Physical Activity: The Perfect Prescription

Good health is a matter of choice. Students and educators alike must assume the responsibility for their own health by exercising regularly and practicing positive lifestyle habits. Ellen White stresses the importance of health when she says, “So closely is health related to our happiness that we cannot have the latter without the former.”

But while each person is ultimately responsible for his or her health, Christian schools have the responsibility to educate, head, hand, and heart. To do so, they must help make young people aware of the importance of fitness and a healthy lifestyle.

Students need to understand that health means more than the absence of disease or being a strict vegetarian. The modern concept of health is associated with the term “wellness.” To understand this concept, it is useful to visualize health as a continuum. In the center is a neutral point where there is no discernible disease or illness. Moving to the left, one experiences a progressive deterioration of health, while moving to the right, one achieves “wellness” and optimum health. “To keep the body in a healthy condition, in order that all parts of the living machinery may act harmoniously, should be a study of our life.”

Certainly, prevention is the best medicine. If we could obtain a doctor’s prescription that promised long life; decreased the risk of heart disease, diabetes, and certain cancers; lowered blood pressure; helped to control blood lipids, obesity, and osteoporosis; promoted mental health by lessening anxiety and depression while increasing one’s own self-image—and without negative side-effects—we would pay almost any sum of money. Amazingly, such a prescription does exist. However, it requires a considerable investment of time and effort. The Rx—physical activity.

In general, while most people recognize that they should be physically active, far too few practice what they know:

- More than 60 percent of American adults do not exercise regularly. In fact, 25 percent of all adults are not active at all.
- Nearly half of American youths 12 to 21 years of age are not vigorously active on a regular basis. Almost 14 percent of youths do not engage in any form of physical activity. Physical activity declines dramatically during adolescence.
- Obesity rates have increased from one in four adults in 1980 to one in three today.

“Inactivity is not the law the Lord has established in the human body. The harmonious action of all the parts—brain, bone, and muscle—is necessary to the full and healthful development of the entire human organism.”

The Surgeon General’s Report on Physical Activity and Health¹ is a comprehensive review of the latest scientific evidence linking physical activity and improved health. Major conclusions of the report include:

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• People of all ages, both male and female, benefit from regular physical activity.

• Health benefits can be obtained by engaging in at least 30 minutes of endurance-type activity of moderate intensity on most, if not all, days of the week.

• Additional health benefits accrue from greater amounts of physical activity. People whose regular regimen of activity is of longer duration or more vigorous intensity derive greater benefit.

• Physical activity reduces the risk of premature mortality, particularly from coronary heart disease, hypertension, colon cancer, and diabetes mellitus. Physical activity also improves mental health and is important for strong muscles, bones, and joints.

• Daily enrollment in physical-education classes declined among high school students from 42 percent in 1991 to 25 percent in 1995.

Children’s Fitness

According to Dr. Kenneth H. Cooper,* the founder and director of the Cooper Institute for Aerobics Research, children often exhibit below-average performance on all fitness measurements. Children as young as 8 years old have one or more significant risk factors for heart disease, including obesity and physical inactivity. These findings are of great concern because youthful lifestyles set the stage for lifelong ill health.

Cooper suggests that the low levels of fitness in children are caused by the following:

• TV and video games. National studies suggest that American children spend more than 20 hours a week watching television and playing video games.

• Lack of physical education in schools. Most states have eliminated daily physical education or offer only one or two sessions per week, far below the levels required to improve conditioning.

• Fast food. Children below the age of 15 are the highest consumers of fast food products, which are high in fat and sodium and, in most cases, low in nutrition.

• The “athletic participation produces fitness” myth. Parents tend to believe that participating in a Little League or another sports program furnishes all the physical conditioning that their child needs to be fit and healthy. In most athletics, the child is inactive a great deal of the time or participates at a level that is insufficient to achieve a conditioning effect.

• Parental fears. Some parents still worry that aerobic exercise and strength training are injurious to prepubescent children.

The National Association for Sport

RESOURCES

• American Fitness Alliance—http://www.americanfitness.net.
• American Heart Association—http://www.americanheart.org.
• Centers for Disease Control—http://www.cdc.gov.
• PE Central, for physical-education teachers—http://pe.central.vt.edu.
According to Dr. Kenneth H. Cooper, the founder and director of the Cooper Institute for Aerobics Research, children often exhibit below-average performance on all fitness measurements.

