today for immediate access to tools and support for a healthier school.

If you have questions or would like more information on the Healthy Schools Program's Network, please do not hesitate to call!



Got Milk?

A visit to the exhibit hall and the American Dairy Council display during the AAHPERD convention in Tampa provided an opportunity for a little fun. DSU students Lisa Chase, Sara Olson and Kate Gylfe, along with professor Andrew Shim, display their 'milk mustaches.'

HEBGHEY'S TRACK & FIELD CAME



Carl Lewis poses with Amy Pheneger of DSU. Carl is a spokesperson for the Hershey Track & Field Program and is one of only two Olympic athletes to win nine gold medals and one of only two to win the same individual event four times.



Networking Starts Early!

Meeting people, making friends, broadening your perspectives—that's a part of being a professional and making a commitment to being a lifelong learner. The AAHPERD convention exhibit hall is the 'gathering place' where Kyle Walsh (Indiana State University), Amy Pheneger (Dakota State), Brooke Lindert (University of Arizona) and Josua Acuna (University of Arizona) posed for this photo. Kyle and Brooke were selected as 'Majors of the Year' for their respective states.









Sen. Harkin, Reps. Kind, Wamp, Inslee Reintroduce FIT Kids Act, Calling for More P.E. in Schools

Members Join with NFL Players, American Heart Association, NASPE to Highlight Importance of Including P.E. in Education Reform Efforts

WASHINGTON. DC - With work on education reform expected this year, U.S. Senator Tom Harkin (D-IA), and U.S. Reps. Ron Kind (D-WI), Zach Wamp (R-TN), and Jay Inslee (D-WA) today reintroduced the Fitness Integrated with Teaching Kids Act (Fit Kids Act) which would combat childhood obesity by strengthening physical education programs throughout the country. They were joined at an event on Capitol Hill by NFL players from the Baltimore Ravens and Washington Redskins, Atlanta Falcons owner Arthur Blank, obesity expert Dr. Kenneth Cooper, Jamie Dukes of NFL Network and DC-area students.

The FIT Kids Act would engage parents and the public by requiring all schools, districts and states to report on students' physical activity, including the amount of time spent in required physical education in relation to the recommended national standard. The Act would further ensure appropriate professional development for health and physical education teachers. And it would fund research to examine the link between children's health and their academic achievement, and recommend effective ways to combat childhood obesity and improve healthy living and physical activity.

"Preventing disease today means healthier, more active and engaged kids tomorrow," said Senator Harkin (D-IA). "This legislation takes action to combat rising rates of childhood obesity and diabetes, a public health crisis that we cannot ignore. As every parent knows, engaging children in physical activity throughout the day improves fitness, burns off excess energy and boosts concentration in the classroom. I hope this bill will empower our schools and parents to help improve our kids' health."

"This bill gets to the simple truth: in order to develop healthy minds, you need healthy bodies," said U.S. Rep. Ron Kind (D-WI) who is a co-chair of the Congressional Fitness Caucus. "Providing increased physical education in public schools will give every child an opportunity – regardless of their background – to learn healthy habits and get moving. We will see the benefits in their math and reading test scores, get to the root of the obesity epidemic, and get kids on a healthy path early in life."

"The statistics on childhood obesity are staggering, and we need to get them going in the other direction," said **U.S. Rep. Zach Wamp (R-TN)**, founder and member of the Congressional Fitness Caucus. "Research shows that healthy children learn more effectively and achieve more academically. The FIT Kids Act would give physical education a strong emphasis to help bolster academic performance and provide students with the physical activ-

ity and education to lead healthy lifestyles."

"A University of Washington study showed that nearly a quarter of the Evergreen State's eighth-, 10th- and 12th-graders are overweight or obese," said U.S. Rep. Jay Inslee (D-WA). "And in the face of those statistics, it's shocking that Washington state has been ranked as having one of the *lowest* youth obesity rates nationwide. We can and must do better for our kids. As Congress works to reauthorize No Child Left Behind, we need to include provisions to ensure every child has a fair chance at health, just like the law now aims to give all children a fair chance at learning."

