SAMPLE ONLY



# Resource Book Healthy Bodies Happy Kids

Background information to give teachers and parents insight into issues related to childhood obesity.

Body Systems

Activity #

Healthy Diet

Healthy Life 👔

Written by Sandy Tasker. Illustrated by Terry Allen. © Ready-Ed Publications - 2003 2nd Edition published by Ready-Ed Publications (2004) PO Box 276 Greenwood Perth Western Australia 6024 Email: info@readyed.com.au Website: www.readyed.com.au

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ISBN 1 86397 535 7

## The Healthy Bodies, Happy Kids Website

### www.readyed.com.au/healthy

In conjunction with this series, Ready-Ed Publications is pleased to launch the **Healthy Bodies, Happy Kids website**.

The site is designed to provide students with a forum for submitting ideas about healthy eating and exercise as well as allowing them to post their own healthy recipes. Students and/ or classes are able to register their details, which will help to create a list of schools that are interested in swapping information. This site will appeal to students in all year levels.

Students and classes are also able to submit their own individual work to be published online. Please note that all work is thoroughly checked by Ready-Ed Publications before it appears online and that surnames will be omitted on request to protect privacy.

#### Features of the site include:

- Food Facts: contains information about the food groups, nutrients, taste sensations, recipes and fun food links;
- Tips on exercise and staying healthy;
- A research page that provides a springboard for links to topics such as diabetes, cholesterol, heart disease and much more;
- Teachers WWW links;
- Student WWW links for food and exercise sites.

The aim of the site is to encourage communication and to display students' own ideas, so be sure to check out the site! To submit work or send feedback, please use the forms on the site or email directly to **healthy@readyed.com.au** 

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## I.I Purpose

This series has been created for implementation in the classroom as part of the Heath and Physical Education learning area in Australian schools for students aged 5 - 13.

Recent ongoing publicity has reflected Australian society's concern with obesity, as well as related health problems such as diabetes and cardiovascular disease. Statistics in this Resource Book will illustrate that unhealthy lifestyle choices in childhood are linked to serious health problems later in life, if these habits remain unaddressed. Obesity and associated diseases have a widespread effect on the community, draining public health resources as a result of behaviour and choices that can be modified during childhood.

There is a pressing need to intervene at an early age and to cover ALL of the areas that are linked to the lifestyle choices that can be made, including:

- O Promoting healthy habits such as a nutritious, balanced diet and regular exercise.
- O Developing a positive self-image so that children are able to respect their own
- O Raising the awareness of the ways in which modern society influences choices through advertising, particularly about the availability of unhealthy convenience foods.
- O Encouraging students to choose physical activity over sedentary alternatives such as television and computer games.

The challenge lies in the need to not only equip students with the information necessary to make healthy choices, but to provide the opportunities and resources for them to experience and practise these skills on an ongoing basis, in their real environments.

## 2 Books in the Series

This health series will provide comprehensive, up-to-date information, as well as a range of ideas that support a "whole school" approach to health promotion. There are specific activity suggestions and "hands-on" investigations contained in the following books of the series:

#### The Resource Manual

Factual and statistical information on:
 diet – requirements, recent food trends, labelling requirements, allergies and eating disorders;

body systems – digestion, cardiovascular responses, health problems;
exercise – benefits, programming, variety and alternatives in exercise for students;
self-esteem – peer pressure, eating habits, body image, facilitating positive perceptions;
media – guidelines, viewing strategies, analysis, use of positive media exposure;

- O Indoor and outdoor games with a "health" theme;
- O Curriculum integration ideas;
- O Whole school projects and parent involvement;
- O Tips on how to work with the school canteen to promote healthy food choices;
- O Recipes for healthy meals and snacks;
- O Web sites, addresses and contact details of nationwide health organizations.

#### **BLM** Activity Books

Adopting an integrated approach, activity ideas provided will draw on and cultivate skills in language, numeracy, science, society and environment and the arts. The focus of the workbooks will be practical learning experiences using resources from students' existing surroundings.

The age ranges covered are: Junior (Years 1 - 3), Middle (Years 4 - 5), Upper (Years 6 - 7). The activity books are theme-based books with age-appropriate mascot characters that enhance visual appeal and student motivation.

