

Original Article

# Global Forum for Physical Education Pedagogy 2012: Recommendations for Community-Based Networking

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**Abstract:** The Global Forum for Physical Education Pedagogy (GoFPEP) was founded in 2010 as a think tank to reform and reconstruct health and physical education pedagogy. Two major international forums have been implemented: one in the United States in 2010 and a second in Germany in 2012. A third is planned for South Africa in 2014. This paper reported on the activities of GoFPEP 2012, which was held in Velen, Germany, in collaboration with the Willibald Gebhardt Research Institute. Addressing the theme of “Revitalizing Health and Physical Education Through Community-Based Networking,” 80 invited delegates from 50 countries focused their discussion on two major questions: (a) What innovative strategies can be employed to revitalize health and physical education pedagogy through community-based networking? (b) Can we build a global network focused on advancing health and physical education pedagogy? This study investigated what strategies might facilitate this activity. Open-ended coding was used to analyze responses from six discussion groups, and 13 core categories were established. Findings suggest three key areas for reform: Greater attention needs to be paid to linking community, physical education, and sport programs together; sharing and supporting the dissemination of technology; and changing the perception of physical education within society and the broader educational community.

**Keywords:** *Physical education, health, pedagogy, global*

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## Introduction

Challenges to the health and well-being of individuals throughout the world have brought new attention to the importance of physical education and physical activity. Secretary General of the United Nations Ban Ki-moon focused the attention of the world on the need to address increased incidence of noncommunicable diseases. In a presentation to the General Assembly, Ki-moon called for increased vigilance and focus on the prevention and control of such diseases. He noted unless this issue is addressed, “the prognosis is grim...yet [he states]...we know how to drive them...[the number of individuals affected by non-communicable diseases]... down” (Ki-moon, 2011). Ki-moon called for greater attention to promoting physical activity and providing a nutritious diet, as well as limiting alcohol consumption and smoking. He noted, “We should encourage individuals to make the smart choices that will protect their health.”

The occurrence of obesity and overweight has increased in a dramatic fashion over the past several decades in the United States (Bell et al., 2011; Brown & Summerbell, 2008; Flegal, Carroll, Ogden, & Curtin, 2010) and in other parts of the world (Chin, 2010; Brettschneider & Naul, 2007). Rapid modernization, dramatic changes in lifestyle, diets high in fat and sugar, and reduced physical activity have caused a greater incidence of obesity and overweight on a worldwide basis. Today, obesity and overweight have become the most widespread metabolic diseases in the world (Bauman, Allman-Farinelli, Huxley, & James, 2008; Kumanyika, Rigby, Lobstein, Leach, & James, 2010; Yang et al., 2012). As Herring, Edginton, Gadelmann, and Chin (2012) have offered, the main contributors to this dramatic increase in obesity and overweight include “...the lack of a sustained program of physical activity, the lack of regulation of dietary habits and increasing screen time” (p. 39).

Sustained physical activity is a requirement for healthy active living. On the other hand, physical inactivity contributes dramatically to increased obesity and overweight (Andersen et al., 2006; Gutin, 2008; Hills, Andersen, & Byrne, 2011; Pietiläinen et al., 2008). Another major factor contributing to a greater incidence of obesity and overweight is the dietary nutritional habits of individuals. Access to fast foods, which are high in calories and fat, is a major concern (Morlanda & Evensonb, 2009), as well as the reduction in diets of complex carbohydrates (Chopra, Galbraith, & Darnton-Hill, 2002; Lichtenstein et al., 2006; Procter, 2007). In an attempt to address the consumption of sugary soft drinks, the mayor of New York City, Michael Bloomberg, restricted sales to no more than 16 oz in a cup in restaurants, movie theaters, stadiums, and arenas (Goldman & Patton, 2012).