"With the alarming increase of childhood obesity in our nation, physical education needs to be a priority in all schools," said Robert DiBianco, M.D., cardiologist at **Washington Adventist Hospital and** American Heart Association spokesper**son.** "While the challenge we face in reversing this national health crisis is a shared responsibility, Congress has the power to take immediate action with the FIT Kids Act. We must increase quality physical education to reduce each child's risk for heart disease and stroke later in life and boost their potential for academic achievement and general well being. (continued on page 19)

Critical mass crisis: child obesity

Originally Published: March 26, 2009 Forwarded by the NASPE Broadcast Center

MARION, S.C. -- Like a lot of cities across America, this one is hurting. The unemployment rate has reached 12.5 percent -- that's right, every *eighth* person is jobless -- and more than a quarter of the folks here reside south of the poverty line.

And like many kids in many cities across America, the children of Marion are getting larger. And larger.

There's a childhood obesity crisis in the country, virtually any expert will tell you, and there is no shortage of reasons: increasingly sedentary lifestyles driven by video games, television and computers; a fast-food society in which soda machines and greasy cafeteria food are ubiquitous in kids' lives; and dwindling opportunities for exercise, particularly during the school day.

Put simply, at a time when every penny is being pinched by every school in every district in every county in every state, physical education is taking a beating. The experts and educators say there is no doubt that the erosion of P.E. has been a major contributor to the skyrocketing obesity rates.

And, of course, the more kids are unhealthy, the less they can exercise. This is their circle of life.

"The thing I notice is that the amount of time kids can sustain a moderate-to-vigorous physical activity is just monumentally lower," says Pete Ellis, who has taught P.E. for nine years, the past four at Easterling Primary in Marion, a school of 800 kindergarten, first- and second-graders. "Something as simple as running two laps around the track -- that can be brutal for kids. These younger kids, they do some running, some skipping, some galloping; and after a minute and a half, they're ready to pass out."

The childhood obesity statistics are numbing:

- 20 percent of U.S. children will be defined as obese next year, according to the Department of Health and Human Services. That's about four times what the rate was in the 1970s. Using the body mass index (BMI), which is a measure of one's weight in relation to height, obesity is defined as being at or above the 95th percentile based on standards established in the 1970s for kids who are the same age and sex.
- Between 1971 and 2006, the number of 6-to-11-year-olds considered overweight more than quadrupled -- from 4 percent to 17 percent, according to the Centers for Disease Control and Prevention.
- There's a 70-80 percent chance that an obese child will become an obese adult.
- \$14 billion is spent annually on child obesity-related health care costs, American Heart Association president Dr. Tim Gardner said during a recent press conference. Overall, annual obesity-related costs total \$117 billion.

Equally startling are the numbers reflecting the state of P.E. programs in public schools across the country:

 Only 3.8 percent of elementary schools, 7.9 percent of middle schools and 2.1 percent of high schools provide daily P.E., according to a CDC survey. A study published in the 2007 issue of Health Economics stated that daily P.E. for high school students declined from 41.6 percent in 1991 to 28.4 percent in 2003. (The survey did not have statistics for middle and elementary schools.)

- 22 percent of schools don't require kids to take any P.E.
- Nearly half -- 46 percent -- of high school students were not attending any P.E. classes when surveyed by the CDC.



Nicole Noren/ESPN

Pete Ellis, a P.E. teacher in South Carolina, sees too many kids who can't manage even moderate physical activity.

The messages that undermine physical exercise for students are everywhere. Many schools don't even have recess. Still others have P.E. for only one-third of the year. In most states, high school students are required to take no more than two years -- and often just one year -- of P.E.

In California, there's even a disincentive for high school students who might consider taking more than their required two years: The schools in the UC system -- UCLA, Cal, UC San Diego, etc. -- do not count high school P.E. grades or credits when considering applicants.

The issues are particularly amplified for minority children. Hispanic and African-American kids display the highest obesity rates; as well, the challenges to implement stronger P.E. programs in lower-income schools are heightened by larger class sizes, less funding and limited facilities. (continued on page 17)

To view this story online, go to:

http://sports.espn.go.com/espn/otl/news/story?id=4015831

Critical mass crisis: child obesity (continued from page 16)

The No Child Left Behind Act (NCLB) frequently is cited as one of the chief causes for the current strains on P.E. Introduced by President George W. Bush in 2001 and adopted by Congress in early 2002, the controversial law placed added emphasis on core subjects such as reading and math, linking federal funds to the results of standardized tests in those subjects.

