

Family learning for the 'young at heart'

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A secondary school decided to involve the parents of 2nd-year pupils in their children's health and fitness lessons. The result was a course of evening family activity sessions – complete with homework! It was so successful that the parents asked to book the school facilities for future family health and fitness activities.

For children to develop a healthier way of life, the family living patterns must be conducive to healthy practices. How knowledgeable and interested are parents with respect to their own and their children's healthy living? It appears to depend upon individual attitudes towards health and fitness, and so particular family lifestyles develop. Both parents can make equally valuable contributions, for by-and-large they make the rules – what foods to buy, how much, how often and when to eat; the interests and examples to pursue in leisure times and during holidays; opinions on smoking and other health hazards, and, at least initially, decisions on 'going to bed' and 'getting up'. So health is very much a family matter, and seems to rely heavily on the training and standards set by parents.

Teachers usually do not know the extent of parents' health knowledge, or the attention given in the home to family practices of good health. Also, for all sorts of reasons, knowing what is good for one does not ensure that these healthy habits are adopted. It must be frustrating

for some offspring to be unable to implement a healthier life at home. Informed schoolchildren could experience conflict if they voiced criticism and wished to break away from the family routine, or they could be regarded as 'being difficult' or 'passing through an awkward phase'. So if school health work could aim to reach not only the child, but include the parents (and maybe even brothers and sisters) then all working to the same end could be of great family benefit.

An invitation to the parents

Having valued the article by Hulbert (1987), it seemed logical to venture a stage further and invite the parents to come to school and take part in both theoretical and practical aspects of a Health Course. So with the co-operation of Mr Poxon, Headteacher of Harris Church of England Secondary School, Rugby, and the enthusiastic support of the head of the girls' Physical Education Department, Fiona Williams, a family course was devised. A 2nd-year class of boys and girls was selected because it was felt that they were of an age (12-13

years) when they still enjoyed being out and about with their parents, and all should be at ease in each other's company. The children warmed very much to the idea of the combined course and they readily took home their invitation letter.

A four-week course was decided upon, thinking perhaps in the first instance that parents could sustain this length of commitment. The initial letter outlined the course content and explained that the work would be centred on maintaining a healthy heart with its many side benefits. The title of the course was *Young at Heart*, thinking that this would have general appeal to the parents. It was explained that besides the theory work, more than half the time would be spent on practical activity which would be sympathetically introduced.

The course outline

The general course procedure, which consisted of four sessions each week, was identified. It commenced with a double lesson for the 2nd-formers in school time and then they, armed with handouts and their own interpretive notes, imparted and discussed the work at home with their parents. This was Stage 1 of the shared homework: we did remind pupils that they knew the best time to ask parents to spare time for a hearing!

The following evening (6.00-7.30 p.m. was the time that they elected) pupils and parents arrived together for the 1½ hour session. At the end of this, Stage 2 of shared homework was set, which endeavoured to apply the theory work throughout the week with each person gradually devising their own activity schedules. Their monitoring sheets were displayed in the home and entries were made daily. They jotted in the day, the activity, the time spent, the intensity, and then commented on how they felt (physically and psychologically) about the exercise. This all served well to focus their attention on the work and to make informed progressions. Then by adjusting times and intensities, realistic target figures could be set. These were good motivators and contributed well to the long-term programme.

The tests were chosen for easy execution, and all but No. 5 could be retested at home without requiring complicated equipment:

1. Resting heart rate: carotid pulse over 10 secs. x 6 = beats per minute.
2. Girths:
Waist, Hips, $\% = \left(\frac{\text{waist}}{\text{hips}} \right) \times 100$
3. Height.
4. Weight.
5. Strength: hand grip, right and left.
6. Flexibility: stand and reach.
7. Endurance: Californian 6-minute walk/jog.
8. Working heart rate taken immediately following 6-minute walk/jog.