#### Books contain content related to:

- O Healthy eating Raising conceptual understanding of the value of a balanced diet, with opportunities for students to analyse their own diets and experience alternative options.
- O The healthy body/body systems Coverage of the digestive and cardiovascular systems with a focus on how looking after these parts of the body contributes to overall health.
- O Exercise and physical fitness A range of learning experiences that encourage students to expand their understanding of "what is exercise" and to seek new practical strategies to increase the level of physical activity in their daily lives.
- O Self-esteem Exploring ways to foster a positive body image and develop constructive selfmanagement skills.
- O The Media and a Healthy Lifestyle Facilitating a critical awareness of the strategies employed by the media to advertise fast foods and using the same techniques to promote positive ideals.
- O Practical, inquiry-style activities based around relevant, real-life situations and using easily obtained resources such as junk mail and the newspaper.
- O "Take Me Home" activity sheets that can be used as homework and as a means of eliciting parental support and awareness of health issues.
- O Internet links that are "student-friendly".

#### Curriculum Links

The BLM Activity Books have been linked to Strands from various state curriculum documents as indicated on the next page. These documents are as follows:

- 1. Health and Physical Education a curriculum profile for Australian schools. The Health and PE curriculum profile is published by: Curriculum Corporation, PO Box 177, Carlton South, Victoria, 3053
   > www.curriculum.edu.au (Document is © Curriculum Corporation, 1994)
- 2. Personal Development, Health and Physical Education K 6 (ISBN 0 7313 4241 0). PDHPE is one of the six key learning areas in the NSW curriculum and the Syllabus is published by the Board of Studies NSW, GPO Box 5300, Sydney, 2001

( > www.boardofstudies.nsw.edu.au)

3. Health and Physical Education - Years 1 to 10 Syllabus (ISBN 0 7242 8236 X). The syllabus is published by: Outpendand School Curriculum Council PO Box 317 Albert St. Brishana Outpendand

Queensland School Curriculum Council, PO Box 317, Albert St, Brisbane, Queensland, 4002 (The Syllabus Document is  $\ensuremath{\mathbb{C}}$  The State of Queensland 1999)

- 4. Curriculum and Standards Framework II (ISBN 1 74010 045 X). The Draft Framework book is published by: Victorian Board of Studies, 15 Pelham Street, Carlton, Victoria, 3053 (Document is © Board of Studies 1999)
- 5. Health and Physical Education Student Outcome Statements (ISBN 0 7309 8668 3).

The Health and PE Outcomes and Standards Framework book is published by the Department of Education of Western Australia, Royal Street, East Perth, WA, 6000

www.eddept.wa.edu.au/centoff/outcomes/

#### Outcomes Grid: Health and Physical Education Strands Covered in Activity Books: Australian States and Territories

Indicators refer to Strands according to this code:  $\bigcirc$  = Strong focus;  $\Rightarrow$  = Some related activities (N.B. Although specific movement and Physical Education skills are not a focus of this series, there is a sound coverage of physical activity concepts, attitudes and alternative solutions to organised sport in each of the BLM Activity books, and ideas for integrating physical activity lessons into health education concepts in the Teachers' Manual.)

State/s	National document: SA / NT / Tas / ACT							
Strand	People and Food	Health of Individuals and Populations	Physical Activity and the Community	Human Development	Human Movement	Safety	Human Relations	
Coverage in Activity Books			•	*		* Minimal coverage in some books	•	
State/s	Western Australia			Queensland				
Strand	Concepts for a Healthy Lifestyle	Self Manage- ment Skills	Inter- personal Skills	Promoting the Health of Individuals and Communit- ies	Developing Concepts and Skills for Physical Activity	Enhancing Personal Develop- ment		
Coverage in Activity Books		•	•	•	*	•		
State/s	New South Wales Victoria							
Strand	Growth and Develop- ment	Inter- personal Relation- ships	Personal Health Choices	Safe Living	Active Lifestyle	Health of Individuals and Populations (Strong focus on both conceptual organisers)	Self and Relation- ships (Main focus on Identity and Developing and Maintaining Relationships)	
Coverage in Activity Books	*			*				

What is Obesity?

## I.I Facts and Figures

Obesity can be measured using the Body Mass Index (BMI), which is calculated by dividing a person's weight in kilograms by their height in metres squared. For example, a person who weighs 67 kg and is 1.7 metres tall would calculate as follows:  $= 67 \div 1.7^2$ 

- $\begin{array}{c} 07 \div 1.7 \\ 47 \cdot 2.90 \end{array}$
- 67 ÷ 2.89
- = BMI of 23.18 (healthy)

A BMI between 18.5 and 25 is considered "healthy" for adults, 25 to 30 is "overweight" and more than 30 is "obese". This should be used as a guide only as age, gender, muscular proportion and ethnic background have not been taken into consideration. Additional calculations need to be conducted for children as age and gender impact upon growth rates.