Foundation, provides technical and educational support to more than 4,000 schools throughout the country, helping them create healthier environments to combat obesity. One of the Alliance's primary concerns is the state of P.E.

Amid the alarms being sounded over the child obesity crisis, some states and school districts have adopted mandates requiring additional time for P.E. For example, in South Carolina, Ellis has seen

cently completed an audit of 20 school districts, and all but one failed to meet minimum requirements for elementary school P.E. classes.

And in California, a January 2008 report by The California Endowment revealed that less than half of elementary students were receiving the mandated 100 minutes per week. Throughout the country, the stories are similar. And what are the repercussions for not meeting statewide P.E. mandates?

Child obesity: critical mass

Numbers from the Centers for Disease Control and Prevention leave little doubt that obesity among children and adolescents is approaching a crisis. The prevalence of obesity has been rising steadily over the past four decades, as CDC statistics

(http://www.cdc.gov/nccdphp/dnpa/obesity/childhood/prevalence.htm)
To see obesity rates in each of the 50 states

(http://www.cdc.gov/nccdphp/dnpa/obesity/trend/maps/)

More information:

Child obesity facts

(http://assets.espn.go.com/preview/090323 otl/cdcchildobesityfacts-1.pdf) State by state P.E. standards

(http://assets.espn.go.com/preview/090323 otl/CDCshppsPEsurvey.pdf)
CDC overview of school health policies

(http://assets.espn.go.com/preview/090323 otl/shppsoverview.pdf)

In the wake of NCLB, educators lamented the need to "teach to the test," and administrators dedicated additional class time to ensure their schools met the requirements and avoided being labeled "failing schools." As a result, time devoted to electives such as art, music and P.E. plummeted.

"The thing in education is: What gets measured is what gets done," says Ginny Ehrlich, the executive director of the Alliance for a Healthier Generation, a non-profit organization working to battle child obesity. "If NCLB measured the numbers of times students pledged allegiance to the flag, it would all of a sudden become huge."

The Alliance, formed in 2005 as a partnership between the American Heart Association and the William J. Clinton the requirement triple in the past couple of years, from 30 to 90 minutes per week.

That would be considerable progress, except that virtually nobody can meet the mandate demand because the state provided no additional funding. So, it's a mandate in name only.

Ellis recently attended a statewide training session for P.E. teachers. When, during the training session, the teachers were asked how many schools were hitting the 90-minute mark, two or three out of 100 educators raised their hands, Ellis says. His kids at Easterling get about 70 minutes per week -- and that's a lot more than many students throughout the country.

In New York, the state comptroller re-



AP Photo/Charles Dharapak
Collateral damage? Part of the reason for the decline of physical education in public schools is former President George W. Bush's 'No Child Left Behind Act.'

"None," says Dr. Toni Yancey, a professor in the UCLA School of Public Health and an expert in the area of physical activity among kids. "... If a school doesn't improve, if it's below average in its reading tests scores or its math test scores, then there are consequences for that school. They may be put on probation. They may have the state come in and take over --lots of things they don't want to happen. "If they don't adhere to the number of minutes for P.E., there are no consequences."

Conceivably, that could change soon. Last week, several members of Congress called for passage of the FIT Kids Act, a bill that would amend NCLB to add P.E. as a core subject and require schools to report on the state of their programs. Although there still would be no tangible repercussions for not making progress, advocates of the bill say accountability should put pressure on schools to improve. (con't)

Critical mass (continued from page 17)

Still, nobody is identifying where the money would come from to do things like increase time, decrease ballooning class sizes and ensure that elementary school teachers are credentialed to teach P.E. At the moment, that isn't a requirement in some states, nor do many elementary schools even employ educators specifically to teach P.E. Which is why experts and educators say it isn't unusual for the third-grader who gets P.E. once a week to have her teacher just toss out a few balls and tell the kids to have fun.

"Imagine an elementary school teacher graduating without any training in how to teach math or English," says Yancey, painting an unlikely scenario. "But there are a lot who graduate with no clue how to teach P.E."

Adds Yancey, "P.E. has been decimated."

The National Association for Sport & Physical Education -- a non-profit organization made up of P.E. teachers, coaches, athletic directors and other professionals advocating for physical activity -- says students should receive 150 minutes of P.E. per week.