And Physical Activity’s Shape of the Nation Report suggests that most states are not following the recommendations of the U.S. Surgeon General’s Report on Physical Activity and Health or the Centers for Disease Control and Prevention to require daily, quality physical education for all students in kindergarten through 12th grade.

Colorado, Mississippi, and South Dakota do not require students to take any physical-education courses. Forty-six states have varying requirements for physical education. Only one state, Illinois, mandates that all students in grades K-12 have physical education daily. The majority of high school students take physical education for only one year between 9th and 12th grade. At the secondary level, 42 percent of the states allow students to skip physical education for medical reasons or permit them to substitute varsity athletics or marching band.

The goal of education must be to educate the whole child: mentally, physically, spiritually, and socially. Globally, the welfare of each country depends on our children becoming productive citizens. Our young people do need to be computer-literate, but playing games, surfing the Internet, or working on computers for hours every day is turning many of them into high-tech couch potatoes. They need physical activity both in school and after school to prevent health problems later in life.

Lasting benefits are achieved only when physical activity is integrated into a multidimensional program. Schools can provide the environment for comprehensive programs that include physical exercise, nutritional education, and general lifestyle education.

The school-age years are an essential time for promoting regular, vigorous physical activity. In many physical-education classes, the activities do not consistently require students to elevate and maintain their heart-rate levels to the target zone, or show them how to achieve lifelong fitness. Therefore, physical-education programs must teach wellness in a way that motivates students to engage in vigorous exercise.

Physical inactivity is a major epidemic in many developed countries, so physical education should be mandatory for kindergarten through 12th grade. Getting children into the habit of regular exercise will help them prepare for a lifetime of better health. The physical-education class can “light the fire,” making students aware of the necessity to exercise and showing them how to develop a personal fitness program. Varsity sports do not substitute for physical education. Too often, students
who engage in athletics are excused from the scheduled physical-education class and miss the benefits of a wide range of activity.

**Physical-Education Activities**

Many physical-education programs include a predictable sequence of activities—flagball, soccer, basketball, volleyball, and softball. Why not include fitness-type activities such as track and field, aerobic rhythms, aerobic swimming, cross country, and weight training? The activities chosen should require that students be moderately or vigorously active for at least 30 minutes during each period. The physical-education teacher must design a curriculum that provides for varied movement experiences, exercise, and fitness activities, while making physical-education class an enjoyable experience for students.

One way to do this is to let students help plan their program and select activities. As goals are set, students can help determine how these desired outcomes will be met. This not only gives students a degree of ownership, but also teaches them to analyze what activities actually promote fitness.

Here are some activities that emphasize wellness in the physical-education curriculum:

1. Utilize the American Heart Association’s HeartPower curriculum kit, which encourages K-8 students to increase physical activity, eat healthy foods, and stay tobacco-free.

2. Implement the Jump Rope for Heart and Hoops for Heart programs as developed by the American Heart Association.

3. Include a unit in resistance training. If your school does not have the proper resources, ask students to bring barbells and other equipment from home. It is important for adolescents to recognize the advantages of resistance training and learn how to exercise properly to obtain the full benefit and prevent injuries.

4. Put the Fitnessgram program into the curriculum. This program of fitness testing and reporting was designed by the American Alliance for Health, Physical Education, Recreation, and Dance utilizes fitness testing and criterion reference norms for elementary and high school students.

5. Feature posters throughout the school to stimulate student interest such as the Centers for Disease Control and Prevention’s “Physical Activity—It’s Everywhere You Go” and “Activity Pyramid.”

6. Get scientific. Utilize heart-rate monitors to enable students to track the intensity of their exercise, electronic blood pressure devices to measure blood pressure, fat calipers to measure body fat, and computers to generate fitness profiles.

7. Surf the Web! Consult the numerous sites that provide information on innovative and creative programs that have proved successful in other schools. A few are listed in the box on page 33.

8. Remember the importance of positive role models. In the area of fitness and body image, physical-education instructors have considerable influence. To promote good nutrition, a trim body, and daily activity, they must commit themselves to this lifestyle, practicing what they preach. A 44-inch waistline is not a very good testimonial for fitness!

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**REFERENCES**


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