Two other factors have dramatically contributed to the increased incidence of obesity and overweight. The first is increased screen time. As Herring et al. (2012) noted, “Screen-based activities, including viewing television, playing video games, and using computers has increased dramatically”(p. 40). Such activities contribute to increased physical inactivity and a more sedentary lifestyle. Second, physical education programs have been de-emphasized on a worldwide basis. Hartman and Green (2011) reported that school time allocated for physical education has remained stable; however, budgetary resources for such programs have declined. Again, as Herring et al. (2012) pointed out, the greater emphasis that has been placed on accountability and standardized testing has led to a reduction of programs in the areas of health, physical education, art, and music.

The above concerns have led to a need to evaluate and reshape the way in which physical education programs are offered and the way in which physical education teachers

are prepared. On a worldwide basis, such issues must be addressed, bringing into focus the strategies, practices, and methods that have been successful in addressing these concerns. Increasingly, it is important to recognize the challenges faced are ones confronting society as a whole, often resulting in a general decline in the health and well-being of individuals as well as significantly increased cost for health care. Teachers, administrators, parents, government officials, and business and community leaders must join together to seek solutions to these challenges. There is a need to examine the policies that impact health and physical education programs to establish a new course of action to combat rising issues and concerns related to obesity and overweight.

### **The Global Forum for Physical Education Pedagogy (GoFPEP)**

The Global Forum for Physical Education Pedagogy (GoFPEP) was established in 2010 as a think tank to rethink, reform, and reframe physical education pedagogy. Two central themes have been established to advance the GoFPEP effort. The first is to discover best practices in the teaching of physical education, and the second is to revitalize the way physical educators are prepared (Edginton, Chin, Gadelmann, & Ahrabi-Fard, 2011). In addition, GoFPEP has focused on the importance of the application of technology, linkages between the school and the community, and the building of partnerships and the establishing of networks. Currently, GoFPEP has been framed as a new social movement that seeks change (Edginton, Chin, & Naul, 2012).

As a social movement, GoFPEP seeks to create new ways of thinking and to explore different perspectives that impact the teaching of health and physical education. In addition, GoFPEP as a social movement seeks to network individuals who share common values aimed at addressing the needs of 21<sup>st</sup> century learners. Those participating in new social movements often make a personal commitment to pushing back against an established order that is limiting or preventing change. Edginton et al. (2012) stated, "GoFPEP as a social movement is committed to advancing 21<sup>st</sup> century health and physical education programs to inspire, motivate and prepare learners to live in an ever-changing globalized society" (p. 34).

In this sense, GoFPEP seeks to engage in the process of critical inquiry with an eye toward reforming, perhaps even revolutionizing, the way in which physical education is taught and the way in which physical education teachers are prepared. Embracing tenets of social reconstruction, GoFPEP strives to integrate practice with theory (not the reverse), aligning the school environment and practices in a fashion that integrates learning with values that prepare children and youths for adulthood and assist them in reconstructing society in ways that promote greater health and well-being (Zuga, 1992; Dewey & Childs, 1933). As Zuga (1992) wrote, there is an underlying tension that involves "taking a stand on the issues confronting today's society" (p. 56). GoFPEP chooses to make the stand to attempt to remedy social problems rather than to remain isolated in the school or university environment.

### **Global Forum for Physical Education Pedagogy 2010 (GoFPEP 2010)**

The initial GoFPEP was held in May 2010 and sponsored by the Grundy Center (Iowa, United States) Community Schools and the University of Northern Iowa, United States. The program featured educators, health and leisure professionals, administrators, policy makers, and citizens from over 25 countries, representing 64 universities, institutions, organizations,

and schools. Focused on the theme of “Revitalizing Health and Physical Education Through Technology,” the forum provided a venue for a review of several programs of best practice and featured contemporary demonstrations of the application of technology in physical education. More than 100 invited delegates engaged in 2 days of dialogue and conversation, exploring new models of pedagogy as well as applications of preparing health and physical education teachers. A special emphasis was placed upon the application of technology and the building of community partnerships.