At Southwest Community Campus in Grand Rapids, Mich., some of the kids aren't even getting 150 minutes *a month*.

"I mean, [150 minutes per week] is a great thought. It's a great concept. I would just like to see how any school pulls it off," says Amy Mabin, a certified P.E. teacher at Southwest, a K-8 school consisting of about 700 students. "... I don't think there are any teachers in our own district, any colleagues of mine currently, that teach physical education more than once a week."



Nicole Noren/ESPN

This playground at Southwest Community Campus in Grand Rapids, Mich., often can't be used at all in the dead of winter.

In fact, some of Southwest's students are getting no P.E. for a considerable part of the school year. Mabin's kindergarten-through-fifth-graders receive 35 minutes of P.E. per week throughout the year, but her middle-school students are in P.E. for only one-fourth of the year, when they get 45 minutes four days a week. The rest of the time, they're taking another elective such as art or music. So for three-fourths of the year at Southwest, hundreds of kids in

the throes of adolescence are getting no organized exercise at school.

In spite of the huge challenges, educators such as Mabin and Ellis, who also is certified to teach P.E., are making the most with what they've got. Ellis has helped supplement his P.E. time by creating a series of DVDs with him leading 5-10 minute exercise sessions. The regular classroom teachers play the DVDs in the morning so their kids can get an early workout.

At Southwest, where the harsh weather can frequently keep kids indoors for P.E. and recess, art teacher Karen Williams came up with the idea for an indoor fitness trail. Mabin joined with Williams, and together they created 12 stations within the three-story schoolhouse.

Williams says the trail was devised mainly to give kids an exercise option on days when recess has to be held indoors, but some teachers have embraced the trail to create exercise breaks from class. She admits, though, it's a work in progress.

"It's like giving a microwave to a greatgrandmother," Williams says. "It's in the house but won't get any use unless you show her how to use it."

Nicole Noren, a producer for ESPN's enterprise unit, contributed to this story. Mark Fainaru-Wada is a reporter for ESPN's enterprise unit. He can be reached at

markfwespn@gmail.com.



Students Attend ACSM

Students from Dakota State University presented a poster session at the Northland Chapter of the American College of Sports Medicine (ACSM) held on the campus of St. Cloud State University in March of 2009.

Students participating in the presentation were: (back row) Allie Winkle, Stephanie Harrington, Amy Pheneger, Lisa Chase, Emily Hanson (front row) Monica Burke, Jamie Welter, Samantha Warnke, and Sara Olson. The students were accompanied by Dr. Andrew Shim who supervised data collection and assisted in the development of the poster presentation.

FIT Kids Act (continued from page 15)

The NFL is proud to be playing a role in today's event to reintroduce the Fit Kids Act," said Arthur M. Blank, owner & CEO of the Atlanta Falcons, who spoke at today's event. "Major steps need to be taken to curb the trend of childhood obesity, and through initiatives like NFL PLAY 60 the league is playing its role in the fight."

"The National Association for Sport and Physical Education (NASPE) envisions a society in which all individuals are physically educated and participate in lifelong physical activity," said **Executive Director Charlene R. Burgeson**. "We advocate for quality physical education for all students because the goal of physical education is to develop physically educated individuals who have the knowledge, skills, and confidence to enjoy a lifetime of healthful physical activity."

The FIT Kids Act has been endorsed by the following organizations: The American Heart Association, American Stroke Association, National Association for Sport and Physical Education, Afterschool Alliance, American Association for Physical Activity and Recreation, American School Health Association, Healthy Schools Campaign, National Association of Health Education Centers, National Association for County and City Health Officials, National Recreation and Park Association, Obesity Action Coalition,

Researchers Against Inactivity-related Disorders, SPARK, Shaping America's Health, Trust for America's Health, American College of Sports Medicine, and the YMCA.

Childhood Obesity in America

Childhood obesity in the United States has reached epidemic proportions. Currently 25 million children in America are obese. The childhood obesity rate has tripled since 1980, and continues to rise. It is estimated that by 2010, twenty percent of children in the U.S. will be obese

Researchers suggest that the childhood obesity epidemic is largely due to a decline in regular physical activity and a diet high in empty and fat-laden calories. A lack of regular physical activity not only hurts a child's health, it can also affect his/her academic development, as research also shows that healthy children learn more effectively and are higher academic achievers.

