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The Ohio Association for Health, Physical Education, Recreation, and Dance

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President's Message Pamela Bechtel, Bowling Green State University Proud of OAHPERD

believe the seasons have finally changed for the better as I write my first *Future Focus* article as President of OAHPERD. The s _ _ _ word hopefully will be replaced with sunshine and warmer, more normal temperatures. The spring semester is close to winding down for many in higher education and the PK-12 school year will be winding down shortly also.

I'd like to reflect on some proud points for our organization. Proud is one key to my slogan this year so I wanted to inform you of my proud points in the past few months. I'll start with our OAHPERD Convention at Kalahari last December. The 2013 Convention Committee did a great job in planning at our new venue! There were many positive comments from attendees and presenters. The number of convention attendees was about the same as in the past, so the switch in venues was good for our organization. There were a few glitches, but these were resolved quickly. The 2014 Convention Committee is working hard to again make this next one, in December, at Kalahari a great convention experience for everyone. I am proud of how OAHPERD conducts our convention; it is a time to grow professionally and also a time to grow personally by re-connecting with former colleagues and meeting new colleagues through the social activities at the convention.

I attended the "Speak Out Day for Health and Physical Education" in Washington, DC in March with Kevin Lorson (All-Ohio Representative and Public Relations & Advocacy Co-Chair) and Steve Mitchell



(Immediate Past President and Public Relations & Advocacy Co-Chair). We visited several Congressional Representatives and Senators to garner support for the Physical Act in the House (H.R. 2150, sponsored by OH Rep. Marcia Fudge) and the Promoting Health as Youth Skills in the Classroom Act (S.392, sponsored by NM Sen. Tom Udall). Both of these bills intend to recognize physical education and health education as core academic subjects. This will provide an option to permit Title I and Title II funds to be utilized for professional development for physical education and health education by the PK-12 schools nationwide. Our Ohio team was able to gain two additional co-sponsors for the House Bill after our visits. I am proud of the progress we made, but not happy more progress has not been made in the moving either of these bills forward since that campaign.

At the SHAPE America (Society of Health and Physical Educators) Convention in St. Louis, MO, Kevin Lorson and I attended the National Summit for State Physical Education Leaders. This meeting provided us with information and ideas related to the Comprehensive School Physical Activity Program (CSPAP) being introduced by SHAPE America. As we listened to the speakers both Kevin and I found that Ohio is already doing some of the components presented and we are interested in exploring some ideas gained. I am proud to see that we are on the cutting edge in physical education in Ohio. I was even prouder when I attended Kevin and Steve's presentation entitled, Ohio's Physical Education Assessments: What We've Learned from Year One. There were several Ohio physical educators present in the audience who helped provide evidence of how our assessments worked last year in addition to Kevin and Steve. Many in the audience from other states will be looking to our Evaluation Assessments as a means to help frame their state assessments. I am very proud the Assessment Writing Team did such great job creating and implementing these assessments.

Congratulations to all the other Ohio OAHPERD members who presented at the national convention! You represented our state and organization very well. Ohio was represented at the Delegate Assembly by Mary LaVine, Steve Mitchell, and myself. Celia Regimbal attended as a member of the Board of Governors completing her term on this Board. It was nice to have representation at the Delegate Assembly as change is taking place at the national level. It was a great convention experience

and the state of the

Association News

Rhonda Weidman, OAHPERD Executive Director

this year and it will be interesting to see the new changes taking shape (no pun intended) in our national organization.

As I close this article I would like to thank two members of the OAHPERD Board who will be retiring and have left their OAHPERD Board positions, Jackie Cuneen and Melissa McCarthy. Jackie served for many years as Ohio NAGWS (National Girls and Women in Sport) representative and coordinated the Ohio Pathfinder Award given annually at our convention. Melissa served at the Ohio Jump Rope for Heart (JRFH) Coordinator and helped promote JRFH events in Ohio and secure demonstration teams for our state and national conventions. Thank you so much for your many years of service and time dedicated to OAHPERD! I know both of you fully intend to enjoy vour retirements.

As summer approaches, I know many members will be finishing their school years; try to not let the stress of ending the school year get to you! Other members are planning their vacation get-aways from their jobs. Plan a great adventure! Some are planning new summer programs for clients. Whatever your summer entails try to enjoy it by getting some relaxation and incorporating fun activities into your plans. I will catch up with you in the fall! Remember we have quite a bit to be proud of in OAHPERD!

Pamela Bechtel



Ithough it is hard to believe that a year has passed since I became OAHPERD's Executive Director, so much has happened since that time. We have:

- Moved our investment funds from TIAA-CREF to Morgan Stanley, where our money is being managed according to our investment policy of principal preservation and social responsibility.
- Upgraded our website to a more versatile and user friendly program.
- Created the Ohio K–12 Model Curriculum, which is now available on the OAHPERD website.
- Have been at the forefront of advocacy issues related to health education standards and physical education waivers.
- Successfully moved our Annual Convention to Kalahari Resort and Convention Center, where everyone enjoyed the programs and amenities that were offered.

• As AAHPERD transforms into Shape America, we have begun discussion of options for our name moving forward.

While so much has been done, there is still much to do. As we move forward in this and future years, I encourage our members to take an active role in OAHPERD. Our success depends on your support and involvement. If you are interested in taking a more active role in OAHPERD, please contact me and I will help you find an area in which to serve.

I would also like to thank the OAHPERD Board, my assistant Dallas Williamson, and all of you who have welcomed and supported me over the past year. I am proud to be a part of such an amazing organization and am looking forward to another great year!

Rhonda Weidman



elcome to the Spring/ Summer 2014 issue of *Future Focus*. As I write this in April, after the brutal winter of sub-zero temperatures and near record snowfall, followed by a very rainy and cool end to April, I sure hope that by the time you read this sunshine and warmth fill the air. To help you better enjoy the summer, The Jump Rope for Heart/Hoops for Heart column from Marla Thomas provides some interesting recipes that are heart healthy.

The two refereed articles and the research note focus the current issue on research and measurement of instruction and instructors. Baisch, Cai and Kornspan surveyed preservice and in-service Ohio physical education teachers concerning their philosophies of teaching. As perhaps to be expected, there were a number of interesting differences between these two groups of Ohio physical educators. Their survey instrument has been included with the scoring procedure; how about assessing your philosophy?

LaVine, Thompson and Kerr also surveyed physical educators but their sample is from high schools throughout the United States. Their interest was in physical education teachers' perceptions concerning disordered eating behaviors in high school stu-



dents. Not only should OAHPERD physical educators be interested in their findings but so also should Ohio's health educators. An important issue is discussed in the article: who should be teaching about disordered eating behaviors—health educators, physical educators or both? And in what subjects, health and/or physical education classes, does the topic belong?

Lorson and Mitchell provide the physical education assessment data for each of the Ohio Physical Education Standards and Benchmarks collected in 2013. The article provides the information as to how Ohio's physical education school programs are doing. The Physical Education Index results seems to provide evidence that every 7 out of 8 programs (87%) in the state are doing an acceptable job. As those attending the 2013 Convention Awards Reception experienced, Ohio's pathfinder women in sport were honored with the Legacy Award. Jackie Cuneen describes this group of women on page 5. See how many you know and how many touched your life. A few even refuse to go away softly in the night and continue to provide their leadership and expertise to the profession and to OAHPERD.

One regular feature does not appear in the current issue. The Coaching Toolbox column will take a short break with a promised return in the Fall/Winter issue.

President Bechtel and Executive Director Weidman share many of the accomplishments and points of pride of the past year for OAHPERD. I think we believe this current issue is very representative of the quality of professionals in Ohio. As a scholarly journal, the refereed articles and research note are excellent examples of what the Editorial Board sets as publication goals for *Future Focus*. So, OAHPERD members, let's keep up the submission of such quality efforts for future issues.



Save the Date

Great Convention room rate! All rooms include 4 waterpark passes! Bring your family and extend your stay.

85th OAHPERD Annual Convention

December 3–5, 2014 Kalahari Resorts, Sandusky, Ohio



For more information on the annual convention and other offerings from OAHPERD, contact Rhonda Weidman at **Rhonda@AssnOffices.com** or at 614-221-1900.



