



## This Issue's Highlights

BEST PRACTICES

CONVENTION SCHEDULE AND  
INFORMATION

REFEREED PAPER  
Treating Fibromyalgia with  
Complementary and Alternative Medicines

# LAHPERD Journal

FALL 2012  
VOLUME 76 | NUMBER 1



Louisiana Association for Health, Physical Education,  
Recreation, and Dance  
[www.lahperd.org](http://www.lahperd.org)

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## PRESIDENT'S MESSAGE

### PRESIDENT'S MESSAGE

Charity Bryan  
University of Louisiana at Lafayette

Your LAHPERD Board, along with journal editor Dan Denson, sincerely hope you enjoy this edition of the LAHPERD Journal. As you are well aware, we are in the midst of finalizing our 2012 convention program as we “Geaux the Extra Mile.” I hope that as you read the LAHPERD Journal, you too will be inspired to Geaux the Extra Mile in both your professional and personal lives.

Louisiana, like most states, is in a critical situation regarding childhood overweight and obesity issues. As a profession, we can work to alleviate these conditions, though we all know that it takes a multifaceted approach to tackle such complex problems as childhood overweight and obesity.

As LAHPERD Geauxs the Extra Mile, let's work together to be part of the solution to this epidemic. If each LAHPERD member were to take on one additional event or activity in the upcoming year, we would start on a journey to raising awareness and helping our K-12 school children. Perhaps you may want to consider adding a “Let's Move in School” (LMIS) event at your school. AAHPERD has many resources available to help physical educators who may want to host a LMIS event (<http://www.aahperd.org/letsmoveinschool/>). Maybe a Family Fun Night at your school would be just the spark a young family needs to become more active together. There are numerous ways to reach out to parents, students, and school staff. I hope you will consider taking a personal pledge to “Geaux the Extra Mile” for the students and families in your school or workplace.

The LAHPERD Journal is full of outstanding research conducted by our very talented LAHPERD members. Remember, the Convention will also have the latest research findings brought to you by our outstanding scholars from across the state. There will also be poster presentations with research findings at the convention.

Be sure to pre-register for the pre-convention workshop on Wednesday, October 31, at Episcopal High School in Baton Rouge. Then, make plans to join us Thursday, November 1, and Friday, November 2, at the Crowne Plaza in Baton Rouge. The convention program is packed with activity sessions, research presentations, student sessions, socials, and the Thursday Night GEAUX PARTY! We will also host many special guest speakers from around the Southern District AAHPERD.

Enjoy this latest edition of the LAHPERD Journal and join us for the Convention as we **Geaux the Extra Mile!**

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## BEST PRACTICES

### MOVING IN SCHOOL

JiJi Jonas, NBCT  
Joanna Faerber, NBCT

Most of the time we write about best practices as it relates to your physical education classes, but let's think about best practices in a different way this time.

How about best practices as it relates to your fellow teachers? We believe that sharing ideas, concepts, and activities with your co-workers should be considered a best practice. Many times, physical education teachers are looked upon as not real teachers. Being able to share activities and concepts that will help children stay better focused and have the possibility of helping them make better grades will raise your status in the school setting. Please tell your fellow teachers about “Moving in School” and the importance of having their students participate in 60 minutes of physical activity each day.

Physical activity breaks during the school day provide children and youth with opportunities to be active and take a break from sedentary activities in the classroom (e.g. sitting, reading). These breaks can increase daily physical activity levels of youth and leave them more focused and ready to return to their academic studies.

Integrating physical activity into classroom learning provides another opportunity to infuse meaningful activity during the school day. Physical activity in the classroom helps activate the brain, improve on-task behavior during academic instruction time, and increases daily in-school physical activity levels among children. Classroom teachers have the potential to influence children's healthy behaviors and lifetime choices by including bouts of physical activity into the total learning experience and, in turn, maximize student learning



during academic activities that are mostly sedentary.

Visit "Let's Move in School" on the AAHPERD Web site

(<http://www.aahperd.org/>)

to sign up and find activities to share with your fellow teachers.

## FEATURED ACTIVITIES

### *Stop and Scribble*

*Grade Levels: 2-5*

*Formation: Standing at desks with partners*

*Equipment: Piece of paper and pencil for every two students*

1. Teacher calls out physical activity (others may be added):
  - Jumping
  - Twisting
  - Jogging
  - Jumping Jacks
  - Hopping
  - Knee lifts
  - Playing air guitar
  - Marching
2. Students begin activity and continue until the teacher calls out a spelling word.
3. Students freeze, and partners work together to try to spell the word correctly on a piece of paper.
4. After 10-15 seconds, the teacher calls out a new activity.

5. Continue until all the spelling words of the day are used.
6. As students cool down, the teacher writes correct spellings on the board, and students will check their work.
7. Variation: The same activity can be done outside using the sidewalk and chalk instead of pencil and paper.