Increasing physical activity is the most important component of any initiative to combat childhood obesity and promote the health of students. Unfortunately, many schools are being forced to cut back on P.E. programs because of lack of resources and competing academic demands and testing. Between 1991 and 2003, enrollment of high school students in daily PE classes fell from 41.6% to 28.4%.

Kids Speak forum lets youths have their say on health issues

By Josh Verges Reprinted with permission from the Sioux Falls Argus Leader

A group of students called for more athletic opportunities, more healthful food options and straight talk on sex and drugs Friday during the annual Kids Speak forum in Sioux Falls.

Seven students from across the state won the opportunity to speak directly to a panel of policymakers on the topic, "Healthy bodies and healthy minds. How can communities create a positive environment for children and youth?

Brandon Valley freshman Natasha Grussing said schools wisely have taken soda out of vending machines and have made lunches more nutritious, but childhood obesity remains a serious problem. "Do not let schools cut recess and PE," she urged.

Katie Rall, a Brandon Valley senior, said schools need to rethink their policies. Unlocking playground gates on weekends would give neighborhood children another place to get active, she said, and her school's attendance policy – miss fewer than three days and you don't have to take the end-of-semester exams – discourages sick kids from staying home.

Freshman Mitchell Witt told the forum of how the city, school district and YMCA in Custer share resources to provide more recreational opportunities for kids.

Sioux Falls Lincoln senior Heidi Ranschau described how the Straight Forward teen advocacy group, which created the "Don't tell my parents" campaign, en-

(continued on page 23)

For Additional Information on the FIT Kids Act, contact:

Kate Cyrul, Sen. Harkin, 202-224-3254

Laura Condeluci, Rep. Zach Wamp, 202-225-3271

Torie Brazitis, Rep. Jay Inslee, 202-225-6311

Clare Graff, National Football League, 212-450-2435

Kanika Lewis, American Heart Association, 202-785-7935

Paula Kun, Nat'l Assoc. for Sport & Physical Ed., 703-476-3461

or see the SDAHPERD web page at http://sdahperd.sdstate.org



Eat well, move more, be well.

You can help your school become a healthier place for students to learn and staff to work!

The Healthy Schools Program's Network will give you access to tools and discounts to help your school. Sign-up is free and anyone can join!

Join the Healthy Schools Program's Network today! HealthierGeneration.org/schools

Generous support provided by



Motivating Teens to Get Moving

by Josh Trout, PhD

Reprinted with permission from Shape Up America! [www.shapeup.org]

Being physically active for at least 60 minutes every day is especially crucial for children struggling with weight issues. One of the goals of physical education teachers is to introduce children to a wide range of activities and skills so that each can find something physically active that they enjoy doing every day for the rest of their lives. Physical education teachers want youth to love and embrace physical activity.

Many overweight children report having bad experiences in physical education, not because of the curriculum, but because they are often concerned about how their peers perceive them in physical education. This can be a barrier to enjoying activity and can discourage participation. Overweight and obese youth carry social, psychological and emotional burdens that often lead to anger, despair, and ultimately, a sedentary lifestyle. One example is picking teams. Overweight youth dread being picked last, so a more sensitive approach is for an adult to set up the teams in advance to avoid a potentially humiliating experience.

Teens should be encouraged to take responsibility for their own health by making wise nutritional choices and engaging in the recommended 60 minutes of physical activity per day. This does not necessarily mean joining a gym to attend high-intensity cardio-sculpting classes.

Some research indicates that many overweight teens prefer to exercise in private so their peers do not see them. There are many activities that an emerging exerciser can participate in at home so that adopting healthier habits does not come with a social or financial price tag. It does, however, require active decisionmaking and personal goal setting.

Some possibilities are exergaming (e.g., Nintendo® Wii™, Dance Dance Revolu-

tion) at home, renting a yoga DVD to follow in private, or even taking a peaceful nature hike. If exercising with others is more motivating or just more fun, options include walking, jogging or bicycling with friends, taking classes such as martial arts or Yogalates (Yoga + Pilates), or even volunteering as a dog walker at the Humane Society.