OCA/WPES 2013 Reunion

L to R: Mary Jo MacCracken, Sue Strew, Ella Shannon, Janet Parks, Sally Dellinger, Nancy Wardwell, Judy Devine, Dolores Black, Carol Thompson

As the American Alliance for Health, Physical Education, Recreation, and Dance transitions to a unified recognition program, the National Association for Girls and Women in Sport Pathfinder Award is one of the many important acknowledgments under review. The Pathfinder recognition honored those women who were instrumental in blazing paths for the future of girls' and women's sport, and the award was significant to OAHPERD's members because over the years we've learned that our Ohio Pathfinders played an essential role in the growth and expansion of sport not only in our state, but also on the national and even the international levels. Although AAHPERD/NAGWS may no longer acknowledge state Pathfinders at their annual conventions, OAHPERD's Pathfinder Committee elected to honor a special group of true pathfinders—the Ohio College Association/Women's Physical Education Section (OCA/ WPES) — at our own 2013 convention by recognizing their contributions with an OAHPERD Legacy Award.

The Ohio College Association/ Women's Physical Education Section

Finding the Path and Leading the Way for Ohio's Girls and Women in Sport

By Jacquelyn Cuneen

OAHPERD's Legacy Award, established as a special feature for schools and colleges celebrating National Girls and Women in Sports Day, recognizes individuals who enrich girls' and women's sport in their communities. The Ohio College Association/Women's Physical Education Section (OCA/WPES) not only enriched opportunities for girls and women in sport, its members truly led Ohio's girls and women into the gymnasiums and onto the playing fields. Many of the 18 NAGWS Pathfinders that OAHPERD has acknowledged over the years were members of the OCA/WPES and several of its former officers, leaders, and members attended a reunion during the 2013 OAHPERD convention at Kalahari Resorts in Sandusky.

The OCA/WPES was founded in 1924 in order to promote cooperation among physical education programs. This group of industrious, conscientious, and brave individuals also studied issues and made recommendations on state matters, such as girls' and women's basketball programs, and on global matters, such as women's participation in the Olympics. The OCA/WPES was an early provider of continued professional development as its members met annually to view teaching films and skills demonstrations. They also organized sports play days and the policies that governed them, and planned national collegiate tournaments to be held in Ohio at

a time when it was revolutionary to even consider that girls and women should participate in sports or even in rigorous physical education programs. In the meantime, the group conducted surveys on medical fees, leisure interests of college women, and administrative practices. They studied controversial issues such as competition, officiating, rules and standards, and control of women's sports. Members of the OCA/WPES continued to influence the development and direction of sport for girls and women in Ohio and the United States well into the 1980s as school and collegiate sport came under the control of those state and national governing bodies with which we associate sport today.

OAHPERD is proud to recognize the legacy of the OCA/WPES. Their accountability, commitment, and tireless efforts continue to enrich our professional and personal lives. Their ground-breaking thoughts and actions gave us a sustained model of recreational and competitive sport for Ohio's girls and women.



The Ohio Association for Health, Physical Education, Recreation, and Dance



Build A Healthier Life with the American Heart Association

Marla Thomas, HFH State Coordinator

Hoops for Heart and Jump Rope for Heart are two programs through the American Heart Association dedicated to building healthier lives free of cardiovascular disease and stroke. Both encourage regular physical activity and promote healthy eating habits.

Get yourself and your family moving by using two of our favorites: jumping rope and playing basketball. Just 30 minutes a day can help you reduce and maintain a healthy weight. Boost your recipe collection by trying one of these heart-healthy favorites from the American Heart Association.

These healthy but tasty recipes are brought to you by the American Heart Association. Look for other delicious recipes in American Heart Association cookbooks or at heart.org.





Grilled Chicken with Strawberry & Pineapple Salsa $${\rm Serves}\ 4$$

Grilled pineapple and fresh mint and strawberries combine with tangy lemon and a bit of hot pepper flakes to make an interesting salsa for grilled chicken.

Salsa

1 tsp. canola or corn oil
2 slices fresh pineapple, each ¹/₂ inch thick, patted dry
2 ts
1 cup whole strawberries (~5 oz.), diced
1/4 cup finely chopped red onion
3 to 4 Tbs. chopped fresh mint leaves
1 to 2 tsp. sugar
1/8 tsp. crushed red pepper flakes
1 medium lemon

Chicken

4 boneless, skinless chicken breast halves (~4 oz. each), all visible fat discarded 2 tsp. salt-free steak seasoning blend 1/4 tsp. salt

- 1. Preheat the grill on medium high. Brush a grill pan or grill rack with the oil. Heat the grill pan or rack on the grill for about 2 minutes, or until hot. Grill the pineapple for 2 minutes on each side. Transfer to a cutting board and let cool slightly, about 2 minutes, before chopping.
- 2. Meanwhile, in a medium bowl, stir together the remaining salsa ingredients except the lemon. Grate 1 teaspoon lemon zest, reserving the lemon. Stir the zest and chopped pineapple into the strawberry mixture. Set aside.
- 3. Sprinkle both sides of the chicken with the seasoning blend and salt. Grill for 5 minutes on each side, or until no longer pink in the center. Transfer to plates. Squeeze the reserved lemon over the chicken. Serve with the salsa on the side.



Grilled Shrimp Skewers over White Bean Salad Serves 6

Fresh herbs make all the difference in this light, summery bean salad that in turn makes an aromatic bed for the easy grilled shrimp.

1 tsp. freshly ground pepper
¹ /2 tsp. salt
2 15-ounce cans cannellini
beans, rinsed
12 cherry tomatoes, quartered
1 cup finely diced celery
24 raw shrimp (21–25 per
pound; see Cooking Tips), peeled and deveined

- Combine lemon zest, lemon juice, oil, oregano, sage, chives, pepper and salt in a large bowl. Reserve 2 tablespoons of the dressing in a small bowl. Add beans, tomatoes and celery to the large bowl; toss well.
- 2. Preheat grill to medium-high or place a grill pan over medium-high heat until hot.
- 3. Thread shrimp onto 6 skewers. (If using a grill pan, you don't need to skewer the shrimp.)
- 4. Oil the grill rack (see Cooking Tips) or the grill pan. Grill the shrimp until pink and firm, turning once, about 4 minutes total. Serve the shrimp on the white bean salad, drizzled with the reserved dressing.

Cooking Tips

To oil a grill rack, oil a folded paper towel, hold it with tongs and rub it over the rack. (Do not use cooking spray on a hot grill.)

Make Ahead: Cover and refrigerate the salad and shrimp separately for up to 1 day.



Summer Tomato, Onion & Cucumber Salad Serves 6

Think of it as the Southern counterpart to the classic Italian tomato-and-mozzarella salad. Best enjoyed at the height of summer when tomatoes and cucumbers are fresh from the garden.

3 Tbs. rice vinegar 1 Tbs. canola oil 1 tsp. honey ¹ /2 tsp. salt ¹ /2 tsp. freshly ground pepper, or more to taste 2 used to caste	 4 medium tomatoes, cut into 1/2-inch wedges 1 Vidalia or other sweet onion, halved and very thinly sliced 2 Tbs. coarsely chopped fresh herbs (e.g., flat-leaf parsley, chives and/or tarragon)
2 medium cucumbers	chives and/or tarragon)

- 1. Whisk vinegar, oil, honey, salt and pepper in a large shallow bowl.
- 2. Remove alternating stripes of peel from the cucumbers. Slice the cucumbers into thin rounds. Add the cucumber slices, tomatoes and onion to the dressing; gently toss to combine. Let stand at room temperature for at least 30 minutes and up to 1 hour.
- 3. Just before serving, add herbs and toss again.

Cooking Tip

Make Ahead: Prepare through Step 2 up to 1 hour ahead.

Wanted: JRFH/HFH Demo Teams!