*Developed by Activity Promotion Lab at East Carolina University*

### *Quick Hands*

*Grade Levels: 1-6*

*Formation: Standing by desk*

*Equipment: None*

1. Hands always start one on each side of the head.
2. Hands go straight down and touch the knees, then come back up to the head.
3. Right hand to left knee and back to side of head.
4. Left hand to right knee and back to side of head.
5. Both hands to opposite knees and back to head.
6. Clap, touch knees, then back to head.
7. Clap, touch knees, clap, then back to head.
8. Clap under right knee, then back to head.
9. Clap under left knee, then back to head.

### *Moving with Math*

*Grade Levels: 1-6*

*Formation: In partners with partners facing each other*

*Equipment: None*

1. Teacher calls out add, subtract, multiply, or divide.
2. One in each pair jumps in place while making a fist with one hand and hitting opposite hand three times.
3. After hitting three times, the student extends any amount of fingers on each hand. Caution students about using middle fingers.
4. Partner solves problem by adding, subtracting, multiplying, or dividing based on what operation the teacher chose and how many fingers his or her partner is showing.
5. First group to call out correct answer wins.

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**REFEREED PAPER**

## Treating Fibromyalgia with Complementary and Alternative Medicines

Sarah Russell and Mildred Naquin  
Southeastern Louisiana University

### *What is Fibromyalgia?*

The literal meaning of fibromyalgia (FM) is pain in muscle fibers. Those with FM are known to have low pain thresholds (Abeles, Pillinger, Solitar, & Abeles, 2007). FM is not specific to any one muscle but encompasses all muscles in the body. In 2003 Cymet explained, "Patients with fibromyalgia have a heightened somatosensory ability" (p.279). This is characterized by a hyperawareness to touch, sounds/lights, vibration, and smell.

The medical community has not selected one primary reason that some individuals develop fibromyalgia. The American College of Physicians reports that FM may be a condition of "dysfunctional central pain processing". Anxiety and depression, physical or psychological trauma, or viruses such as hepatitis or human immunodeficiency virus (HIV) may start actions that lead to FM (Abeles et al., 2007). Doherty and Jones (1995) explain a possible cycle of events that can trigger fibromyalgia. These researchers propose regional pain syndrome, disease or illness, anxiety or life crisis which might lead to sleep disturbance. This sleep disturbance causes insufficient deep REM or restorative sleep, in turn causing functioning disturbance, fatigue, and pain that travels to different areas of the body.

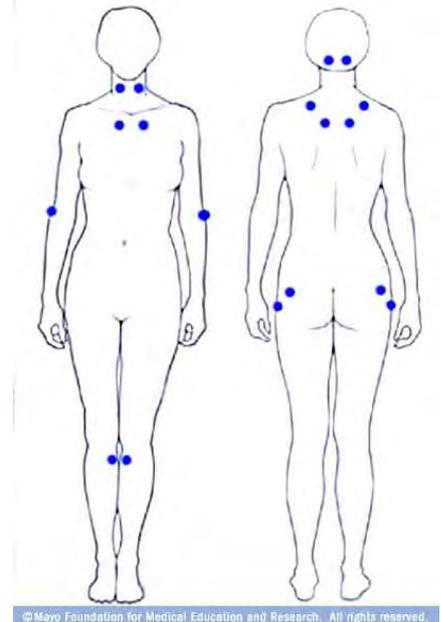
### *Diagnosis of Fibromyalgia*

More than six million Americans have been diagnosed with FM (Cymet, 2003). All age groups from the young to the old are included in this number (Bennett, 2011) with the largest population being women. Arnold, Clauw and McCarberg (2011) believe FM remains undiagnosed in about 75% of cases.

In 1990, the American College of Rheumatology (ACR) developed diagnostic criteria. To be diagnosed with fibromyalgia one should have a history of widespread pain lasting more than three

months and presence of 11 or more of 18 specific sites (Figure 1) known as tender or trigger points (Wolfe et al., 1990). The 18 tender points are located throughout the body such as the bilateral knee or low cervical area

Two new diagnostic methods are more accurate than their 1990 predecessor (King, 2011). The FM Severity Scale developed by the ACR in 2010 compares symptoms of the FM patient with those of other non-inflammatory



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*Figure 1.* Fibromyalgia pressure points painful conditions. The Widespread Pain Index asks the patient how many times over the past week was pain felt in the trigger point areas (Wolfe et al., 2010).

### *Symptoms of Fibromyalgia*

The National Center for Complementary and Alternative Medicine (2010) explains that widespread pain is the main symptom of FM. This pain varies in location, severity, and type. Other possible symptoms include: cognitive and memory problems, trouble sleeping, morning stiffness, headaches, irritable bowel syndrome, painful menstrual periods, numbness or tingling of hands and feet, restless legs syndrome, temperature sensitivity, and sensitivity to loud noises or bright lights (National Fibromyalgia Association, 2009; United States Department of Health and Human Services [USDHHS], 2010).