Teens should avoid anything that advertises a guick solution such as an exercise machine promising the body of your dreams in just a few weeks, a new diet that can shed 30 pounds in 30 days, or a pill that boosts your metabolism and claims to allow you to lose weight while you sleep or eat whatever you want. The vast majority of over-the-counter pills and supplements for weight loss are untested and ineffective; some are dangerous. Some exercise machines are expensive yet poorly designed, and consequently, are hard on your back. If you are determined to invest in a piece of exercise equipment, studies show that a treadmill is most likely to be of value in a home-based setting, but these studies have been conducted in adults and may not apply to teens.

Proper nutrition combined with daily physical activity is the safest, most effective long-term weight loss/maintenance plan. Weight loss goals vary slightly depending on a teen's current weight category (see Treating Obesity in 12 to 18 Year Olds, above), but for those who need to lose weight, a reasonable goal is a gradual weight loss of about 1 pound per week. This may sound too slow for some, but consider this: With 52 weeks in a year, it is possible to lose 52 pounds by this time next year. If a person takes it slow and adopts healthier habits along the way, the weight loss achieved is more likely to be permanent.



The greatest weapon in battling the obesity epidemic is education. Overweight youth must learn what foods to choose, as well as the principles of portion control. Daily physical activity is simply a health requirement. Teens learn healthful practices from parents and teachers who value and role-model these behaviors. It is not unlike teaching children to buckle their seat belts, brush their teeth, or avoid tobacco; it is a lifestyle choice that must be taught by people who practice these behaviors.

The human body is like a high-performance race car: If you fill it with low-quality fuel and park it, it will deteriorate. If it receives racing fuel and driving time on the track, it thrives. The human body also needs good fuel (proper nutrition) and movement (daily physical activity) to achieve and maintain optimal health and wellness throughout the lifespan. By learning these lessons, teens will be more likely to achieve and maintain optimal health and wellness throughout their lifespan.

Josh Trout, PhD, is assistant professor in the Department of Kinesiology at California State University, Chico, and is the author of the recently released book, <u>Supersized PE: A Comprehensive Guidebook for Teaching Overweight Students</u> by the National Association for Sport and Physical Education (NASPE).

¹ Trout JM, Graber K. Perceptions and experiences of overweight students enrolled in a high school physical education class. *Journal of Teaching in Physical Education*. (in press).



FOCUSING ENERGY TO ENHANCE TEACHING

Come to Fargo in 2010!!!

Central District and North Dakota AHPERD welcome you to Fargo

On February 4-6, 2010

For the Annual Central District Convention

KEYNOTE SPEAKER: CHUCK CORBIN, 2009 AAHPERD Gulick Award

"FITNESS FOR LIFF"

TopNotch Pre-Convention Workshops:

"No Cold Feet: Creating a comfortable dance environment"—Deb Stepehenson

Developing Curriculum on a Shoestring—Lois Mauch & Karen Roesler

Cross Country Skiing—Annette Johnson & LeAnn Vette

AND

Fitness for Life—Chuck Corbin

It will be happening at the Holiday Inn Fargo—

Just across the street from the West Acres Mall.

Program proposals are available online at:

www.aahperd.org/districts/cda

Questions? Contact President Kelly Cook (Kelly.cook@sccc.edu)

or Convention Manager Donna Terbizan (D.Terbizan@ndsu.edu) for additional information.



WIN \$2,000 for a School-Based Running Program



ING Run For Something Better (ING RFSB), in partnership with the National Association for Sport and Physical Education (NASPE), has launched a new awards program to help schools increase moderate to vigorous physical activity in students and help fight childhood obesity nationwide through the creation of school-based running programs.

The new awards program will provide fifty \$2,000 grants to schools that desire to establish a school-based running program or expand an existing one. The grant awards are available in all states to public elementary and middle schools for running programs that target fifththrough eighth-grade students.

Through activity plans created by NASPE and based on the *National Standards for Physical Education* (NASPE, 2004), the awards program will offer children a healthy start and foster their desire to be physically active before obesity ever be-

gins. The ING RFSB school-based running program is designed to be flexible. The \$2,000 grant must support and/or sustain a school-based running program offered to the best of the school's ability to all students in eligible grades. The program can be conducted in physical education class, during recess, before school, after school, or any combination of these. It can be facilitated by a physical education teacher, coach, classroom teacher, or school administrator.