Sasha Taylor, JRFH State Coordinator

OAHPERD awards a \$500 stipend to selected teams who are willing to give school assemblies to other area schools participating in JRFH or HFH. Contact Sasha Taylor, OAHPERD JRFH State Coordinator, at **sasha.taylor@bss.k12.oh.us** for details. Refereed Article

The Educational Philosophies of Pre-Service and In-Service Physical Education Teachers

By Brett Baisch, Sean X. Cai and Alan S. Kornspan

The purpose of the study was to analyze the educational philosophies of pre-service and in-service physical educators. Specifically, physical educators' beliefs toward five modern educational philosophies as they are applied to physical education were investigated. A survey was constructed to identify educational philosophies among participants. Seventy participants (35 pre-service and 35 in-service physical educators) completed the survey, responding to philosophical statements related to curriculum, instruction, and classroom management in teaching physical education. Measures were evaluated on the total mean scores of each philosophy between the two groups. Progressivism was found to be the category with the highest mean score of agreement for both groups, followed by social reconstructivism, existentialism, essentialism, and perennialism. Significant differences were found between the two groups for the philosophies of perennialism, social reconstructivism, and existentialism. Pre-service physical educators were found to be more supportive of student-centered philosophies compared to in-service physical educators.

Keywords: philosophy, teacher education, values

or some time, philosophical approaches to teaching have been incorporated into physical education teacher education (PETE) programs (Cavallini, 2006; Daniel & Bergman-Drewe, 1998). Students in these programs are often encouraged or required to develop a personal philosophy (Lumpkin, 2007), usually in the form of a written philosophy statement. Investigating personal beliefs in education is not just a common practice in PETE programs, but the process and benefits also transfer into the K-12 work setting. Employers often request that teacher candidates present their professional teaching philosophy during the interview process or include it in their job application. Additionally, a teacher's beliefs about education may become apparent during faculty meeting dis-

cussions, curricular decisions, and grading practices (Witcher, Sewall, Arnold, & Travers, 2001). Thus, being aware of one's educational philosophies and beliefs is beneficial to both pre-service PETE students and in-service physical educators. It is recommended that a philosophy be developed during one's educational preparation and modified through the course of one's teaching experience (Wuest & Bucher, 2009). This professional exercise can help physical educators understand the value of physical education, while also guiding them through curricular, instructional, and classroom management decisions.

In terms of a beginning philosophy of education statement, it is often helpful to know and identify oneself with a particular philosophy and be aware of philosophical preferences in education. The five main traditional philosophies taught in teacher education programs include: essentialism, perennialism, progressivisim, social reconstructivism, and existentialism (Wuest & Bucher, 2009). These five philosophies are divided into teachercentered philosophies (essentialism and perennialism) and student-centered philosophies (progressivism, social reconstructivism, and existentialism). For a better understanding of each philosophy in terms of curricular, instructional, and management components, see Table 1.

Recent research has investigated how a professional teaching philosophy develops. Pratt (2003) compared the effectiveness of a traditional approach to teaching educational philosophies (e.g., reading and discussion) with a

Summary of Educational Philosophies						
Philosophy	Curriculum	Instruction	Management			
Essentialism	Solely reflects the cognitive national and state content standards	The teacher is the direct transmitter of knowledge	The teacher is the locus of all classroom authority			
Perennialism	Includes activities that trace back to Greco- Roman times (dance, gymnastics, wrestling, track and field)	Direct instruction that promotes abstract thinking	Teacher centered, but very little student freedom			
Progressivism	Cooperative and problem-solving physical activities.	The teacher facilitates learning through guided-discovery	Whole class or group activities that promote communal relations			
Social Reconstructivism	Integrates social issues and promotes ethical development	The teacher facilitates learning through a whole-class consensus	Whole class or group activities that promote positive social reform			
Existentialism	ls individualized to each and every student	The teacher provides options for discovery to each student	Each student is responsible for their own learning			

TARLE 1

constructivist approach, which consisted of a web-based module including a philosophical preference survey. Pratt (2003) found that the online approach toward the development of an educational philosophy was more effective. Therefore, it may be beneficial for PETE students to utilize philosophical preference surveys to help in the development of a philosophy of education statement. Research has also explored pre-service teacher beliefs and preferences toward teaching to better understand their philosophical orientations prior to entering the profession. Ryan (2007) examined the educational philosophies of pre-service educators and found that 96% identified most with a preference toward progressivism. Similarly, Ryan (2008) surveyed 2600 pre-service education students and discovered that over 90% viewed their philosophical preference to be progressivism. The majority of the existing research that has assessed the philosophical preferences of pre-service educators

suggested that progressivism was the philosophy most pre-service teachers identified with (Minor, Onwuegbuzie, Witcher, & James, 2001; Ryan, 2007; Ryan, 2008).

Although scholars have begun to assess the philosophical preferences of educators, few studies have specifically examined the educational philosophies of physical educators. The purpose of the current study was to analyze the pre-service and in-service physical educators' preferences of five modern educational philosophies. Specifically, the current beliefs of physical educators toward the five educational philosophies as they apply to physical education were investigated. It was hypothesized that both pre-service and in-service physical education teachers would identify a philosophical preference toward progressivism. It was also hypothesized that pre-service physical education teachers would be more supportive of student-centered philosophies.

Method

Participants

Due to the fact that philosophy in education is used in teacher education and practice, the participants of the study included pre-service physical education teachers, along with employed, in-service teaching physical education teachers. Thirty-five pre-service physical education teachers enrolled in PETE programs from three different universities in Ohio participated in the study. Participants were selected and contacted via one of their PETE course instructors to complete the survey during a scheduled class time. The pre-service teachers had no full or part-time professional teaching experience. The pre-service teacher group consisted of 21 females and 14 males with a group mean age of 22.03 years and an age range from 18 to 28 years. All pre-service physical educators had completed at least one year of education. Specifically, five were student teaching, 14 completed three or more years of training, 10 completed two years of training, and six had less than two years of training.

Additionally, 35 in-service teachers from Ohio participated in the study. This group consisted of 18 females and 17 males with a group mean age of 39.53 years, ranging from 26 to 56 years. The in-service teaching participants' mean teaching experience was 14.23 years, ranging from three to 35 years. In terms of highest educational degree, 25 held Bachelor's degrees and nine held Master's degrees. Participants in this group were selected within eight different school districts and contacted by email or phone. Of the 35 in-service teachers, nine reported working in urban school districts. 12 in suburban school districts, and 14 in rural school districts.

Inventory of Physical Education Philosophies

The Inventory of Physical Education Philosophies Survey (IPEPS) was developed for this specific study. The instrument first included demographic questions regarding age, gender, PETE training, and experience teaching physical education. Three "presurvey" questions regarding opinions of effective methodologies for each of the three philosophical components were also included on the questionnaire. A total of 30 close-ended questions were set in an alternating and respective order to measure support for each of the five philosophies. Each statement was directly linked to one of the five modern educational philosophies as they were applied to physical education. Statements 1-10 dealt with the philosophical component of curriculum. The first five statements posed broad beliefs and the second five statements posed more specific beliefs of what should be taught in physical education. Statements 11-20 dealt with the philosophical component of instruction, with the first set of five statements relating to how a teacher should teach and the second relating to how students learn best. Finally, statements 21-30 focused on classroom management, with the first five statements relating to the teacher's role and the second five to the students' role. A 5-point Likert scale was used to measure participants' level of agreement to each statement. A grid was placed at the end of the 30 statements so scores could be added together and a final score for each philosophy could be determined. A final "post-test" question was placed at the end of the instrument which asked participants if their survey results related to their answers from the "pre-test" questions. This served as a qualitative method to measure the instrument's validity. See Figure 2 for a copy of the instrument.

Prior to administering the survey, the Inventory of Physical Education Philosophies Survey was pilot tested. Two pre-service physical educators, two in-service physical educators, and two PETE professionals reviewed the instrument. The reviewers were first asked to analyze the demographic questions, "pre-test" questions, each of the 30 close-ended statements, and the "post-test" question in order to provide feedback for understanding and clarity. Minor revisions were made within the 30 statements and other parts of the survey to improve face validity. The same reviewers were then asked to complete all parts of the revised instrument. After completion, reviewers used the index of physical education philosophies to determine whether the instrument was valid in their results reflecting their personal viewpoints on teaching physical education. The "post-test" question was also used as a method for establishing validity. Here, all six reviewers responded positively about the instrument's validity and no further revisions were made.