### *Fibromyalgia Treatment Options*

The overall goal of treatment is to reduce pain and improve sleep and functionality (Bennett, 2011b). FM treatment options vary depending on the individual's symptoms. Treatments might include a combination of man-made pharmaceutical

drugs, lifestyle changes, and more natural alternative methods. Over time a patient's bodily response to the different treatment methods help determine which methods are effective.

In 2009, Dr. Chad S. Boomershine of the Vanderbilt Center for Integrative Health explained that all medications should be introduced separately at a low dose and the dose should be adjusted as needed. This helps to determine medication intolerances and identifies whether the medication helps reduce pain, increase functional ability or improve sleep. Two pharmaceuticals used to treat FM are pregablin and duloxetine. The brand name of pregablin is Lyrica. Lyrica is used to help decrease pain from damaged nerves (National Library of Medicine [NLM], 2009). The brand name of duloxetine is Cymbalta. Cymbalta is an anti-depressant that is thought to stop the movement of pain signals in the brain (NLM, 2011).

Simon and Zieve (2008) with the University of Maryland Medical Center explain that a person can effectively participate in managing FM by making some lifestyle changes. Suggestions include making changes to diet, exercise routines, and sleep patterns. A diet high in fiber and low in animal fats with a plentiful array of fruits and vegetables would be beneficial. Further Simon and Zieve (2008) clarify that, "Physical activity prevents muscle wasting, increases well-being, and over time, reduces fatigue and pain." They recommend a "graded" exercise plan which allows for a slow and gradual increase in the amount of physical activity. This allows the body to become accustomed to using different muscles and performing different activities with the intent of increased strength and flexibility, which can decrease pain and improve sleep (Simon & Zieve, 2008).

Varying levels of pain, stiffness and fatigue hinders a person's ability and desire to participate in and maintain any significant physical activity. Mizelle and Fontaine (2011) introduced the concept of "lifestyle physical activity" as a method to provide consistent and beneficial physical movement every day. They recommend at least 30 minutes of moderate intensity physical activity spread over most of the week. It is acceptable for those 30 minutes to be completed in five minute increments if necessary based on an individual's. Table 1 illustrates the advantages and disadvantages

of different types of physical activities including Mizelle and Fontaine's lifestyle physical activity. The main benefit of lifestyle physical activity is that with its gradual increases in intensity the person is more likely to continue long term physical activity.

*Table 1.* The pros and cons of exercise and physical activity for FMS

Exercise/physical activity	Pros	Cons
Aerobic exercise	Short-term improvement in sense of well-being and physical function	May not improve stiffness, fatigue, or depression
Strengthening exercise	Possible improvement in pain, global well-being, tender points, depression, strength, and endurance	On initiation, possible increased variation in pain, stiffness, and fatigue
Lifestyle physical activity	Gradual increases in physical activity, which may decrease likelihood of cessation / dropout	May not be performed intensely enough to produce substantial benefits; patients may not always transition to more traditional exercise programs effectively
Tai Chi	Decreased symptoms, improved mental and physical functioning, with possible long-term benefit; includes a mind-body component	Limited access to instruction; may not be as helpful for men as for women
Yoga	Possible improvement in well-being, fatigue, sleep, tenderness, depression, anxiety, memory, balance, and coping strategies; includes a mind-body component	Limited availability of medically appropriate instruction

*Adapted from Mizelle, K. & Fontaine, K. (2011).*

T'ai Chi Chuan, which originated in China as a form of martial arts, is now known simply as a gentle stretching and physical exercise (Mayo Clinic Staff, 2009). A study published in the *Journal of Alternative and Complementary Medicine* measured whether or not T'ai Chi Chuan was beneficial to male FM patients. Study participants performed T'ai Chi Chuan for 60 minutes, three times per week for a total of four months. The next three months the participants did no consistent or structured physical or stretching activity. Levels of tenderness, functional ability and common FM symptoms were measured before and after the four month exercise period as well as after the three months of no physical activity. Results indicate that T'ai Chi Chuan improved flexibility and lowered anxiety levels and depression (Carbonell-Baeza et al., 2011).

Physical therapy consists of many different methods of treating aches, pains and injuries. These methods include, but aren't limited to, stretching, heat and massage. A study published in the *Journal of the American Physical Therapy Association* concluded that physical therapy for FM patients "should include education, aerobic exercise, and strengthening exercise" (Nijs, Mannerkorpi, Decheemaeker, & Houdenhove, 2010). Nijs et al. (2010) explain that it is possible for someone with FM to improve relaxation and pain awareness through physical therapy education. Such therapy also assists in strengthening muscles, improving ease in lifting various amounts of weight.

