



Healthy Hearts for Life



A Collaborative Physical Education Initiative of the Copper Country Intermediate School District
Gogebic-Ontonagon Intermediate School District & the Western Upper Peninsula District Health Department

Carla Strome, Coordinator

Copper Country ISD
P.O. Box 270
Hancock, MI 49931
906-482-4250 ext. 233
Fax: 906-482-1931
cstrome@copperisd.org

Joy Maki, Coordinator

Gogebic-Ontonagon ISD
P.O. Box 218
Bergland, MI 49910
906-575-3438
Fax: 906-575-3373
jmaki@coisd.org

**Ray Sharp, Project
Manager**

Western U.P. District Health
Department
540 Depot Street
Hancock, MI 49930
906-482-7382 ext. 163
Fax: 906-482-9410
rsharp@hline.org

**Loret A. Roberts,
Secretary**

Copper Country ISD
P.O. Box 270
Hancock, MI 49930
906-482-0331
Fax: 906-482-5031
loret@copperisd.org

**Healthy Hearts
Newsletter
September 2006**

Ray Sharp, Editor

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Top 10 Answers* ...

10. More than 36 hours of training to-date provided to 34 area P.E. teachers, covering curriculum, equipment use, and other classroom applications. That's more local training specific to P.E. than ever before.
9. EPEC Curricula for K-5 and 6-12 given to all participating school districts. EPEC aligns with state and national standards, and is a tremendous resource for teachers who want to keep up with 'best practice.'
8. 734 Polar heart rate monitors purchased in the first year, with more on the way, to help students and teachers assess aerobic training benefits.
7. The new on-line data collection system makes it easy to track student improvement on standard fitness measures over months or even years.
6. Exercise and play equipment galore, including balls, jump ropes, exercise bands, tennis racquets, cones, steps, hoops and even parachutes.
5. CEUs are available at Healthy Hearts in-services (and some great food as well).
4. 27 laptops and 23 printers were distributed to schools in the first year for use with heart rate monitors, on-line data collection, and student portfolios.
3. 1,200 pedometers for area schools. At 10,000 steps per day, times 1,200 students, divided by 6,000 steps per mile, that's farther than Copper Harbor, Michigan to Miami, Florida on U.S. 41.
2. Over a million dollars invested directly in Western U.P. schools for equipment, training and curriculum that will enhance physical education programs for many years to come.

And

1. *Lifelong physical activity helps children live longer, healthier, happier.*

***To the question, "How does the Healthy Hearts for Life Project help Western U.P. children, families, schools and communities?"**



Project Updates

New for 2006-07: Data collection; community health education partnerships

This is a great time to be working in a health-related field, whether it's local public health, as I do, or physical education, as all of you do. In both cases, we face tremendous challenges, but finally people are starting to sit up and take notice of our fields and give us the support we need to help people become healthier, and stay that way.

In public health, the challenges include fears of anthrax in our mailboxes, *E coli* in our salads, and global influenza pandemic (maybe someday) reaching our remote rural communities. In physical education, we all know the number one challenge, a simple two-word phrase that's on everyone's lips these days:

CHILDHOOD OBESITY

Childhood obesity is the short phrase that has stuck in our national consciousness, shorthand for metabolic syndrome, lack of physical activity, too much candy and soda pop, too much screen time and not enough outdoor play, rising rates of diabetes and other chronic diseases, and the prospect that our children may die before we do because they're stuck on the couch and they can't get up. As partners in the public health arena (yes, schools, you're part of the public health system when it comes to healthy meals, immunization compliance, hearing and vision tests, lice control, health education and physical activity, both in the P.E. class and on the playground) we have our work cut out for us.

Along with more purchases of curriculum, training and equipment, we're rolling out two great new project features this year. You'll hear more about them at the in-service October 13, but here's a preview:

1. Data Collection: Scott Sherrill from REMC in Hancock, with help from our external evaluator, has developed a user-friendly on-line data collection system for tracking required anonymous student surveys of attitudes about physical education and wellness, and student performance on objective measures of fitness, endurance, strength and flexibility. Using this system, your students can quickly and easily complete anonymous attitudinal surveys in a school computer lab to help us with federal evaluation mandates, and you can help students create a fitness portfolio that they can build upon over the years.

2. Community Partnerships: This fall, in meetings with hospitals and other health education providers, we're setting up a menu of physical education and wellness activities and programs that can come to your school, during the school day, in after-school recreation programs, and in evening family and community nights.

Yes, our challenges are great but there's a lot of help on the way as we work toward instilling the habit of lifelong physical activity and wellness in our students, schools and communities.