Procedures

Institutional Review Board (IRB) clearance was received from the research institution prior to participant recruitment and data collection. Participants in the pre-service group were administered the survey during part of their class time with one of their PETE course instructors. Those within the in-service group took the survey individually in their school building. Participants were first asked to read and sign an informed consent form to participate in the study. After the consent form was completed, participants were given the IPEPS. Participants first completed the demographic and "pre-survey" questions. Then, participants responded to the statements based on a 5-point Likert scale for each of the 30 statements. Participants were instructed to rewrite their responses from each statement into the corresponding box and add the scores in each column for the total score. The researchers checked these scores for accuracy during and after participants completed the survey, but no errors were found. Finally, participants completed the "post-test" question regarding if their results related to their answers in the "pre-test" questions.

Data Analysis

Data analysis was conducted through the review of total and mean scores for each philosophy among all participants within the pre-service and in-service groups. The calculated descriptive statistics included means, standard deviations, and ranges. Independent group t tests were conducted between the two groups for each of the five educational philosophies (variables) measured in this study. These five variables included the scores on the essentialism (the sum of the scores for questions 1, 6, 11, 16, 21, 26), perennialism (the sum of the scores for questions 2, 7, 12, 17, 22, 27), progressivism (the sum of the scores for questions 3, 8, 13, 18, 23, 28), social reconstructivism (the sum of the scores for questions 4, 9, 14, 19, 24, 29), and existentialism (the sum of the scores for questions 5, 10, 15, 20, 25, 30) sections of the survey.

Results

The descriptive statistics for the scores on the essentialism, perennialism, progressivism, social reconstructivism, and existentialism sections of the *IPEPS* are presented in Table 2 and graphically in Figure 1. Additionally, the results of the *t*-test which compared the means of the pre-service physical education students and inservice physical education teachers on the five subsections of the *IPEPS* are also presented in Table 2. Results



Figure 1. Compared Group Mean Scores for the five Education Philosophies

of the *t*-tests revealed significant differences between pre-service physical education students and in-service physical education teachers for their scores on the perennialism (t = -2.43, p = 0.0180), social reconstructivism (t = -4.65, p = 0.0001), and existentialism (t = -2.33, p = 0.0231) sub-sections of the *IPEPS* with the pre-service students evidencing higher mean values. No significant differences were found between pre-service physical education students and in-service physical education teacher educators on the subsection scores for progressivism and essentialism.

Discussion

The purpose of the present study was to analyze the philosophical preferences of physical education teachers and pre-service physical education teachers. Additionally, this investigation examined differences between in-service and pre-service physical education teachers' prefer-

TABLE •	2
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Descriptive Statistics and t-test Results for Pre-Service and In-Service Physical Education Teachers' Agreement with a Specific Educational Philosophy							
Philosophy	Pre-Sei Stuc M	rvice PE lents <i>SD</i>	In-Se Physical <i>M</i>	ervice Educators SD	t-test	p value	
Essentialism	14.23	2.38	14.80	3.0	0.88	.3801	
Perennialism	15.03	3.01	13.52	2.37	-2.43	.0180*	
Progressivism	23.03	2.54	21.80	2.73	-1.95	.0554	
Social Reconstructivism	20.20	2.28	17.52	2.49	-4.65	.0001*	
Existentialism	19.00	2.89	17.31	3.17	-2.33	.0231*	

ences toward an educational philosophy. Results of the present study revealed that for both the pre-service and in-service groups, progressivism was the philosophy with the highest level of agreement followed by social reconstructivism, existentialism, essentialism, and perennialism. These findings are consistent with prior research (Ryan 2007; Ryan, 2008) that found over 90% of preservice teachers strongly agreed with progressivism. Here, 86% of the respondents in the present study preferred progressivism. The results are also consistent with Erbas (2013) who found that progressivism was the educational philosophy that both pre-service and in-service physical educators most agreed with. Support for this philosophy suggests that the majority of physical educators plan to or currently teach physical activities through guided-discovery, problemsolving, and cooperative methods.

Although the results were consistent with the Ryan (2007; 2008) and Erbas (2013) studies, the findings from the present study are not in accordance with investigations that found that in-service physical educators tend to prefer reproductive, teacher/subject-centered teaching styles (Cothran et al., 2005; Cothran, Kulinna, & Ward, 2000; Kulinna & Cothran, 2003). The present study differed from these investigations in that it examined educational philosophies rather than teaching styles. Nevertheless, the present study found that student-centered philosophies of teaching physical education are more accepted than teacher-centered philosophies. This philosophy implies that physical educators place a great deal of responsibility for learning on the students to develop their own knowledge and skills in what is being taught. Significant differences between the philosophies of social reconstructivism and existentialism

suggest that pre-service teachers support student-centered philosophies more than in-service physical educators. One explanation for these findings may include the promotion of democratic classrooms, theories of multi-intelligence, and constructive theories of learning and teaching in PETE programs. Support for the philosophy of perennialism was also significantly higher in the preservice group. However, the differences of support between pre-service and in-service groups cannot be explained within the context of the current study; further investigation employing qualitative methods seems necessary to determine why these differences are present.

Future research should continue to analyze the philosophies of pre-service and in-service physical educators in order to analyze trends and other differences in philosophies within and between pre-service and in-service physical educators. Additionally, a longitudinal study similar to Ryan (2008) should be conducted to understand how physical education philosophies change over time. Teacher education programs tend to have a major impact on one's philosophy of education (DiPietro & Walker, 2004; Howard, McGee, Schwartz, & Purcell, 2000; Minor, Onwuegbuzie, Witcher, & James, 2001; Ryan, 2008). Here, philosophical preference surveys could be distributed to various PETE programs to investigate if such programs differ or are consistent in how they train their students. Finally, it is unknown how professional organizations or recent trends in education influence teacher philosophies. Data collection in this study took place prior to the implementation of the Common Core and the passing of Ohio HB 210 in regards to standards and evaluation in physical education. These recent changes may have impact upon philosophies and/ or teacher behaviors especially within in-service teachers.

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		Please answer the following questions (1) sentence):
Please c	omplete the following:	
Age:	Sex:	 What should be taught in physical education?
	Highest college degree attained	
	If none, years of study complete toward a degree and/or seniority (e.g. freshman)	2. What type(s) of instruction should be used to teach the subjects you've identified above?
	Years of professional physical education experience	 How should a physical education class be managed?
□ Yes □ No	If none, are you currently student teaching?	
	If not, estimated hours of pre- service teaching experience	

Demographic Information Form and Questionnaire

Please respond to the following statements by using the scale to enter the number that best fits your level of agreement by entering the number of the response in the blank space in front of the item's number

5	4	:	}	2	1
Strongly Agree	Agree	Neutral,	/Unsure	Disagree	Strongly Disagree
 Physical educators must body of fundamental kr physical acts. The subject matter taug 	require their students to nowledge prior to actual ht in physical education	master a set ly performing must be	11. 12.	Direct instruction or the education should alway the students. A teacher-centered app	command style of teaching phy ys be used to transfer knowledg proach should be used which
universally and historicc time and date back to a	Illy consistent, having sto ancient times.	od the test of		simultaneously promote body.	s the development of the mind o
3. The curriculum should o built around the needs, the students.	nly consist of cooperative experiences, interests, a	e activities nd abilities of	13.	The teacher should faci discovery and help stud questions, while empho	ilitate learning through guided- dents devise strategies to answe asizing social value during physi
 Social reform, the prese should be integrated int 	ervation of democracy, a to the physical education	nd ethics n curriculum.	14.	activities. Teaching should take a	ın organismic (whole class cons
5. The teacher can never instructional methods, fo	determine subject matter or lessons of physical edu	and ucation ought		approach, while incorp independent learning.	porating discovery methods of
to be individualized to6. State and national standbe the only source of ki	every student each day. dards for physical educa powledge and skills teac	ition should	15.	The teacher should faci methods to provide opt challenges and promot	ilitate learning through discovery tions for individualized learning e reflective thinking.
their students on.	program should draw fr		16.	Memorization and prace	ctice is the key to students beco
games, dances, and ot to Greco-Roman culture	her physical activities the	at trace back	17.	Students learn best by directly from the teacher	acquiring the knowledge and st er and the subject matter taught.
8. The curriculum should b and self-evaluated, prov student to use multiple p	e student-centered, self-p viding a wide variety of problem-solving technique	baced, activities for es.	18.	Students become physi involvement in real-wor experimental in an even	cally educated through active Id experiences that are relative r-changing world.
9. Physical education shou help develop social inte character, identity, and	uld consist only of activitie alligence and skills, such cooperation.	es that as control,	19.	During physical educat valuable members of so and abstract social pro	ion, students should learn to bea ociety through cooperative grou blem solving.
 Lessons should be set to self-responsibility, and s used often to help deve 	develop creativity, self- elf-realization, whereas p op these characteristics.	awareness, blay can be	20.	Students learn through answers of truth) as the activity or experience h	subjectivity (creating personalize y personally determine the value iolds for them.