In conjunction with physical therapy, a technique known as strain counterstrain can be used. Strain counterstrain is a manual massage procedure that relieves joint pain by "passively shortening" the painful muscle areas (Cutler, 2009). Tender points are developed by repeated muscle strains. After identifying specific tender points, the strain counterstrain method can be used to passively shorten the affected muscles to help relax the painful area.

In September 2011, Jaffe references five common dietary supplements for fibromyalgia. These five supplements are St. John's Wort, Melatonin, Magnesium, S-Adenosyl-L-Methionine (SAME), and 5-Hydroxytryptophan (5-HTP). St. John's wort is an herb that is used to treat anxiety, fatigue and sleeping difficulty (National Center for

Complementary and Alternative Medicine, 2011). Melatonin is a natural human hormone that regulates sleep cycles. Although naturally occurring melatonin production is preferred, taking synthetic melatonin might improve sleep which can alleviate FM symptoms (Deffner, 2007). Magnesium, the fourth most abundant mineral in the human body works to maintain a steady heart beat and regulate blood pressure (National Institutes of Health Office of Dietary Supplements, 2009). Appropriate magnesium levels may reduce overall pain and reduce tender point pain. SAME, occurring naturally in plants, animals and humans has proven to reduce depression, inflammation and pain Simon and Zieve (2008). An amino acid found in food, 5-HTP, works to increase the production of serotonin. Serotonin, in turn, helps control mood and behavior; hence 5-HTP may improve sleep, anxiety levels, appetite and pain awareness (Ehrlich, 2011).

DaSilva, Lorenzi-Filho, and Lage completed a study in 2007 to determine if yoga could help those with fibromyalgia. Their goal was to "test the effects of a relaxing yogic practice consisting of physical postures, breathing exercises, and relaxation techniques" (p.1107). The results of the study indicate that yoga was very helpful for FM with significant decreases in pain intensity. The combination of stretching, relaxation and massage decreased pain intensity and improved daily life. The researchers recommend that FM patients learn how to complete therapeutic programs such as yoga, but more studies are recommended to confirm all of these results.

#### *Conclusions and Recommendations*

Although the exact cause of fibromyalgia has not been identified, the various signs and symptoms of those diagnosed with fibromyalgia have been recorded. The physical pain, mental deficits and functional disturbances plague millions around the world. Treatments differ based on the individual and the severity of symptoms. The overall consensus is that a treatment plan should be provided that allows for treatment of all symptoms whether they are mental, physical or functional. Until further studies are completed and more effective medicines are developed those diagnosed with fibromyalgia should be encouraged to adhere to a regular exercise program preventing symptoms from taking over their daily lives.

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Dept. of Kinesiology & Health Science

Dr. Timothy Winter, Chair

LSU Shreveport

Telephone: 318.797.5107

Email: [timothy.winter@lsus.edu](mailto:timothy.winter@lsus.edu)

Graduate Coordinator for MSKW

Dr. Jesse DeMello

LSU Shreveport

Telephone: 318.797.5101

Email: [jesse.demello@lsus.edu](mailto:jesse.demello@lsus.edu)

Graduate Coordinator for MPH

Dr. Jill Rush-Kolodzey

LSU Health

Telephone: 318.813.2905

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BUILD VALUE**

# LSU

## College of Education

## Department of Kinesiology

The LSU Department of Kinesiology Graduate Program offers Master of Science (M.S.) and Doctor of Philosophy (Ph.D.) degrees in four areas of specialization:

- Exercise physiology is focused on the genetic, biochemical, and clinical evaluation of physiological alterations to exercise training and detraining in both human and animal models. This focus is centered on modifications in the muscular, cardio respiratory, and immune systems from an aging, disease, or peak performance perspective.
  - Coordinator: Arnold Nelson      [anelso@lsu.edu](mailto:anelso@lsu.edu)
- Motor behavior research focuses on the learning and performance of coordinated movement, with particular interest in topics such as variables influencing effective and efficient skill learning, gait and balance control, sensorimotor integration for whole body and fine motor coordination, and musculoskeletal system rehabilitation.
  - Coordinator: Jan Hondzinski      [jhondz1@lsu.edu](mailto:jhondz1@lsu.edu)
- Pedagogy/psychological sciences research investigates factors that influence teaching, learning, and behavior choices in a broad range of physical activity settings, including physical education, health education, and exercise programs.
  - Coordinator: Melinda Solmon      [msolmo1@lsu.edu](mailto:msolmo1@lsu.edu)
- Sport Management research focuses on the social construction and organization of sport and sport organizations, centering on management, sociological, and organizational perspectives.
  - Coordinator: Chad Seifried      [cseifried@lsu.edu](mailto:cseifried@lsu.edu)