The major outcome of GoFPEP 2010 was the crafting of A Statement of Consensus (Edginton et al., 2011, pp. 39–41). This statement emphasized the need to align health and physical education programs with the knowledge and skills required for children and youths to live, work, and play in the 21<sup>st</sup> century. The statement focused on two areas: physical education pedagogy and physical education teacher preparation. Elements related to physical education pedagogy emphasized the importance of healthy active lifestyles, student-centered learning, cooperation with the community, social justice, 21<sup>st</sup> century learning skills, use of technology, and accountability. Consensus statements related to physical education teacher preparation included teaching techniques/strategies related to promoting healthy active living, policies for a broad continuum of programs, the crafting of a positive learner-centered environment, the development of partnerships, the development of greater sensitivity in addressing the needs of all individuals, the enhancement of methods of accountability, and the need to link practice to theory and the use of reflection. Other outcomes of GoFPEP 2010 have included the establishment of a new journal, *The Global Journal of Health and Physical Education Pedagogy*, and a series of books including one forthcoming focused on the topic of Physical Education and Health: Global Perspectives and Best Practice.

### **Global Forum for Physical Education Pedagogy 2012 (GoFPEP 2012)**

GoFPEP 2012 was held in Velen, Germany, in collaboration with the Willibald Gebhardt Research Institute. The theme of this forum focused on the topic of “Revitalizing Health and Physical Education Through Community-Based Networking” and featured oral and poster presentations as well as opportunities for delegates to engage in dialogue and conversation. Over 80 delegates attended, representing over 50 countries including individuals from model school programs, university departments, and sport-related associations. A number of keynote presentations were offered and combined with five in-depth workshops. Participants were provided an opportunity to visit three on-site clinics that featured best practice in contemporary physical education programs. These programs emphasized the use of technology, cross-curricular physical education, and nutrition education. GoFPEP 2012 was endorsed by 40 national and international professional societies, associations, and sport science groups.

A major outcome of GoFPEP 2012 was focused on crafting recommendations to assist institutions at local, state/provincial, regional, national, and international levels in formulating policies in support of advancing physical education and physical activity in the school and in the community. A special focus was the topic of community-based programs and global networking. The dialogue centered on how schools and communities can work in partnerships to advance health and physical education programs.

To involve and encourage the participation of each of the invited delegates in pre-forum activities, delegates were asked to offer their insights into a series of questions. Each invited delegate shared suggestions and recommendations. In turn, these suggestions and

recommendations were useful in framing final questions used in the discussion sessions at GoFPEP 2012. Each invited delegate was asked to provide the following information: (a) innovative strategies or best practices employed in school physical education programs, sport clubs, and other community programs that enhance physical activity for children and youths; (b) innovative approaches that link and/or network community partners with school physical education programs; and (c) innovative strategies identifying ways in which the GoFPEP movement can support healthy school networks in local communities.

Two blocks of time were established for discussion groups to meet and share responses to proposed questions noted below. The initial discussion session was one of information sharing and did not emphasize the actual recording of recommendations by the delegates. The closing section was more focused and requested that delegates respond to two major questions:

1. What innovative strategies can be employed to revitalize health and physical education pedagogy through community-based networking?
2. Can we build a global network focused on advancing health and physical education pedagogy? So, how and what strategies do you suggest to facilitate this activity?

Invited delegates were divided into six groups, which included a chair and a recorder. Efforts were made to have each of the groups include a broad representation of individuals from different geographical regions and continents throughout the world. For example, one group included a chair from Brazil and their recorder was from the Netherlands. Group members included individuals from Germany, Nigeria, Italy, Ghana, Russia, Venezuela, Romania, the United States, Mexico, Portugal, and Columbia. A second group included an individual from Jamaica as the chair, a recorder from the United States, and group members from France, India, Lithuania, the United States, Germany, Slovenia, China, Cyprus, the Republic of Kazakhstan, and France.

The dialogue in response to the above questions resulted in a vast number of recommendations and suggestions. These ideas were compiled by each of the recorders and the raw data were advanced to the conveners of the forum. In turn, these data were analyzed using an open coding process. Open coding is a process of breaking down, examining, comparing, conceptualizing, and categorizing data (Corbin & Strauss, 2007). The final product of open coding (i.e., the final set of designs or experiences and their corresponding elements of implementation) is grounded in the joint constructions of the respondents. In the grounded theory method, the analytic process of open coding is used to identify and develop concepts in terms of their properties and dimensions.