Ray Sharp, Project Manager

Health News

It takes a while to stop a runaway train

Adult obesity rates increased in 31 states during the past year, leaving an estimated two-thirds of Americans vulnerable to fatal diseases such as diabetes, stroke and cancer. This, despite federal and state government efforts to curb the overweight epidemic, according to a new report from the Trust for America's Health. The report, titled *F as in Fat: How Obesity Policies Are Failing America, 2006*, was released Tuesday and is the third in a series of annual reports by the trust detailing state obesity rates as well as the effectiveness of government policies to fight the problem. According to official figures, the adult obesity rate rose from 15 percent in 1980 to 32 percent in 2004. Combine that with the number of Americans who are overweight but not obese, and the figure stands at 64 percent. ***And the childhood obesity rate more than tripled between 1980 and 2004, from 5 percent to 17 percent...***

...The report offered a 20-step action plan to address the obesity crisis. Recommendations include improved nutritional labeling on foods; community-driven efforts to increase access to healthy foods in low-income areas; improved nutritional content on foods and beverages served and sold in schools; an improved physical environment with more and better sidewalks, parks and bike paths; ***better physical fitness curricula in schools***; and employer-sponsored programs to increase physical activity and provide better insurance coverage for preventive services. To read the full report, visit Trust for America's Health.

Study encourages families to turn off the tube and go for a walk

A new study finds that teens who take part in many different kinds of physical activity -- particularly with their parents -- are less likely to get involved in drinking, drugs, violence, smoking, sex, and delinquency than teens who spend a lot of time in front of the television. Researchers at the University of North Carolina at Chapel Hill reported the findings in the April issue of the journal *Pediatrics*. The researchers looked at seven different "clusters" of teens. These clusters were defined by physical or "couch potato" activities frequently engaged in by teens. Examples of clusters include:

Teens who often played sports with their parents and who also spent a lot of time playing sports overall;

Skaters/gamers -- teens who did a lot of skateboarding, bicycling, and playing video games;

High TV/video viewers, who made their own decisions about TV viewing and watched a lot of TV;

Teens who often used recreation centers;

Teens who often took part in school activities, including sports and clubs. The researchers found that kids who focused on fitness and activity were less likely to take up drinking, illicit drug use, violent behavior, sex and delinquency. On the other hand, "adolescents who spend a lot of time watching TV or playing computer video games tend to be at higher risk for engaging in all of these risky behaviors," study co-author Dr. Penny Gordon-Larsen, assistant professor of nutrition, said in a prepared statement. "Anything we can do to get kids to be physically active will help them in terms of their physical health, but this research suggests that engaging in a variety of activities may also have social, emotional, and cognitive benefits, including reduced likelihood of engaging in risky behaviors, such as drinking, drugs, violence, smoking, sex, and delinquency," Gordon-Larsen said. She and her colleagues also assessed the teens' self-esteem and found that the risk of poor self-esteem was lowest for teens who played sports with their parents.



Healthy Hearts for Life Project

Friday, October 13, 2006

Copper Country ISD – Distance Learning Room

9:00a.m.-3:30p.m. ET

✓ **Healthy Hearts for Life Project – CCISD**

Overview of the first year of the Healthy Hearts for Life Grant Initiative.
Announcements for the 2nd year expectations.

✓ **Digital Portfolios**

Hands-on training on a new on-line data collection system created specifically for Western U.P. physical education teachers and classes. This user-friendly system records student performance on fitness tests and anonymous surveys of attitudes on physical education and wellness. **All teachers need to bring their laptops. Elementary teachers will receive their laptops and printers at this training.**

✓ **One-Minute Lesson Plans**

Divide into teams and match wits by sharing one-minute lesson plans to meet randomly chosen State Standards and benchmarks at the elementary, middle and high school levels.

✓ **All Band Together – Hancock High School**

Learn how to incorporate elastic bands into fitness training, with demonstrations and hands-on practice. **Wear comfortable clothes and footwear for participating in the demonstrations.**

✓ **Strength Training – Keweenaw Memorial Fitness & Rehab**

Learn from the professionals how to use resistance training, including weights, machines, bands and exercises, as part of an overall physical education program, with emphasis on safety and age-appropriate activities in the K-12 setting.

0.5 SB-CEUs are available.

Lunch will be provided.

Healthy Hearts for Life Project – Oct. 13, 2006

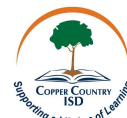
Name: _____ **School:** _____

Email: _____ **Grade** _____

Please send registration form to:

Loret A. Roberts
General Education Secretary
P.O. Box 270
Hancock, MI 49930

loret@copperisd.org
phone: 906-482-0331
fax: 906-482-5031



Registration Deadline: Friday, October 6, 2006