LOVE PURPLE  
LIVE GOLD

### Contact Information

Department of Kinesiology  
112 Long Field House  
Baton Rouge, LA 70803  
Phone: 225-578-2036

[www.lsu.edu/kinesiology](http://www.lsu.edu/kinesiology)

[www.lsu.edu/coe](http://www.lsu.edu/coe)



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- Health Promotion • Dr. Dan Denson, Coordinator  
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- Exercise Science • Dr. Robert Voight, Coordinator  
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- Athletic Training • Mr. Chad Chaisson, Program Director  
[cchaisson@mcneese.edu](mailto:cchaisson@mcneese.edu)
- Sport Management • Ms. Roxanne Allen, Coordinator  
[rallen@mcneese.edu](mailto:rallen@mcneese.edu)

Graduate programs (Master of Science) • Dr. Dan Denson, Director

- Exercise Physiology
- Health Promotion
- Nutrition and Wellness

For More Information: Contact Dr. Mike Soileau, Department Head, Health and Human Performance, McNeese State University, P.O. Box 91855, Lake Charles LA 70609 [msoileau@mcneese.edu](mailto:msoileau@mcneese.edu). 337 475-5375



UNIVERSITY  
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## **Department of Kinesiology**

*Offering degrees in:*

Bachelor of Science: Health and Physical Education

-Teaching Certification in:

- Health and Physical Education
- Adapted Physical Education (*add on certification only*)

Bachelor of Science: Kinesiology

-Non-teaching Concentrations available:

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- Health Promotion & Wellness
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**Department of Kinesiology**

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## NEW BOOK PRESS RELEASE

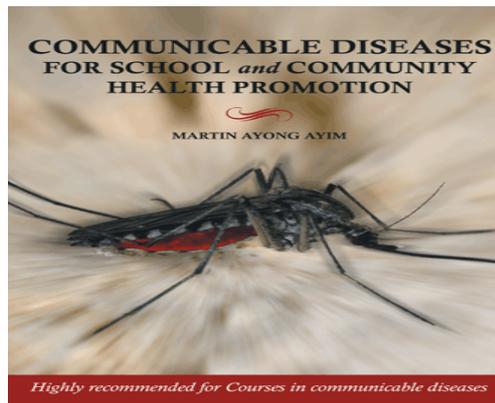
### Communicable Diseases for School and Community Health Promotion

**Soft Cover:** ISBN 9781468500233 (**\$65.99**); **E-Book** ISBN 9781468500226 (**\$9.99**). 498 pages.

**Author:** Martin Ayong Ayim Ph.D., MPH, MCHES  
Endowed Professor of Health Education (Dr. Eddie Robinson Snr Foundation)  
Grambling State University, Louisiana

**Publisher:** Authorhouse Publishing, 1663 Liberty Drive #200, Bloomington, IN 47403 Phone 1-888-280-7715

**Orders:** [www.authorhouse.com](http://www.authorhouse.com) [www.amazon.com](http://www.amazon.com) [www.barnesandnobles.com](http://www.barnesandnobles.com) B & N Outlet stores



Chapters are as follows:

- Chapter 1: Definition and clarification of epidemiological Terms and concepts
- Chapter 2: Infectious Disease Theories
- Chapter 3: Classification and Prevention of Infectious diseases
- Chapter 4: Vital statistics: morbidity rates and ratios
- Chapter 5: Vital statistics: Mortality rates and ratios.
- Chapter 6: Principles of immunization(vaccination)
- Chapter 7: The practice of immunization
- Chapter 8: Overview of viruses and viral properties
- Chapter 9: Viral infectious diseases transmitted through Contact
- Chapter 10: Viral infectious diseases transmitted through respiratory and Gastrointestinal tract
- Chapter 11: Viral infectious diseases transmitted through interaction between animals and humans Insects and mosquitoes.
- Chapter 12: Overview of bacteria
- Chapter 13: Bacterial infectious diseases transmitted through contact and respiratory tract
- Chapter 14: Food borne bacterial infections
- Chapter 15: Bacterial diseases transmitted through interaction between animals and humans or through vectors
- Chapter 16: Overview of Fungi, Metazoan, and Protozoa
- Chapter 17: Fungal, metazoal, or protozoal infections transmitted through skin contact
- Chapter 18: Fungal, metazoal, or protozoal infections transmitted through gastrointestinal tract
- Chapter 19: Fungal, metazoal, or protozoal infections transmitted through interaction between animals and humans or through vectors (mosquitoes and insects)
- Chapter 20: Sexually Transmissible Infections (STIs). Formerly STDs.
- Appendix I: The ABCs of Hepatitis
- Appendix II: Guidelines for confirmation of Food borne disease outbreaks

# Have Fun...Teach Healthy Habits... Benefit Your Community

Students love the excitement of Jump Rope For Heart and Hoops For Heart events, and schools love knowing that students are learning healthy habits and community values. The benefits of physical activity, healthy eating, and staying away from tobacco are just a few topics that these educational programs cover, all while raising funds to fight heart disease and stroke. Students learn about heart health while learning to jump rope or play basketball, satisfying the National Association for Sport and Physical Education (NASPE) Standards of Physical Education.