The procedure by which this analysis is accomplished is through asking questions about data and making comparisons for similarities and differences between each incident, event, and other instances of phenomena. Events and incidents identified as similar are labeled and grouped to form categories (Corbin & Strauss, 2007). Thus, the final product is grounded in the individual responses of each discussion group member. The following presents a series of steps in the constant comparative method used to code the GoFPEP 2012 discussion and e-mail responses (Bogdan & Biklen, 2007). These steps include (1) data collection; (2) identification of key issues; (3) review of data on incidents of the categories, seeking diverse dimensions of each category; (4) descriptive analysis of categories, describing and

accounting for all the data's incidents; (5) analysis of the data and the emerging model to discover basic social processes and relationships; and (6) engaging in sampling, coding, and writing as the analysis focuses on the core categories.

## Summary of Findings

The open coding procedure enabled for a comparison of the similarities and differences between each of the responses. Thirteen core categories were established, representing the diverse dimensions of respondents in each of the six discussion groups. The core categories identified are (a) change physical education; (b) role models; (c) government support; (d) parental involvement; (e) teacher education programs that address community-school partnerships; (f) community/PE/sport-linked programs; (g) healthy living/well-being activities; (h) technology: share and support dissemination; (i) student voices/needs; (j) cultural competence; (k) global programs/perspective; (l) political approach; and (m) research. These are presented in Table 1.

**Table 1**

*Core Categories*

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**Item**

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1. Change physical education
2. Role models
3. Government support
4. Parental involvement
5. Teacher education programs that address community-school partnerships
6. Community/PE/sport-linked programs
7. Healthy living/well-being activities
8. Technology: Share and support dissemination
9. Student voices/needs
10. Cultural competence
11. Global programs/perspective
12. Political approach
13. Research

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Table 2 presents the aggregate responses or the specific number of items that were coded into the categories. As one can see in viewing this table, the item with the largest number of responses was "linking community-PE-sport programs" with a combined total of 23 responses to both questions. This was followed by "sharing and supporting the dissemination of technology" with a combined 14 responses to both questions. The category with the third most responses, 12 responses, focused on the "importance of changing physical education." Categories that featured gaining "cultural competence" and serving as role models followed the first three categories in terms of responses. Other categories received four or less responses when data were reviewed and coded.

**Table 2***Core Categories and Frequency of Response*

Core Categories	Innovative Strategies	Network Strategies
1. Change physical education	8	4
2. Role models	4	2
3. Government support	3	
4. Parental involvement	4	
5. Teacher education programs that address community-school partnerships	3	
6. Community/PE/sport-linked programs	22	1
7. Healthy living/well-being activities	3	
8. Technology: Share and support dissemination	6	8
9. Student voices/needs	3	
10. Cultural competence	6	1
11. Global programs/perspective		2
12. Political approach	1	
13. Research	2	1

Open-ended responses from the discussion groups to the first question, what innovative strategies can be employed to revitalize health and physical education pedagogy through community-based networking, are found in Table 3. As one can see in reviewing this table, a large number of respondents reported “community/PE sport linked programs should be enhanced.” For example, one comment suggested the importance of employing a “holistic approach of implementing healthy program in community as well as encouraging people to do so.” Another comment featured the importance of establishing “a coordinated school and community based physical activity package” and “integrating ‘groups’ of PE and sports in the schools.” Another core category highlighted was changing physical education. Discussion groups reported there is a need to change the way health and physical education are taught and to employ technology. Emphasis was also placed on the importance of inclusion and how physical education can be changed for the 80% of the students who do not like it. Emphasis was placed on providing greater choice to students and responding to the age and stage development of children and youths.