5	4	3		2	1
Strongly Agree	Agree	Neutral/Unsure	;	Disagree	Strongly Disagree
21. The teacher is the center o 22. The teacher is the center o promotes abstract thinking	all classroom autho all classroom autho and performance.	prity	_26.	Students should have very teacher should expect effort them.	little freedom in their learning ort, self-control, and discipline
23. The teacher should attemp or a microcosm of the larg of students in social relatio	to form democratic er society and monit ns and interactions.	communities or the success	_27.	Students should only be a when the teacher is satisfi base and fundamental ski	sked to think and perform absi ed with their students' knowled Ils.
24. The teacher should explore alternate perspectives, and	social problems, su facilitate student an	ggest alysis of these	_28.	Students must participate and social interactions thre	n democratic class decision-m ough whole class/group activi
25. The teacher must emphasize of human choice while pla learning on the students.	activity. e personal volition c cing all responsibility	and emotions / toward	_29. _30.	students must work in gro positive ideals and opinic relationship to society. The students should be res	ups with the goal of forming ns of physical activities and the sponsible for their educational

___30. The students should be responsible for their educational involvement and in control of the curriculum and methods when selecting activities provided by the teacher.

Write your responses from each statement into the corresponding box and sum the scores from within each column to get your total score for each philosophy.

Essentialism	Perennialism	Progressivism	Social- Reconstructivism	Existentialism
1.	2.	3.	4.	5.
6.	7.	8.	9.	10.
11.	12.	13.	14.	15.
16.	17.	18.	19.	20.
21.	22.	23.	24.	25.
26.	27.	28.	29.	30.
Score:	Score:	Score:	Score:	Score:

Index of Physical Education Philosophies

Please answer the following question: How did your results and the defined philosophical components as stated in the table on the right relate to your answers from questions 1–3 of the demographic information questionnaire? *Scores at or above 20 indicate strong agreement, and scores at or below 12 indicate strong disagreement toward a particular educational philosophy.

Philosophy	Curriculum	Instruction	Management
Essentialism	Solely reflects the cognitive national and state content standards	The teacher is the direct transmitter of knowledge	The teacher is the locus of all classroom authority
Perennialism	Includes activities that trace back to Greco-Roman times (dance, gymnastics, wrestling, track and field)	Direct instruction that promotes abstract thinking	Teacher centered, but very little student freedom
Progressivism	Cooperative and problem-solving physical activities.	The teacher facilitates learning through guided-discovery	Whole class or group activities that promote communal relations
Social Reconstructivism	Integrates social issues and promotes ethical development	The teacher facilitates learning through a whole-class consensus	Whole class or group activities that promote positive social reform
Existentialism	ls individualized to each and every student	The teacher provides options for discovery to each student	Each student is responsible for their own learning

Figure 2. (continued)

Refereed Article

Physical Education Teachers' Perceptions and Teaching Practices Regarding Disordered Eating Behaviors in High School Students

By Mary E. LaVine, Amy Thompson and Dianne Kerr

This investigation assessed physical education teachers' perceptions and teaching practices regarding disordered eating behaviors. Surveys (N = 700) were mailed to a random sample of high school physical education teachers. The 24-item previously validated survey utilized several theoretical constructs including the Health Belief Model and the Stages of Change Model. Descriptive statistics provided demographic characteristics as well as current teaching practices. A 52% (N = 362) response rate was achieved. Nearly half (45%) of respondents agreed that physical education teachers should provide disordered eating behavior education, yet 60% currently do not. One fourth (25%) of respondents indicated disordered eating was a problem in their school. Many respondents (63%) could confidently refer students to receive help for disordered eating but only 39% indicated they had a cooperative referral plan. Findings delineate the perceived importance of disordered eating in high schools and the role physical education teachers can play in prevention.

Key Words: eating disorders, youth, physical education teachers

ccording to the American College of Physicians, disordered eating is one of the nine most serious problems affecting adolescents today (DeBate, Tedesco & Kerschbaum, 2005). Disordered eating is very present in Westernized countries because of the social emphasis placed on being thin (Gurenlian, 2002). In fact, disordered eating behaviors are the third most prevalent chronic illness in adolescents, following obesity and asthma (Aime, Craig, Pepler, Jiang & Connolly, 2008). The pressure placed on young people to be thin is reflected in teenage use of unhealthy weight control methods such as fasting, vomiting, use of laxatives, and smoking; more than one-half of teenage girls and about one-third of teenage boys report smoking to lose weight (Neumark-Sztaine, 2005). The most recent Centers for Disease Control and Prevention's Youth Risk Behavior Survey (CDC, 2011)

revealed 4.3% of students reported vomiting or taking laxatives to lose weight or to keep from gaining weight during the 30 days before the survey. In addition, 5.1% of students reported taking diet pills, powders, or liquids to lose weight or keep from gaining weight during the 30 days before the survey. Finally, 10.6% of students did not eat for 24 or more hours to lose weight or to keep from gaining weight during the 30 days before the survey (CDC, 2011). Societal preference for thinness has also affected younger age groups. The National Eating Disorders Association (2005) reported that almost half (42%) of 1st through 3rd graders want to be thinner, and 81% of 10 year olds are fearful of being fat.

Research has demonstrated that disordered eating behaviors may be more common than previously thought. These behaviors can range from intentional starvation to purging type behaviors and are estimated to be more prevalent than actually reported because they may not fit into specific diagnostic criteria such as those required by the American Psychiatric Association's (APA) DSM IV-TR (APA, 2000; Austin, 2000; Hunt & Rothman, 2007). Also, because of the private, sensitive nature of the subject, many eating disorders go undiagnosed. (American Dietetics Association, 2001). It is estimated that over ten million Americans suffer from either bulimia or anorexia (Ritter, 2006). Anorexia is diagnosed in about 0.5-1% of the population over a lifetime. and bulimia is diagnosed in up to 4% of the population over a lifetime (Hunt & Rothman, 2007). Those most at risk are white, middle-toupper class, adolescent females (ages 14-18; Gurenlian, 2002). About 40-50% of patients with anorexia are also bulimic (Little, 2002).

The vast majority (85%) of people with disordered eating/eating disorders develop the disorder during adolescence (American Dietetics Association, 2001). Adolescents and teens spend much of their time at school and involved in school related-activities. This age group in particular is self-critical and has a desire to appear attractive to their peers. Socialization to be thin and the peer group pressures of thinness are strong determinates of disordered eating behaviors. These strong socializing factors can prove too daunting for adolescents and teens, especially if they place more importance on "fitting in" than just being comfortable with their own self-image. Because of these reasons, one potential environment for disordered eating behaviors to manifest is in the physical education classroom setting. The physical education type of environment provides an opportunity for adolescents to compare their body type to that of their peers, which can lead to a negative body image. Peer-related pressures to be thin coupled with societal messages encouraging thinness could potentially influence a student with poor body image to engage in disordered eating/eating disordered behaviors, in order to attempt to achieve a desired state of thinness. Additional pressures in this setting include changing clothing in front of peers for class, and competing in class activities, which may include fitness-related activities.

Physical education teachers have a unique opportunity to recognize signs and symptoms of eating disorders, positively influence disordered eating behaviors, and intervene with students that have a negative body image. Gard (2003) studied PE teachers in the United Kingdom and found that many reported opening discussions with their students when the students expressed concerns. Adolescents who exhibit eating disordered behaviors should be taken seriously because these students are considered at risk for developing the full eating disorder syndrome and therefore should be closely monitored (Aime, Craig, Pepler, Jiang & Connolly, 2008). Overall, most studies have focused on the health educators' role in addressing student responsibility for making health behavior choices or mainly on the obesity epidemic.