A positive outcome

At the final session, everyone underwent a re-test. There were many individual changes for the better, but the common improvement amongst the adults was that they were not nearly so stressed at the end of their 6-minute run, even with improved times. They were aware of feeling decidedly better, they had a general sense of well-being and felt pleased with their new-found energy. They had worked towards the re-test and they were pleased that noticeable changes could be brought about in such a short time.

It was disappointing that more parents did not come to the evening sessions, but all the children were still encouraged to take the information home, discuss it, and if possible act upon it. Whereas two children admitted receiving no interest or response, more than half of absent parents said that they would attend if another course was offered. Half the class claimed that they had instigated changes at home in order to promote healthier family lifestyles.

A drawback to the course was presenting theory work for half a session marked 'P.E.' on the school timetable. Although the total course procedure was explained, the pupils felt that they were 'missing out on practical time and the periods had become more like other lessons'! In schools it would be better if the theory work could span more lessons – right-

OUTLINE OF COURSE CONTENT "YOUNG AT HEART"		
Times	Week 1	Week 2
Double period in school (1 hour 10 mins) children only	Aims of school course Why Exercise? (handouts, discussion & notes) Practical Work Warm Up Organisation of measuring & testing. Trials Recording of results	What regular exercise does to the heart & body. Handouts explaining simple physiological effects of exercise on heart, circulation, breathing & muscle. Practical Work Six activity stations Correct execution of each activity. Practice.
Children's homework	Take files home Explain handouts & discuss information & practical work with parents	Take files home Discuss handouts & diagrams
One & a half hour session in the evening. Children & Parents	Welcome. Questionnaire re activity & health. Theory Aims of total course. Benefits of Exercise. Practical Work Variety of Exercise to raise heart rate. Several post exercise recordings. Feel affects of different exercises on heart, on breathing, on muscles. Become exercise-conscious. Partners. (1 child, 1 parent) Measure, test & record.	Small mixed discussion groups (3's or 4's) - discuss activity achieved over the week. Further effects of exercise on heart, circulation & blood (models & charts) Practical Work How to exercise well:- warm up, walking, running, bounding, stretching & flexibility work. Progressions in abdominal work, press-ups and sit-ups. Back strengthening work, sitting & standing postures.
Homework for everyone during the week	Welcome exercise into your life! Use hand outs & exercise schedule sheets to record activity over the week (individual). Display	Discuss possible exercise as a family & devise own individual week's programme. Record all activity. Consider targets.

Fig. 1. The planned first two weeks of school and home activities for the 'Young at Heart' pupil and family health-related fitness course.

Times	Week 3	Week 4
Double period in school (1 hour 10 mins) children only	Exercise for its own sake Heart fitness contributes to total fitness. Practical Work. Previous six activity stations. a) comfortable circuit, finishing. H.R's % into cardiac reserve. b) assess performance & decide whether to push self & H.R. more? Pace a second circuit, % into cardiac reserve.	Questionnaire to assess pupil success in passing on information to family. Handout - Key to 'Young at Heart' 1) Attitudes 2) Exercise 3) Healthy eating 4) Health Hazards Practical Work Energetic small sided games. Prepare for retest & measuring.
Children's homework	Pass on information to parents & explain % of cardiac reserve.	Explain the key to 'Young at Heart' & discuss re-testing.
One & a half hour session in the evening. Children & Parents	Small group discussion on exercise achievements & schedules. Theory a) A healthy diet, booklets & leaflets; all choose a different area to prepare for discussion next week. b) No smoking. Practical Work Exercise for enjoyment Warm up followed by lively exercises well done, interesting & fun to do. Games activities outdoors. Partners (adult & pupil) Devise own activity with specified equipment, e.g. a) 2 quoits + 3 hoops b) 4 cricket stumps + 2 balls, etc. Rotate to next equipment after 6 mins.	Questionnaire - evaluation of course. Discussion on key handout. Contributions to discussion on a healthy diet. Practical Work (**) Retests & recording. Swimming or Tennis. Conclusion- Through knowledge & understanding they are entirely responsible for own heart & general fitness. No excuses! you now become the instigator.
Homework for everyone during the week	Read, discuss & practice a healthy diet. Keep monitoring the week's activity schedule. Check & adjust targets.	On-going weekly schedules - adjustments & progressions.