Table 4 yields information gained from the second question: Can we build a global network focused on advancing health and physical education pedagogy? So, how and what strategies do you suggest to facilitate this activity? The item receiving the most coded responses was “to use technology to share and support program dissemination.” This was followed by “the need to change physical education.” For example, one group highlighted, “Use technology to build a network of sharing ideas, especially for teachers and teacher prep [to exchange ideas].” The establishment of a “website portal that contains videos, documents, etc. to disseminate good practices” was suggested. Another group highlighted the importance of the “need to build a platform for action with interventions that are relatively easy to implement.” Discussion groups encouraged the importance of networking to connect cultures; to bridge gaps; and to understand other cultures and habits and learn from each other.

**Table 3**

*Innovative Strategies*

Core Categories	Comments
<b>Change physical education</b>	<ul style="list-style-type: none"> <li>• Change the way to teach about health and benefits of PE, use technology and ease of access, up to date</li> <li>• Sports for outside (trend sports) promote social in teaching</li> <li>• Need for inclusive strategies – “INCLUSION” has to be considered always!</li> <li>• Number of PE lessons should be increased</li> <li>• Meet questions of inclusion</li> <li>• How do we change PE for the 80% of kids who do not like it?</li> <li>• Offer more choices to students, not just team sports</li> <li>• Remember different stages of children</li> </ul>
<b>Role models</b>	<ul style="list-style-type: none"> <li>• Role model, variety of role model, heroes</li> <li>• Use a popular sports team to promote healthy living – interact with the children</li> <li>• Coaches from the sports schools go to the kindergarten schools to visit and organize competitions there and have “famous” athletes participate too</li> <li>• Role models coming into schools</li> <li>• PE teachers must be good role models for students and parents ~ after-hours compensation</li> </ul>
<b>Government support</b>	<ul style="list-style-type: none"> <li>• Encourage government to support the link between organizations, schools, and clubs</li> </ul>
<b>Parental involvement</b>	<ul style="list-style-type: none"> <li>• Introduce problem-solving learning instead of problem-based learning; empower parents and children in child rearing</li> <li>• Parents should get informed about the PE programs of their children</li> <li>• Involve parents – bring them to the school to observe/participate in order to learn how to play with their child</li> <li>• Get parents involved in building the facilities and resources for the program</li> </ul>
<b>Teacher education programs that address community-school partnerships</b>	<ul style="list-style-type: none"> <li>• Platform for action; easy implementation/University to population; physical education needs to want to change!</li> <li>• Development of teachers who would disseminate good practice – need for sustained professional development</li> <li>• Teacher education program needs to help new teachers understand how to be a community advocate and program advocate</li> </ul>
<b>Community/PE/sport-linked programs</b>	<ul style="list-style-type: none"> <li>• Creating awareness of health issues and the benefits of PE by PE program, fitness test</li> <li>• Holistic approach of implementing healthy program in community as well as encourage people to do so</li> <li>• Change the surrounding (no elevators, playgrounds at school, playgrounds everywhere, village/cities green, safe cross overs at streets, etc.) Create a “move friendly” surrounding</li> <li>• Open schools on the weekends for leisure and play</li> <li>• School is center of the community; place social service in the school (8 months a year; inform parents) (Venezuela)</li> <li>• Make day arrangements; integrate groups of PE and sports in school</li> <li>• Empowerment of parents; people in the community</li> <li>• Include day arrangements; school and weekend arrangements, playgrounds</li> <li>• Problem-solving skills (in poor communities)</li> <li>• A coordinated school and community-based physical activity package should be offered to the local citizens</li> <li>• Pupils should have the access to sport facilities not only in the morning but also in the afternoon</li> <li>• Communities should support family sport programs</li> <li>• Open up spaces for physical activity in school and in the community (parks, tracks for biking, hiking etc., new ways should be developed to use those spaces)</li> <li>• Opening up for different solutions for different schools and communities for empowerment and the pleasure of eating and moving</li> <li>• Streets alive – students demonstrate teaching PE skills. Students engaging with community</li> <li>• Provide the community with “free” lectures/courses to learn and become more educated</li> <li>• Pick a time each year (1 week) and open all local community exercise classes to the public to experience</li> </ul>