There has been little research conducted examining the extent that disordered eating and eating disorders are monitored and addressed in the school setting. In a study conducted by Thompson, Smith, Hunt, & Sharp (2006) school health teachers' teaching practices and perceptions regarding disordered eating were determined. Their study found that although many health teachers felt teaching about disordered eating prevention is as important as any other health issue, 25% were not providing information on this issue. Moreover, only 45% felt that disordered eating was a problem in their schools. In another study, a female physical educator taught a nutrition class to 15 and 16 year old female students and found although the students were more at risk for eating disorders, teaching and learning about how to avoid being fat were considered more important (Cliff & Wright, 2010). In another study, an eating disorder prevention program for 8-14 year olds was piloted with more than 500 girls. Results indicated positive changes in girls' body image, body satisfaction and body esteem for 6 months post program. These factors are important because they are risk factors for developing eating disorders (Sjostrom & Steiner-Adair, 2005). Although this study was with younger girls, promising studies with older girls appear to be lacking,

as many studies are aimed at obesity prevention rather than disordered eating. The present study was designed to determine to what extent physical education teachers believe disordered eating is problematic and if prevention-based strategies are being taught in their respective classrooms.

Methods

Participants

A directory of public schools (N = 96,570) was obtained from the United States Department of Education. Only schools identified as traditional senior high schools (grades 9–12) were selected for possible inclusion in this study. The list was further reduced by eliminating schools that were at the upper and lower population extremes (± 2 standard deviations from the mean). The resulting population (N = 5,511) was used to select a random sample of senior high schools from all 50 states.

A power analysis was conducted to determine adequate sample size. With a potential population size of 5,511 and expecting that there will be limited variability in the responses of this population, an 80/20 split was used, with a sampling error of $\pm 5\%$, at the 95% confidence level; estimates can be made with a sample size of 305 participants. The 80/20 split refers to sampling to achieve power for statistical testing. This a common measure used in the literature. It assumes that about 80% of the PE teachers would answer the survey similarly. To account for possible non-respondents and undeliverable addresses, 700 high schools were randomly selected from the US high school directory (www.directory ofschools.com\highschools\us.html) data base. All surveys were mailed to the attention of the physical education teacher.

Instrument

The questionnaire used for this study was previously used to assess high school health teachers' teaching practices and perceptions regarding disordered eating in students. The questionnaire was modified for this study to be used with physical education teachers. This survey has been previously validated and found to be reliable (Thompson, Smith, Hunt & Sharp, 2006). Limitations of the survev research include self-reporting inaccuracies. Other threats to internal validity of such research include instrumentation and the loss of subiects due to low return rates.

The four-page questionnaire consisted of 24 items; 16 items assessed teaching practices or activities related to disordered eating (methods of delivery, current practices); 7 items assessed the role of the school or physical educator in addressing the problem of disordered eating behaviors in vouth (e.g., should school health educators educate on this issue, presence of a cooperative referral plan for identification and treatment); 1 item assessed teachers' perceptions of the prevalence of disordered eating in the their school: and 7 items assessed demographic variables (i.e., sex, years in teaching, level of education, whether the school had a Coordinated School Health Program).

The response formats utilized for the majority of the questionnaire were a 5 point Likert –type scale (strongly disagree to strongly agree) or other closed format items (yes/ no/unsure, check all that apply). Several theoretical models were utilized in the development of the questionnaire. Use of Stages of Change (Prochaska & DiClemente, 1983) identified if physical educators had not seriously thought about teaching a unit on disordered eating (precontemplation), if they have informally considered teaching a unit on disordered eating but have no plans to begin such a program (contemplation), if they plan on teaching a unit on disordered eating behaviors by the next school year (preparation), if they have been teaching a unit on disordered eating behaviors

PE teachers have a unique opportunity to recognize signs of eating disorders, positively influence disordered eating behaviors, and intervene with students that have a negative body image.

for one school year or less (action), or if they have previously taught a unit on disordered eating behaviors in the classroom but no longer do so (termination). The second behavioral model utilized was the Health Belief Model (Rosenstock, Stretcher, & Becker, 1988). Behavior change is more likely to occur when perceived benefits outweigh perceived barriers to change. In this case, teachers were asked to identify some of the positive benefits of teaching students about disordered eating and some of the barriers for incorporating this material into the classroom.

The third behavioral construct utilized was self-efficacy. Self-efficacy is the confidence a person feels about performing a certain behavior or activity, and also includes confidence in overcoming barriers to perform that behavior (Glanz, Rimer & Lewis, 2002). The current study assessed physical education teachers' self-efficacy in teaching students five topics related to the prevention of disordered eating and six outcome expectations related to the prevention of disordered eating behaviors.

Procedures

Multiple techniques were utilized to increase the response rate of the study (Summers & Price, 1997). To maximize returns, questionnaires were sent through the mail using a two-wave mailing one week apart, a hand-signed cover letter, a selfaddressed stamped return envelope with first-class postage stamps, and a one dollar incentive. The survey was printed in a booklet-style format on green paper. Prior to sending out the survey, approval was granted from the University Human Subjects Review Committee.

Data Analysis

Survey data were entered into the computer using SPSS 16.0. Descriptive statistics (frequencies, range of scores, means, and standard deviations) were utilized to describe respondents in terms of their demographic and background characteristics, as well as current teaching practices.

TABLE • 1

Demographics Background Chara of Responding Te	and cteris achei	tics rs
Demographic	n*	%
Race/Ethnicity Caucasian African American Hispanic Asian/Pacific Other	332 15 12 3 4	90 4 3 1 1
Sex Male Female	195 173	53 47
Level of Education Bachelor's Master's Beyond Master's Degree	115 195 57	31 53 16
Location of School Urban Suburb Rural	93 116 152	25 32 42
Coordinated School Health Program Yes No Unsure	104 113 150	28 31 41
Years of Teaching 1–5 6–11 12–16 17+	38 74 71 182	10 20 19 50
Certified in Primary Teaching Area Yes No	363 5	99 1

* N = 368; sums less than 368 due to missing responses

Results

Demographic and Background Characteristics

A total of 700 surveys were mailed to a random sample of high school physical education teachers in the United States. A response rate of 52% (n = 362) was achieved (see Table 1). Of the respondents, most were Caucasian (90%) and a majority were male (53%). Over half (53%)

TABLE•2

Perceived Self-Efficac on Disor	ormation	
ltem	Strongly Agree/ Agree n* (%)	Strongly Disagree/ Disagree n (%)
Efficacy Expectations: I feel qualified to teach	n my students	
the different types of eating disorders behaviors.	283(77)	55(6)
how to recognize eating disorders.	279(76)	45(12)
the differences between good and bad nutrition	360(98)	2(1)
about psychological factors that may accompany disordered eating.	234(64)	72(20)
where to go for help.	284(78)	32(9)
Outcome Expectations: By instructing my stuc	lents about	
the different types of disordered-eating behaviors, their chances of developing a disorder will decrease.	197(54)	33(9)
recognizing potential disordered eating behaviors, their chances of developing a disorder will decrease.	226(61)	34 (9)
proper eating habits, their chances of developing a disorder will decrease.	261(71)	33(9)
the differences between good and bad nutrition, their chances of developing a disorder will decrease.	257(70)	33(9)
the psychological factors that may accompany disordered eating, their chances of developing a disorder will decrease.	219(59)	25(7)
places to receive help for a disordered- eating behavior, their chances of developing a disorder will decrease.	210(57)	51(14)

* N = 332; respondents could check all choices that applied

of the teachers had earned their Master's degree and an additional 16%. had received education beyond their Master's degree. More of the high schools were located in rural areas (42%) than urban or suburban areas (25% and 32%, respectively). Half of teachers surveyed had been teaching for 17 years or longer (50%) and almost all (99%) were certified in their primary teaching area.

Perceived Self-Efficacy in Teaching Information on Disordered Eating

Teachers answered questions on perceived self-efficacy and expectations regarding teaching students about eating disorders. Most (77%) of the teachers agreed or strongly agreed that they felt qualified to teach their students the different types of eating disorder behaviors

TABLE	•	3
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natio	n on
n	%
119	32
39	11
17	5
146	40
38	10
	n 119 39 17 146 38

n = 368

(see Table 2). Three-quarters (76%) of teachers agreed or strongly agreed that they felt qualified to teach their students how to recognize eating disorders. Almost all (98%) of the teachers who responded agreed or strongly agreed that they felt qualified to teach their students the differences between good and bad nutrition. The majority of teachers felt qualified to teach their students about psychological factors that may accompany disordered eating (64%) and where to go for help (78%).