If you are ready to make an impact on the lives of your students through healthy lifestyle changes, improving self esteem and reducing the rate of childhood obesity, then **step up to the starting line!**

Application, program materials and additional information at www.naspeinfo.org/run. Deadline for applications June 1, 2009.

Kids Speak Forum (con't from p. 19)

courages students and their parents to talk about sex, dating and Internet safety.

Spearfish junior Andrea Driscoll said the four school-based drug and alcohol prevention agencies in the state are not enough. "These programs show that it is cool to be substance-free," she said.

Tiffany Schlotterbeck, a Castlewood sophomore, said parents should spend time with their children, not just money.

And Brookings sophomore Sean Higgins called for an education revolution that pays teachers more and raises the bar for student achievement.

"Every year students spend in public education, their scores decrease," he said.

South Dakota Voices for Children, which hosted the event, handed out "Champions for Children" awards to John Hamilton of South Dakota Advocacy Services; the Aberdeen City Council, which enacted day care rules; the Statewide Methamphetamine Task Force; and Wellspring founders Dr. Stephen Manlove, Judge Marshall Young and Al Scovel.



Each year NASPE develops special integrated activities for teachers and their students to do during National Physical Education and Sport Week, May 1-7. You will find daily activities for adventure, dance, sport, recreation, and personal fitness. The activities are developmentally appropriate for lower elementary, upper elementary, middle and high school students. NASPE leaders and staff encourage all K-12 physical education teachers to take advantage of these wonderful resources to showcase the quality sport and physical education programs in your school and community.

http://www.aahperd.org/naspe/Toolbox/ April09.cfm

SDAHPERD Award Nomination Form

	Elementary Physical Education Teacher of t	he Year		
	Middle School Physical Education Teacher of the Year			
	Secondary Physical Education Teacher of th			
	New Professional of the Year (1-5 years exp	onal of the Year (1-5 years experience)		
	Adapted Physical Education Teacher of the	Year		
	Dance Educator of the Year (K-12)			
	Health Educator of the Year			
	(please indicate levelK-12College/University)			
	☐ College/University Teacher of the Year			
	☐ Pathfinder Award			
	Recreation Professional of the Year			
	*Friend of SDAHPERD Award (must have 10 years in the profession)			
N	ominee:		School:	
S	chool Address:			
Home Address:				
Pł	hone (H)		Phone (W)	
	<u>.</u>			

On an attached sheet, please provide information as to why this person deserves the award indicated. **Please remember – nominator is responsible for turning in the nomination papers**.

Nominated by:		
Address:		
Phone (H)	Phone (W)	
Email Address:		

Nomination deadline: August 31

(* Friends deadline up to 2 weeks before convention)

PERD website (sdahperd.sdstate.org) for more information or

See the SDAHPERD website (sdahperd.sdstate.org) for more information on awards

Submit nominations to: Patty Hacker, Chair, SDAHPERD Awards Chair 46877 Amen Corner, Brookings, SD 57006 605-688-5218 (school) 605-695-1553 (cell)

Harrisburg Physical Education Summer Clinic 2009

June 23 and 24

You are invited to our first ever 'Harrisburg Physical Education Clinic' that we are putting on this summer. We have put together a 2 day clinic geared to K-12 P.E. teachers. Topics include: Golf for Beginners; Heart Rate Monitor and Other Technology in PE; Grants – How, What, Where and Who Qualifies; Jitterbug/ Swing - Just do it!; Dance Dance Revolution – How it can be used in class?; Archery; Games with a Purpose; HOPSports Training System; Tennis for the future; Bring the Classroom into the Gym; Stretching for Health and Safety; Sport Stacking; Catching on to Children with Autism; Extending Elementary PE beyond your class time (Field Days and Clubs) - plus more!

Please plan to join us!

Cost:

Pre-registration for clinic \$80.00 Registration at the door \$100.00

This includes the cost of the clinic, rolls, juice, pop/water, as well as lunch each day at HHS.

Cost for Graduate Credit will be \$40.00 to USF (Due when you check in for the clinic.)

To get renewal credit you must attend ALL 15 session (attendance will be taken)

To get Graduate Credit you will have to attend all sessions and write a reflection paragraph on each session. Additionally, at the end of the conference you must turn in a minimum one page paper discussing your implementation the curriculum in your district. This will be collected on the last day after the last session.