**Table 3 (cont.)**

Core Categories	Comments
	<ul style="list-style-type: none"> <li>• Involve the seniors in the community – have the exercise with grandchildren/children</li> <li>• Kindergarten – High School. Three sports clubs per week come to the school and present to students</li> <li>• Sport clubs offer “Open Days” for families to try the club ~ advertise through school and Internet</li> <li>• Involve all stakeholders in an active community “Wellness Committee” ~ school, hospital, health, government, parents, business representatives: “purpose of more healthy living, especially for children”</li> <li>• Go local</li> </ul>
<b>Healthy living/well-being activities</b>	<ul style="list-style-type: none"> <li>• Teach all teachers to know about health</li> <li>• Provide students with healthy foods—fruits—change lesson plans to focus on healthy foods</li> <li>• Message of well-being ~ use new and many different ways to communicate</li> </ul>
<b>Technology: Share and support dissemination</b>	<ul style="list-style-type: none"> <li>• Better use of technology</li> <li>• Need not to talk to ourselves but sometimes need to develop communication strategies (university people and curriculum directors!), speak with the important stakeholders in a language that they can understand</li> <li>• Importance of mass media – information and dissemination!</li> <li>• New ways of communication</li> <li>• Develop/use new ways of disseminating message and knowledge of well-being – for example, through technology tools</li> <li>• This involves questions of redefinitions to develop communication</li> </ul>
<b>Student voices/needs</b>	<ul style="list-style-type: none"> <li>• We should involve the voices of children and youths (ideas) into the decision-making processes!</li> <li>• We should bring in their thoughts, competences, and creativity</li> <li>• Children and youth voices</li> </ul>
<b>Cultural competence</b>	<ul style="list-style-type: none"> <li>• Awareness of culture change to create the strategies, long-term plan</li> <li>• Using cultural or traditional sport for exercise</li> <li>• Networking, understanding different cultures! Enlarge understanding between states</li> <li>• Get practice on the ground (people and children and structure!); ultimately it is the own cultural way</li> <li>• Pay more attention to cultural and individual differences</li> <li>• Learn from each other (countries and disciplines)</li> </ul>
<b>Political approach</b>	<ul style="list-style-type: none"> <li>• Achieve political influence</li> </ul>
<b>Research</b>	<ul style="list-style-type: none"> <li>• Need for valuing research and the work of physical educators</li> <li>• Research for basic survey of health behavior</li> </ul>

## Discussion

The open coding methodology provided a useful tool to analyze the responses gained from the six discussion groups participating in GoFPEP 2012. The authors were able to effectively sort and categorize responses into broader, more generic categories to guide further action. It was evident in reviewing the analysis that schools and other community resources need to be open and available for leisure, play, and sport activities. A holistic strategy was called for that should be implemented and encouraged in the entire community. In other words, all community resources must participate in this process for programs and services to be provided in an effective fashion (Chin, Yang, Edginton, Tang, & Phua, 2010; Kriemler et al., 2011). The involvement and cooperation of parents and communities is essential in providing effective physical education programs and encouraging physical activity among children and youth (Carson & Reiboldt, 2011; Eagle et al., 2012; Katz, 2009; Katz et al., 2011; Naul, 2012; Van Acker et al., 2011; Van Lippevelde et al., 2012). Parents