Fig. 2. The planned second two weeks of school and home activities for the 'Young at Heart' pupil and family health-related fitness course.

forward theoretical messages are required which can be incorporated into the practical work and applied there and then, thus making the work meaningful. Discussion at the end could clarify any points and relevant detail could emerge. This of course strongly reinforces the move to Health Based Physical Education.

Some consumer comments

However, the advantages of the course seemed easily to outweigh the aforementioned disadvantages. The following statements combine tutor observation with replies from pupils and parents to the several questionnaires. These were designed not only for feedback information, but also to focus the respondent's mind on the course content and to encourage informed decisions about their own health and fitness.

1. Families attending the evening sessions *worked well together* and children did not mind interchanging to work with other parents. Many pupils attended all the evening sessions despite the fact that their parents did not come. They preferred the evening parts of the course because, 'the presence of parents made it more fun and they were treated as equals'. During partner work the children often acted as the teachers and the innovators; partly because they were on home-ground and therefore took on the responsibility for the equipment and showing 'how we do it'.

2. Parents approved of *the balance of theory and practical work* as they found it relaxed, interesting, and relevant. They appreciated the why, what and how of exercise, and in the light of this information they could enjoy exercise for a variety of individual reasons, not least for its own sake. The main benefits they saw for continuing with an active lifestyle was that it would keep them young physically and mentally and thus offset the decline of old age. Some however valued the therapeutic effect of exercise in helping them to unwind and feel less tense after the work stresses of the day.

3. In the mixed discussion groups parents gave a *sympathetic hearing to the child-*

ren's contribution and often built on the comment to make it very constructive. In general discussion the children were impressed with the way that parents remembered facts that they had forgotten, therefore coming to the rescue of the class. In turn, children were very helpful and appreciative of parents' efforts on the practical side, sometimes sympathetically amused, and often voiced encouragement. Son: "That's twice you've beaten me now, jolly good, Mum!"

4. All involved parents stated a *preference for a family course* as opposed to parents only. They did 'get together' at home to discuss and plan their weekly activities, and the course did act as a common talking-point, particularly following the evening sessions. Family activities were embarked upon which resulted in enjoying something together and therefore helping the family to feel closer. Two examples demonstrated that families now had the confidence to attend for the first time the family booking at the Sports Centre and to join the Church group in their seven mile hike. Prior to this they had felt unable to cope physically and thought they would let the family down.

The school's view

The course tutors saw the major success in two stages. One was in the request that came at the end of the prescribed four weeks for the mixed evening sessions to continue for another four weeks until the end of term. So a programme of activities was devised to include preliminary teaching and coaching, followed by free practice times where pupils were encouraged to set targets and implement their own rules. Some 'orphan' children did not attend this continuation to the course, but there were quite a few additions of other members of the family, friends, and neighbours. So a good time seemed to be had by all.

Then a second request came from this nucleus of parents to book the school facilities for next term so that they could continue to meet as a family group to promote their health and fitness. They asked to keep contact with their tutors for further guidance, and to secure occa-

sional teachers or coaches for chosen aspects of fitness or activities.

So the group has become almost self-supporting. Using the newly-established contact with the school P.E. Department, any fitness and skill problems can be answered. Also organisational difficulties (particularly those caused by numbers) can be overcome, for communication to families from school is quite simple.

Well fostered, this could mushroom perhaps more suitably away from the cosiness of school into the better equipped Sports Centre, which also offers the socialising facilities, but of course at a

price. However, it would seem that this is an enjoyable and very satisfactory way to increase our active population and also produce more sports organisers and leaders in our society.

Reference

Hulbert, L. (1987). Health & Physical Education Project, *Newsletter No. 10*, May 1987. HEA (in conjunction with PEA.)

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