**Learn how your school can support  
cardiovascular research and save lives.**

**Call 1-800-AHA-USA1 or visit [americanheart.org](http://americanheart.org).**



## DID YOU KNOW?

- Obesity among our nation's youth has tripled in the last two decades.
- On average, American children and adolescents spend nearly 4 hours watching television every day.
- Obesity and physical inactivity are major risk factors for cardiovascular disease.
- Overweight adolescents have a 70 percent chance of becoming overweight adults.
- Some experts predict that, for the first time in history, because of inactivity and obesity-related illnesses, children's life spans will be shorter than their parents'.
- A number of studies have demonstrated that increased physical activity is linked to better school performance.





LAHPERD  
Convention  
Baton Rouge, Louisiana  
2012



**Come to the Bowler's Ed booth for a chance to win great PRIZES!**

*Must be present at the Bowler's Ed presentation at 11:30 am on Friday to win*

The Bowler's Ed program is designed specifically for P.E. teachers. The Bowling Proprietors Association of America has developed a multi-disciplinary curriculum, free to teachers, for P.E. teachers to teach bowling in their school gyms or other facilities. For more information, stop by the Bowler's Education booth.



### Prizes include:



Free In-service for up to 100 teachers at any school system in Louisiana (up to \$2500 value)



In-school Bowling Portable Lane Kit (\$300 value)



Geaux Beauxling Bowling Ball (\$100 value)

### WHY TEACH BOWLING?

- Bowling is an anaerobic type of exercise.
- Excellent method of teaching the underhand toss, a vital PE skill.
- Like walking with free weights, it works a lot of muscle groups not normally exercised.
- Bowling two games results in walking approximately half a mile!
- Bowling two games exercises 184 muscles while swinging around 576 pounds.
- Bowling helps with weight control and weight loss.
- Bowling two games can burn between 320 to 580 calories.
- Bowling helps shape you up. It works tendons, joints and ligaments in your arms and legs, plus improves your balance, flexibility and posture.
- Bowling helps build a healthy mind and body. Fun, friendships and stress reduction through bowling all supports good health.
- Bowling is the sport where no one rides the bench. More activity each outing than many other recreations provide and no rain outs!

# **LAHPERD Conference Program 2012**

## **Crown Plaza, Baton Rouge LA**

### **Wednesday, October 31**

- 9:00 AM Pre-convention Workshop: K-12 High Yield PE (HYPE), Artie Kamiya,  
Former National PE Administrator of the Year and NASPE Award Winner
- 5:00 PM LAHPERD Board of Directors Meeting

### **Thursday, November 1**

- 7:00 AM Registration Opens
- 8:00 AM Circuit Training: Running Across the Curriculum  
Dances My Students Love  
Yoga: Just What the Doctor Ordered  
Food Labels Made Easy  
Utilizing Services: The Chase Charlie Races  
Retirement Seminar  
Kinesiology in China  
APE Roundtable
- 9:15 AM General Session: Create New Habits to Geaux the Extra Mile  
Dr. Irene Cucina, AAHPERD President
- 11:00 AM Exhibits Open  
Speed Stacking  
2 Hip 2 B Square  
Choosing Appropriate Practices  
Classroom Debates: Sport Management  
Teaching the Facts of Life  
ACL Injuries  
Achieving Work/Life Balance  
How We Use LAHPERD Grants  
University/Agency Partnerships
- 12:00 PM Scarf it Up!  
Speed Stacking  
Dancing Your Way to Wellness  
Data Rocks  
First Aid CPR/AED Certification  
Facilitating Partnerships  
Managing Data  
Future Professionals/Leaders  
Preventive Medicine Research

Contraceptives: Categories and Controversies  
Department Chairs Meeting

- 1:15 PM CrossFit Kids  
Integrated Music and PE  
Innovations for PE  
First Aid CPR/AED Certification  
Submitting Articles for Publication in LAHPERD Media  
DHH Asthma Program  
Wellness Policy and Strategies  
University Service Learning and APE
- 2:45 PM Barre Fitness  
Martial Arts  
Zumbatomics: What is it and how do I get it in my school?  
It's Elementary: Fitness & Fun for Everyone  
Best Buddies  
Sensitivity Training  
Corrective Exercise  
Technology in the PE Classroom  
Recreation Activities for NATO Forces
- 4:00 PM Measuring Your Value-Added Student Progress in PE  
Tips & Tricks: Skills and Drills that Thrill  
Smooth Ballroom Dancing  
Sport Inclusion  
Don't Forget About Me!  
Into the Swamp  
LASO: Project UNIFY  
You Too, Can Renew  
Student Teaching: What You Need to Know  
Lesson Tech
- 5:00 PM Kaleidoscope Rehearsal  
Future Professionals Social  
Research Poster Presentations
- 6:00 PM Kaleidoscope
- 7:00 PM Geaux the Extra Mile Social  
Registration Closes