Teachers were also asked about outcome expectations of instructing students about eating disorders. A majority of teachers agreed or strongly agreed that by instructing their students about disordered eating concepts, their students' chances of developing a disorder would decrease (see table 2).

Teachers' Stage of Change Regarding Teaching Information on Disordered Eating

About a third (32%) of teachers (see Table 3) reported that they have not seriously thought about teaching a unit on disordered eating in their classroom by the next year (precontemplation phase). About a tenth of teachers (11%) reported informally considering teaching a unit on disordered eating in their classroom in the next year (contemplation phase). Few teachers (5%) were currently planning to teach a unit on disordered eating in their classroom by the next year (preparation phase). Forty-percent of teachers have been teaching a unit on disordered eating in their classroom for one year or less (action phase). One-tenth (10%) of teachers have previously taught a unit on disordered eating in their classroom but no longer do so (relapse phase). Perhaps this is because health teachers are often teaching this topic. However, physical education teachers could certainly serve as resource and referral sources.

Perceived Benefits and Barriers to Teaching Disordered Eating

Participants were asked to identify perceived benefits and barriers to teaching about disordered eating in the classroom (see Table 4). The participants answered these two items by selecting benefits and barriers. Benefits to teaching about disordered eating include increasing awareness of disordered-eating behaviors; decreasing health complications associated with disordered eating; identification of students with disordered-eating behaviors and decreased disordered eating behaviors. Almost half of the teachers perceived no barriers to teaching students about disordered eating behaviors. However, of the barriers that were identified, teachers felt that there is not enough time to educate

TABLE • 4

- 4	CONTRACTOR AND AND ADDRESS OF	A CONTRACTOR OF A CONTRACTOR OFTA CONTRACTOR O	ET CALLES CONTRACTOR	The second s	NAME OF CARLONN PARTY OF	ALL ALL STREET AND PLACE	Contractor of the local
2	ercevecit	senetits and		C Pro A MA	a BH DI CTATZA		J a Y a Highl
	CLICICIA CLIPL		THE ACTURE OF THE OWNER		- REALAND	- A BEALL	ALLAN 1998
					CONTRACTOR AND ADDRESS OF ADDRESS		And the second s

Item	n *	%
Benefits There are no benefits. Decreases health complications associated with disordered eating Increases awareness of disordered-eating behaviors Decreases disordered eating behaviors Identification of students with disordered-eating behaviors	1 176 337 157 173	≤1 48 92 43 47
Barriers There are no barriers. There is not enough time to educate students on eating disorders. There are not enough financial resources available. My school would not approve of me educating students on disordered eating patterns.	167 115 <i>77</i> 3	45 31 21 ≤1
Parents would not approve Students would not be receptive to the information.	9 46	2 13

* n = 368; respondents could select more than one benefit or barrier

students on eating disorders. Lack of financial resources, and concern that students would not be receptive to the information, were also reported barriers to teaching about disordered eating in the classroom.

Discussion

Physical educators are in a unique position to identify students with eating disorders because they will have all students in class at one time or another and are responsible for observing student performance. Many physical educators are dual licensed and also coach. According to the National Eating Disorders Association (2005), coaches can play a significant role in leading a student into treatment. Coaches of particular sports such as women's gymnastics and men's wrestling should be particularly alert to the possibility of eating disorders (http://www.nationaleating disorders.org/information-resources/ educators-and-coaches.php).

Physical education or sports attire (e.g. swimsuits, running tights, gymnastic leotards, aerobic suits and more) may make it easier to observe body issues such as excessive thinness. In some physical education settings the physical educators will compute student BMI's, increasing the chances that they will be able to identify students who are underweight or may be affected by anorexia nervosa. However, those with bulimia are not typically underweight, so these students may go undetected through simple observation or BMI computation. In addition, many schools no longer require students to dress for physical education; they only recommend it and students tend to dress in oversize clothing, making observational assessments even more difficult. Other clues may be apparent such as a student's unrealistic or poor body image, or describing themselves as overweight even though their weight does not differ significantly from their peers. They may also begin to wear clothes that are large in an attempt to hide the disordered behavior. Teaching about this issue may lead students to reveal that they have tried or are currently practicing the binge/purge behaviors found in bulimia nervosa or the selfstarvation or excessive exercise rituals practiced in anorexia nervosa.

Nearly all physical education teachers in this national sample felt qualified to teach about nutrition and disordered eating. This may be because the Centers for Disease Control and Prevention (CDC) has identified nutrition as one of the six critical health behaviors that contribute to the leading causes of death among adults and youth (CDC, 2011). Typically, however, more emphasis is placed on healthy eating than disordered eating. That may be why 98% of our respondents agreed that they felt qualified to teach the difference between good and bad nutrition and only 64% felt gualified to teach the psychological factors that may accompany disordered eating. These respondents may realize that eating disorders are psychological in nature and do not feel qualified to address psychological issues with students.

It also may be more likely that respondents have received some instruction in nutrition as a physical education teacher than in eating disorders. Over three-fourths of the teachers felt qualified to teach about eating disorders and referral networks for help with such disorders. Half of the teachers had either taught about eating disorders in the past year or had formerly taught the topic, while a third of teachers had not even thought about teaching about eating disorders. Since eating disorders are often thought of as a health topic, physical educators that do not teach health may feel it should be or is being taught in the health education curriculum. Although there should be some overlap in content related to physical activity and health, the truth is many teachers stay close to only their specific content area and do not collaborate with colleagues to teach content in an integrated manner. Studies have concluded that the ability to teach health in the physical education culture has been absent or impaired. Further, it has been determined that many PE classrooms are sport contexts with no connection to health issues, such as eating disorders, sexism, racism, etc. (Evans & Davies, 2003; Manley, Rickson, & Standeven, 2000). Other researchers found PE pedagogies consider health an individual responsibility, while addressing content for engagement of health-related physical activities as a means to combat obesity (Gard, 2003). This may reflect the third of respondents who stated they had not even thought of teaching about disordered eating. On the other hand, many school districts hire teachers with dual majors (health and physical education). These teachers may be teaching the topic as part of their current health and physical education teaching position but often wait until students enter the health education unit (typically in tenth grade) before teaching about nutrition or disordered eating.

The high percentage of teachers in the present study that currently or formerly taught about disordered eating may relate to the age or experience of these teachers since over half of them had taught for over 17 years and dual majors (HPE) were the norm in the past. In addition, 42% of respondents indicated their high school was in a rural area where it may be more likely to have one high school HPE teacher rather than two separate teachers (health educator and physical educator) in order for the school district to save money.

Overall, the teachers felt that teaching about disordered eating would be helpful both in terms of increasing awareness about eating disorders and potentially identifving students with the disorders. About half felt there were no barriers to teaching this topic while about a third cited a lack of time as the major barrier. The Joint Committee on National Health Education Standards recommends that students in grades 3-12 receive 80 hours of instruction in health per academic vear (Joint Committee on National Health Education Standards, 2007), yet many states require only one "unit" of health education and one unit of physical education for graduation. One unit may be a semester of instructional time or less. Time constraints mentioned by the teachers may be due to this small amount of instructional time and the need to prioritize state mandated topics leaving little time for educational integration of relevant topics such as disordered eating. In 2006, only 2.1% of high schools offered daily physical education the entire school year (Lee, Burgeson, Fulton, & Spain, 2007) and many others have eliminated physical education to make more time for Federal mandates such as No Child Left Behind (www2.ed .gov/policy/elsec/leg). In addition, many students simply skip physical education classes or try to use other means to opt out. The 2011 Youth Risk Behavior Survey (YRBS) results indicated only 56.4% of students attended physical education classes on 1 or more days in an average week when they attended school (CDC, 2011). This lack of physical education classes limits opportunities to intervene with students that may have eating disorders.