## Evidence published from the 2002 Childhood Obesity Summit held by the NSW government indicates that:

- O Almost one quarter of Australian children between 2 and 17, and over half the adult population, are considered overweight or obese.
- O The 1995/6 estimated national cost of addressing obesity-related issues was between \$680 \$1239 million in Australia.
- O Gastro-intestinal, endocrine and orthopaedic (postural and weight bearing) problems are possible short-term consequences of obesity, and long-term risks include cardiovascular disease.
- O Obesity is linked to disrupted insulin levels, leading to diabetes and associated afflictions such as stroke, limb amputation, kidney failure and blindness.
- O Low self-esteem and childhood depression can result from social intolerance towards individuals affected by obesity.
- O Societal trends, such as increased use of cars for transport, television and computers for entertainment, and high fat foods for meals are amongst potential causes of the rise in childhood obesity.
- A 2001 NSW Child Heath Survey discovered that 40% of 5–12 year olds were watching 2 hours or more of television or videos each day and playing 1 hour or more of computer games.
- O Addressing the issue of obesity requires involvement from the family, educators, community organisations, the media and food industries with governmental support.
- O A key source of support is from the parents, and issues such as education, access both physically and financially to healthy foods and exercise opportunities for the whole family, must be addressed on an ongoing basis.
- O Social barriers, such as safety concerns in walking or riding as a form of transport, cultural beliefs that contradict current health ideas, the difficulties faced by ethnic groups seeking health education in an English-speaking environment, and the reduced availability of resources in rural and remote communities must be considered when offering solutions to the obesity problem.
- O Children who have more confidence in their fundamental movement skills are more likely to pursue physical activities in the playground and out of school.
- O Solutions will have the most impact and success if they address the whole population (hence a whole school approach is most appropriate), are long-term (such as implementation of educational activities throughout the school year and practised at each year level), and are well resourced.

## 2.2 Cultural and Indigenous Health Issues

Cultural issues that restrict access to education and health resources can further impact on current community health issues. Families that speak limited English may miss out on information that would otherwise assist in the maintenance of a healthy lifestyle. Certain cultures may also favour diets that do not reflect the commonly accepted ideas of a "balanced diet" in Australia.

Of particular concern is the health of the Aboriginal and Torres Strait Islander population in Australia. Having had to adjust rapidly from a hunter-gatherer lifestyle when European people settled, indigenous peoples are now known to experience a high incidence of cardiovascular disease, diabetes and obesity. Health problems in some indigenous populations are compounded by socio-economic disadvantages and remote living conditions, reducing access to fresh foods and health services. Poor living conditions increase the risk of infectious disease, with gastro-intestinal illnesses increasing the likelihood of poor nutritional intake. Substance abuse, which has been identified as a problem in some indigenous communities, has also been identified as a risk factor, in that long-term, excessive use of alcohol is linked to nutritional deficiencies and less money is consequently spent on healthy food.

The high incidence of low birth weight in Aboriginal infants has been linked to dietary problems later in life, if followed by ongoing nutritional deficiencies. This problem is said to be improving slowly but still needs to be acknowledged as an area of concern.

Solutions for the health problems experienced by indigenous groups are in many ways similar to that of the general population, although specific issues such as those outlined above need to be taken into consideration.

Initiatives towards improving the health of these individuals need to be community-based with a focus on specific, local needs. The problems that may exist for a group living in a remote outback setting will differ from the needs of indigenous families in an inner-city dwelling. Approaches that cater for early intervention are best, as healthy habits can be established from an early age, and childhood health problems can be prevented rather than needing to be addressed later on. Instead of focusing simply on education for a healthy lifestyle, concrete measures to address the other risk factors mentioned above must also be incorporated through community policy and practice.

Cultural traditions and beliefs, languages spoken and learning styles of indigenous groups need to be considered when planning new programmes, with realistic expectations of outcomes. The groups themselves would also benefit from being involved in making decisions at every stage of the process as a sense of ownership enhances motivation.

#### **Reference:**

Electronic version of the publication: Nutrition in Aboriginal and Torres Strait Islander Peoples from the National Health and Medical Research Council (2000) at www.health.nsw.gov.au/obesity (Go to the Obesity Summit page and check out the links page.)