**Friday, November 2**

- 8:00 AM Registration Opens, Exhibit Open  
Learn 20 Skills & 2 Perfect Routines

You Can Teach Cha Cha & Latin Dance  
Native American Dance  
Fire Up, Push Up, Stack Up  
Health Fair Opens  
Childhood Disease Prevention Through PE and Nutrition Education  
Doctoral Programs Focusing on Sport in the U.S. and the United Kingdom  
Thinking Outside the Box  
Risk Factors Affecting School-Aged Children  
Assisted Technology

- 9:10 AM First Tee and Snag Golf  
SLAM Fitness  
Yogalates for Everyone  
Cardio-Active PE for Grades 6-12  
10 Things You Can Do to Turn Your Internship into a Job  
Organizing Strength Training  
Assessment: Been There, Done That, Got the T-Shirt  
School Based Tasting Program: Improving Preferences for Fruits, etc.  
Teaching Hybrid and Online Courses
- 10:20 AM Future Professional Super Stars  
Prop It Like It's Hot  
Step It Up to Wellness  
Wheel Chair Tennis  
Life Savers: Implementing AED Programs  
Sports Related Negligence and Litigation  
Coordinated School Health: The Real Education Reform  
Director of Physical Activity: The Newest Certification for PE Teachers  
Effective Health Education Strategies  
Past Presidents Meeting
- 11:30 AM Hoop Dancing Fitness  
Dances for the 3 of You  
Physical Best Success Stories  
Teaching Bowling in PE  
The Great Body Shop  
Fundamental Ethical Principles for Health Promotion Professionals  
Act 54: Measuring Student Growth  
Ideas to JUMP Start Hoops for Hearth/Jump Rope for Heart Events
- 12:45 PM Awards Luncheon
- 3:00 PM Post Convention Board of Directors Meeting

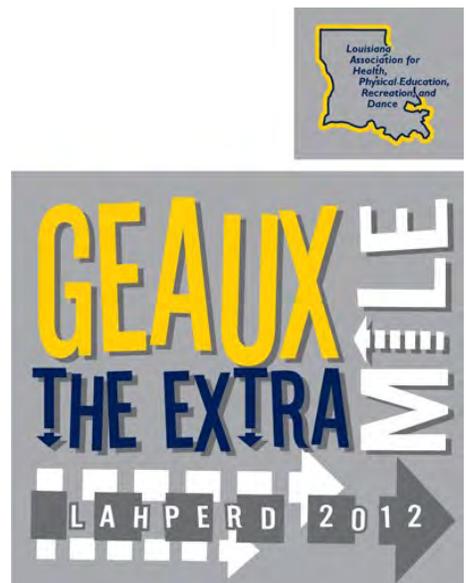
# LAHPERD GEAUX PARTY! Thursday, November 1st LAHPERD Convention

**MAKE PLANS NOW TO join us as we GEAUX THE EXTRA MILE at the Thursday night LAHPERD GEAUX PARTY!**

**Hosted by DJ Dano from Magical Music Machine!**

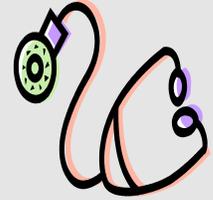
- Follow "DANO" on Facebook ("Dan Djano Blankowski") or on Twitter (DJDanBlankowski)
- Request songs *in advance* by going to [www.MagicalMusicMachine.com](http://www.MagicalMusicMachine.com)
- Make requests from over 150,000 songs
- DJ Dano featured on Star 94 Radio in Atlanta
- Known as the country's most interactive DJ and "International" Interactive Celebrationist"!