Registration Form

Name:
School you teach at:
Summer Phone number:
Summer E-mail:
Pre-registration is due: May 8, 2009
Send to: Ronette Costain • 4010 W. 82 nd Street • Sioux Falls SD 57108
E-mail: ronette.costain@k12.sd.us or phone: 605-743-2567 dial 6 then extension 4008
Checks payable to Harrisburg School District/ PE Clinic
Pre-registration for clinic \$80.00
Amount Enclosed: \$ check or cash (circle one)



JOIN TODAY, AND PUT AAHPERD TO WORK FOR YOU! AAHPERD Membership Application

Physical Education, Astrodules and Gener				
☐ YES, I want to join AAHPERD. Please send my	Customize your membership			
Association credentials, and begin my subscription to Update and the professional journal(s) I've checked below.	Choose your Associations AAHPERD membership includes membership in any two Associations. Please prioritize your choices. Students may join only one Association.			
(Mr.) (Ms.) (Dr.) Name	1 2 American Association for Health Education 1 2 American Association for Physical Activity and Recreation 1 2 National Association for Girls and Women in Sport			
Please fill out both addresses below and then tell us which one you'd like to use. 1. Business/Academic Address	 National Association for Sport and Physical Education National Dance Association Research Consortium For those interested in research. (Select this in addition to your association affiliation(s) at no extra charge to you.) 			
Place of Employment Address	Choose your Professional Journals Journal of Physical Education, Recreation & Dance American Journal of Health Education			
Address	□ Research Quarterly for Exercise and Sport □ Strategies, A Journal for Physical and Sport Educators			
City State Zip	You receive a subscription to one professional journal with your membership in AAHPERD. Subscriptions to additional journals are			
Work Phone Fax	only \$25 each per year.			
E-mail 2. Home Address	Figure your dues AAHPERD Professional Membership OR: (\$135 per year) \$ AAHPERD Student Membership			
Address	(\$80 per year) \$ ☐ Undergraduate ☐ Graduate			
City State Zip	Additional Professional Journals (\$25 per year) \$ Foreign Postage (Outside U.S. & Canada			
Home Phone	add \$12 per journal including Update.) \$			
Preferred Membership Mailing Address ☐ Business/Academic ☐ Home	TOTAL DUE \$			
Your satisfaction is 100% guaranteed. Cancel any time and you'll receive a full	Payment Options ☐ My check is enclosed for a full year's Membership. ☐ Please charge my ☐ VISA ☐ MASTERCARD ☐ AMEX ☐ Annual Payment ☐ Quarterly Payment*			
refund on all the months remaining on your membership. Join AAHPERD	Card no			
with confidence!	Signature:			
	*Quarterly payments (credit card only) renew automatically until canceled by you.			
Ck #:	iance for Health, Physical Education, Recreation and Dance			

South Dakota Association for Health, Physical Education, Recreation and Dance Membership Application

Please provide the following information (please print):



_				
Name:		School/Organization:		
Home Address:		School/Organization A	School/Organization Address:	
City/State/Zip:		City/State/Zip:		
Home Phone:		School Phone:	School Phone:	
Home Fax:		School Fax:	School Fax:	
Home email:		School email:		
		•		
Eı	mployment/Student In	nformation (Check all	that apply)	
□ Student □ Elementa	rry □ Middle School □	☐ Secondary ☐ College/	University	
	Interest Area	(Check all that apply)		
☐ Health ☐ Physical Education ☐ Recreation ☐ Dance ☐ Adapted PE ☐ Athletics/Coaching ☐ Other				
	Membership (Categories (select one)		
Professional:	□ \$25 per year	Student:	□ \$10 per year	
Associate:	□ \$25 per year	Retiree:	□ \$10 per year	
Lifetime:	□ \$200			
Membership Publications/Communication				
Would you prefer to receive the SDAHPERD Journal by: □ Mail □ Email				
Which address would you like your Journal mailed to: ☐ Home ☐ School				
Do you want to be a member of the South Dakota AHPERD List Serve? □ Yes □ No				
Payment: Send check or money order payable to SDAHPERD to:				
Gale Wiedow, SDAHPERD Executive Director 820 N. Washington Street, KC 135, DSU Madison, SD 57042-1799				



Dakota State University 820 N. Washington Avenue Kennedy Center 135 Madison, SD 57042-1799

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