Currently, according to the National Association of Sport & Physical Education (NASPE, 2006), more and more secondary schools are eliminating physical education or severely limiting it. Physical education programs are often not regarded as important in the total school curriculum. In an attempt to survive budget cuts and tap into current federal funding streams, more focus has been put into the obesity epidemic yet time constraints for physical education and health education have made it extremely difficult to address adequately not only the obesity epidemic but the full spectrum of eating disorders as well as other health topics.

Physical educators are being required to develop and present meaningful content, with a variety of opportunities for students to learn. Physical education standards established by the NASPE combine knowledge and performance competencies (NASPE, 2006) into 6 standards. These standards were created to guide curricular development and illustrate the academic qualities that are enhanced through physical education. However, limited instructional time and having to assess and achieve target levels in these standards makes it very difficult to add integrated content areas like disordered eating.

Conclusion

Physical education teachers and coaches need to be keen observers of student behaviors as these behaviors are major clues to student health and disease states. Increased requirements for physical education would enable physical educators to better address disordered eating and other observable health behaviors. In an ideal educational setting, physical education and health education would be treated as core content areas along with other curricular topics with the goal of educating the whole child in an integrative fashion. Ideally, schools would have a coordinated school health program wherein these issues are addressed by a team of professionals including a school nurse and psychologist as well as the teachers. The coordinated school health program should be connected with the school's wellness policy. Wellness policies are required of schools that participate in the National School Lunch Program. (http:www.fns.usda .gov/tn/local-school-wellness-policy -requirements). However, the emphasis on nutrition in these programs appears to be to reduce childhood obesity rather than eating disorders (USDA, 2013).

It is clear from the current study that the majority of physical education teachers feel qualified to address disordered eating to help to raise awareness of the topic, recognize eating disorders, and make appropriate referrals. These teachers only need the time and resources to effectively address the issue.

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Ohio Physical Education Evaluation Report Card Data 2013

By Kevin Lorson and Stephen Mitchell

Ohio Senate Bill 210 (Healthy Choices for Healthy Children Act) has required local school districts to collect physical education assessment data for each of the Ohio Physical Education Standards and Benchmarks. The data is then to be reported to the Ohio Department of Education. Data were collected from 3,130 local school report cards in 2012–2013 school year. The results indicated that a majority of schools scored in the moderate category (85.36%) of the Physical Education Index.

hio is one of the few states to have the following: a) physical education standards, b) aligned assessments, c) requirements to submit assessment data to the Department of Education, d) ratings of performance for the physical education assessments on each school's and district's report card, and e) a model curriculum to support the implementation of quality physical education. Beginning in 2012–13, Ohio schools are required to report progress towards the achievement of the Ohio Physical Education Standards each year. Ohio Senate Bill 210 (Healthy Choices for Healthy Children Act, 2010) requires a report card indicator with four components that appear on each school's Local Report Card. The four components include: Score on the Physical Education Index (PEIcalculated from the physical education assessment data), and three Yes/ No indicators of: a) compliance with local wellness policy, b) participation in Body Mass Index screening, and c) participation in a physical activity

pilot program in which all students (grades K-12) in the district receive 30 minutes of daily physical activity excluding recess. The key component of the report card indicator for physical education teachers is the PEI since this statistic represents teachers' efforts to assess their students' learning relative to the Ohio Physical Education Standards, Benchmarks and Indicators. Summary data have been provided by the Ohio Department of Education and the purpose of this research note is to summarize the statewide data for the 2012-13 school year.

Ohio Senate Bill 210 (SB 210) Assessment and Reporting Requirements

Ohio SB 210 outlined the guidelines for the collection and submission of physical education assessment data to be used for the PEI. Districts were required to upload physical education data to the Education Management Information System (EMIS) by the June 2013 deadline. Though the data are used to determine the school's rating on the indicator, the physical education rating is not a high-stakes rating that impacts the school's overall rating on the Ohio Department of Education Report Card. In addition, the physical education assessment data are not high-stakes for students and do not impact promotion to the next grade level (Ohio Department of Education, n.d.).

Districts must collect and report data for student progress towards achieving the physical education benchmarks. Benchmarks are grade band (K-2, 3-5, 6-8, 9-12) outcomes and within each grade band there are performance indicators at each grade level. There are six PE standards and two grade band benchmarks (A and B) for each standard. This gives a total of twelve assessments and ratings in each grade band. Schools do not have to report data to EMIS for each student every year; rather they must collect student performance data for each benchmark once during the grade band. Local school districts decide the best opportunity to assess students within a grade band, though

it is recommended that assessment be done as far as is possible in the "end of grade band" year (2, 5, 8, or last semester of high school physical education) since the assessments are based primarily on that year's performance indicators. Districts were not permitted to waive out of this data-reporting requirement (Ohio Department of Education, n.d.).

The assessment system is based on a three-level rating system of Advanced, Proficient and Limited. Student learning is assessed for each benchmark using specific tasks and rubrics provided within the ODE Evaluation Instrument (Ohio Department of Education, 2012). Student scores for each benchmark are recorded in the ODE Excel file (Ohio Department of Education, 2013). The ODE Excel file then automatically calculates an overall average score across the benchmarks for each student on the "student totals" page as Advanced (3.0-2.7), Proficient (2.69-1.75) or Limited (<1.75). This overall score is then used to determine the number of advanced, proficient and limited students in the school. The number of advanced, proficient and limited students is then used to determine the school's composite score of high, moderate or low on the school's report card. The following formula was used to calculate the PEI: $[(3 \times Number]$ of Advanced) + $(2 \times \text{Proficient}) +$ $(1 \times \text{Limited})]/(\text{Total # of Advanced})$ Proficient and Limited students). A high score is 3.0-2.7, moderate 2.69-1.75 or low is less than 1.75.

Method

Data collection. Data were collected from the schools' scores on the ODE Report Card 2013. This rating was based on the benchmark assessment data reported to ODE in June 2013. The most recent report card can be found at http://reportcard.education. ohio.gov. Schools that are a part of the state report card system including public and charter schools are required to report data. A total of 3,130 Ohio schools were included in this data set.

Results

Table 1 summarizes the distribution of scores for the 2012–2013 year. Overall, 86.86% of Ohio's schools were successful in meeting the Ohio Physical Education Standards. A majority of schools scored in the moderate category (85.36%). Only 441 schools out of 3,130 received "low" ratings for 2012–13.

TABLE • 1

Number of schools in each level of performance on the Ohio Physical Education Evaluation Instrument

Level	# of Districts	%
High Moderate Low	47 2672 411	1.5 85.36 13.14
Total	3130	100

Implications

The 2012–13 data marked the first time student progress towards each of the Ohio Physical Education Benchmarks was reported to the Ohio Department of Education and appeared as an indicator on the Local Report Card as the PEI. Teachers and administrators are encouraged to visit their school's Local Report Card to view their school's PEI. Upon reviewing the data, administrators might want to consider program revisions to facilitate greater success for their students on the assessments. The benchmark summary totals sheet in the ODE Excel file (Ohio Department of Education, 2013) might be the most useful tool to make specific curricular changes to impact performance; this can be found within the ODE Excel file. Grade band summary data is provided on each assessment. Reflecting upon the assessment data, teachers and programs can continue to explore strategies to modify the curriculum and curriculum delivery to have a positive impact on student learning in physical education.

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- **4.** Only single-author articles will be considered.
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The Ohio Association for Health, Physical Education, Recreation, and Dance is accepting credentials from all candidates who qualify for the "OAHPERD Scholar" award. The OAHPERD Scholar designation will recognize OAHPERD's research leaders by honoring their achievement in HPERD-related scholarship disseminated through OAHPERD. The OAHPERD Scholar designation is intended to (a) be one of distinction within OAHPERD and Scholars' own academic communities, and (b) encourage high standards of research and other forms of scholarship among OAHPERD's members.

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Robert Stadulis, *Future Focus* Editor College of Education, Health & Human Services 263 MACC Annex Kent State University Kent, OH 44242

Articles for *Newsline*, OAHPERD's newsletter, should be submitted by December 15 for the Spring issue and by June 15 for the Fall issue. Address all *Newsline* articles to:

Rhonda Weidman Executive Director, OAHPERD Email: Rhonda@assnoffices.com or 17 South High St., Ste. 200 Columbus, OH 43215



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