

## Health, physical education should not be overlooked

**R**ecently, Anchorage mayor Mark Begich convened an Obesity Task Force. One recommendation that surfaced was a requirement for pre-K-12 daily physical education.

The irony of this recommendation is that there's no teacher preparation in physical education (or health education) in Alaska. Therefore, a lack of school and community leadership looms for Mat-Su, Anchorage and Alaska's youth and families.

It's well documented that 60 percent of Alaska adults are overweight or obese. Human development experts and theorists postulate that attitudes and values are well established in our early years, including those developed about physical activity.

Although genetics may make us more susceptible to being overweight or obese, our choices and behaviors play a critical role with health and weight maintenance. These attitudes and values are shaped by early movement experiences at home and in school.

Developmentally, positive outcomes with weight maintenance begin in preschool (motor development opportunities: integration of reflexes, postural control, etc.), through elementary school (fundamental motor skill development: skip, hop, jump, run, throw, catch, etc.) and middle and high school (culturally appropriate motor skill learning and skill refinement: i.e. in-line skating, Nordic, skiing, snowshoeing, traditional game and sport, aquatics, etc.).

A positive, developmental approach would likely have generated a different somatotype (body type) and outcome for adults who experience obesity today. Daily, quality physical education instruction beginning in preschool and including parent and family involvement, can make a significant difference with activity preferences selected (or not) later in life.

At present, the state of Alaska lacks professional preparation programs for the two approaches needed to appropriately address the obesity epidemic: (1) a prevention model, and (2) a treatment model.

The prevention model includes, in part, quality, daily physical education taught by an endorsed physical educator. Minimum teacher training in most states includes a discipline-based physical education degree and a master's degree in physical education pedagogy (art and science of teaching).

The discipline-based program of study includes human motor development (neurological maturation), motor learning (brain function with movement), the psychological and social implications for movement, exercise physiology, kinesiology, biomechanics, etc.

In 2003, the Health, Outdoor and Physical Education (HOPE) program in the College of Education transferred its coursework to the

UAA Community and Technical College (CTC) where courses lead to a bachelor's degree in physical education. This CTC degree is taught in the absence of qualified Ph.D.s.

Also in 2003, UA abruptly "discontinued" the HOPE program, including physical education teacher preparation and terminated the only two tenured Ph.D.s in HOPE in Alaska. At the time, we were developing a master's degree in physical education pedagogy.

The treatment model includes preparing therapists and specialists to support the rehabilitation of obese individuals injured through non-prescribed bouts of physical activity, as well as those in our aging population injured through bone degenerative disease (i.e. arthritis, osteoporosis for women, etc.) and low vitality. This includes many individuals who have acquired orthopedic or muscular injuries due to little or no guidance implementing their physical activity program.

At present, there are no professional preparation programs in occupational therapy (primarily fine motor) and physical therapy (primarily gross motor) in Alaska. National certification requires study in many of the discipline-based courses offered in the CTC physical education program. Many states require that PT and OT training programs

hire qualified Ph.D.-level professors. At present, most CTC physical education coursework is taught by adjuncts with master's degrees, not Ph.D.s.

The obesity epidemic is the "tip of the iceberg" of a larger health problem for all Alaskans. Students with no apparent weight challenge are also susceptible to acute injury and chronic diseases (i.e. cardiovascular, respiratory) as a result of low vitality and low physical activity levels.

Students will recreate safely and successfully when qualified personnel physically educate them. Also, motor skill learning and fitness happens in structured teaching environments.

These learning environments promote student success in carefully planned, safe and developmentally appropriate teaching. Recess is not an appropriate substitute for teaching motor skills and providing appropriate motor development opportunities.

UA recently offered part-time work next year to the only two tenured, Ph.D.-level professors in the College of Education who provided leadership in health and physical education teacher preparation in Alaska for the past 15 years.

Where will our future quality, endorsed health and educators of the physical be trained? Mat-Su College perhaps?

*Palmer resident Paul Maguire is a former UAA professor.*

### Spectrum

Paul Maguire