**Arrive early for the buffet dinner and stay late for the party!**





# **LAHPERD HEALTH FAIR**

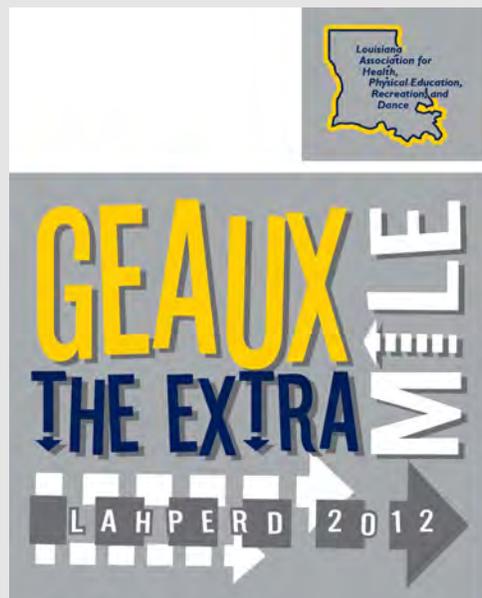


**Friday, November 2<sup>nd</sup>**

**Time: 8:00 a.m. until Noon**

**Location: Mississippi/Delta Queen**

**Tests Include: Blood Pressure, EKG,  
Vein Screen AND MORE!!!**



***Sponsored by the LAHPERD Health Division***

**Special thanks to Erica Setton at Baton Rouge Cardiology**





American Alliance for Health,  
Physical Education, Recreation and Dance

# Join Today and Put AAHPERD to Work for You!

**YES**, I want to join AAHPERD! Please send my Association credentials and begin my subscription to UpdatePlus and the professional journal(s) I've checked below.

(Mr.) (Ms.) (Mrs.) (Miss)

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**Please fill out both addresses below and then tell us which one you'd like to use.**

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AAHPERD makes its membership mailing list available for rental to companies that feel AAHPERD members would benefit from the products and services that they offer. If you don't want your name made available please check the box above.

Please send me information about my state association.

**Your satisfaction is 100%  
guaranteed. Cancel any time and  
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confidence!**

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- 1 2 American Association for Health Education
- 1 2 American Association for Physical Activity and Recreation
- 1 2 National Association for Girls and Women in Sport
- 1 2 National Association for Sport and Physical Education
- 1 2 National Dance Association
- Research Consortium** For those interested in research. (Select this in addition to your association affiliation(s) at no extra charge to you.)

#### Choose your Professional Journals

- Journal of Physical Education, Recreation & Dance*
  - American Journal of Health Education*
  - Research Quarterly for Exercise and Sport*
  - Strategies: A Journal for Physical and Sport Educators*
- You receive a subscription to one professional journal with your membership in AAHPERD. Subscriptions to additional journals are only \$25 each per year.

#### Calculate your dues

AAHPERD Professional Membership \$ 135

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**TOTAL DUE** \$ \_\_\_\_\_

#### Payment Options

- My check for membership is enclosed.
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MNW/WP

## GUIDELINES FOR SUBMITTING ARTICLES TO THE LAHPERD JOURNAL Electronic Submissions Only (Revised Fall 2012)

The LAHPERD JOURNAL is published twice a year, usually the fall and spring, by the Louisiana Association for Health, Physical Education, Recreation and Dance. Articles should be emailed to the editor, **Dr. Dan Denson** [ddenson@mcneese.edu](mailto:ddenson@mcneese.edu). Articles should be submitted by January 15 to be considered for the April issue and by August 15 for the October issue.

1. **The Manuscript** Manuscripts should follow the form and style of the current edition of *Publications Manual of the American Psychological Association* and must be double-spaced, 12-point Times New Roman font with standard margins. All of the authors' names, titles, and institutions should be listed on the cover sheet. **Electronic submissions are required.** Prepare the manuscript in Microsoft Word format and attach author's statement (see Author's Statement below). All correspondence should be addressed to the lead author unless otherwise specified. Limit manuscripts to eight pages or about 2,500 words.
2. **Tables and Illustrations** All tables and figures must be titled. Tables may be embedded in the text at the appropriate place. Use tables for reporting extensive statistical information. Data in tables should not be duplicated or extensively discussed in the text. Figures, photographs, images, etc. should be on separate pages in high resolution. Tables and figures may be edited for spacing purposes.
3. **Author's Statement** The author(s) must provide a statement certifying that the article has not been published or concurrently submitted for publication elsewhere.
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6. **Announcements** Any announcements and last minute news items may be submitted electronically prior to layout of the journal. Contributors are advised to use Microsoft Word format for all attachments. Be sure to title attachment for inclusion in the LAHPERD JOURNAL.
7. **Non-Refereed Papers** Submission of *program development papers* and *teaching methods* are welcome. Authors are encouraged to submit photographs, diagrams and tables as necessary with these papers. These papers will be reviewed by the in-house editorial staff, which consists of the managing editor and the copy editor. Some revisions may be necessary. The editorial staff reserves the right to edit these papers when necessary to maximize available space.
8. **Abstracts** All completed abstracts accepted for presentation at the fall LAHPERD conference will be published in the spring issue of the LAHPERD JOURNAL. Incomplete abstracts will be returned to the author(s) to be completed. Complete abstracts should contain: 1) problem statement, 2) purpose of the study, 3) methods, 4) major findings, and 5) conclusions. Limit abstract to 500 words.
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