**Table 4**  
*Strategies for Building a Global Network*

Core Categories	Comments
<b>Change physical education</b>	<ul style="list-style-type: none"> <li>Combine more disciplines; with different backgrounds, work together, share knowledge</li> <li>Start with the definition; with a same set of elements, develop a flexible but worldwide PE standard with physical activity combined (PE should stop being a separate class; physical activity and PE should be integrated)</li> <li>There is a need for PE to change; it is a must (USA)</li> <li>At ground level – changes by giving 3 hours gym, every break is active and good food!!</li> </ul>
<b>Role models</b>	<ul style="list-style-type: none"> <li>Model schools in every country, need for a specific model</li> <li>Build a model school program on each continent for everyone to visit and see; then expand to build a model school program in each country</li> </ul>
<b>Community/PE/sport-linked programs</b>	<ul style="list-style-type: none"> <li>Use “Universal Values” (Olympic Curriculum)</li> </ul>
<b>Technology: Share and support dissemination</b>	<ul style="list-style-type: none"> <li>Sharing the information all around the world, forum, journal, personal exchange, collaboration in research</li> <li>Use technology to build a network of sharing ideas, especially for teachers and teacher prep, exchange of ideas</li> <li>Build a platform for action with interventions that are relatively easy to implement</li> <li>Use new technologies and developments; although electricity (sometimes) is not working in Africa, for example, everybody has a telephone; use apps, new knowledge, share knowledge. Use the new developments</li> <li>Common Web-based program with cultural adaptation ± translation!</li> <li>Not another new network – just bring together the existing networks</li> <li>Create a solid platform that is open to everybody, using existing IT tools. It could help to find information on criterias for quality physical education, successful models, outcomes, benefits, platform for discussions</li> <li>Website portal – upload videos, documents, etc., to disseminate good practices and how it was done. Link global national associations. Allow people to post questions for discussion.</li> </ul>
<b>Cultural competence</b>	<ul style="list-style-type: none"> <li>Start networking, connect cultures, gap bridges, try to understand other cultures and habits and learn from each other, exchange programs</li> </ul>
<b>Global programs/perspective</b>	<ul style="list-style-type: none"> <li>There is in many countries a need for capacity building. Bring teachers to Africa, for example, and share knowledge; educate young people, instruct them</li> <li>Continue Global Forum</li> </ul>
<b>Research</b>	<ul style="list-style-type: none"> <li>Do more qualitative research methodology; motivation? Interest? Why?</li> </ul>

can instill healthy behaviors in children at a young age, thereby circumventing challenges that emerge in later life (Anzman, Rollins, & Birch, 2010; Wang et al., 2008). Parents with dietary habits focused on promoting healthy nutrition and encouraging a regimen of daily activity can support the development of healthy behaviors among their children. A healthy diet and physical activity are critical preventive strategies that can address the long-term consequences of poor choices made in one's childhood and adolescence and carried into later life (Pietrobelli, Espinoza, & De Cristofaro, 2008).

Another major theme that emerged from the open coding was the role that technology would play in future initiatives. It was identified that technology could be used to build a network for sharing information, knowledge, skills, and best practice throughout the world. It is evident technology can be used to move and share information to enable professionals to gain greater perspectives and insights into effective program implementation. In this sense, GoFPEP can continue to reveal and expand best practice, advance the use of technology, and use community resources.

Heart rate monitors, pedometers, accelerometers, Nintendo Wii, Dance Dance Revolution, XBox, Eye Toy, geocaching, and YouTube are forms of technology that have emerged that may generate interest, speed up energy output, and encourage greater motivation for participation in physical activity. Also, such technological devices may promote greater accountability (Dale, Godinet, Kearse, & Field, 2009). Kuczala, Lengel, and Kuczala (2010) suggested such technological developments provide individuals with the opportunity to exercise with great freedom in a self-directed fashion. HOPSports provides a digital media platform that makes physical activity fun and relevant by using 3D animation and motion graphics and has been successfully implemented in school and nonschool settings. HOPSports Brain Breaks are aligned with current research stating that learning is processed and enhanced through movement (Kuczala et al., 2010).

The discussion groups called for changing physical education. There is a need for new models of physical education that engage the 21<sup>st</sup> century learner. New ways to teach physical education need to be explored, ones that may appeal to children and youths that may otherwise not like or participate in traditional physical activities. There was a call for integrating health, physical education, and technology into the school curriculum. Emphasis was made on focusing on the social nature of physical activity often found in more spontaneous informal settings. The importance of developing a student-centered curriculum where the voices of children and youths are included in the decision-making process was identified. An additional area of emphasis was the importance of ensuring cultural competence among physical education teachers.

In a landmark article titled “Physical Education’s Role in Public Health” published in *Research Quarterly for Exercise and Sport* in 1991, Sallis and McKenzie suggested the term *health-related physical education* should be replaced with term *health-optimizing physical education* (HOPE; as cited in McKenzie, 2012; Sallis et al., 2012). They offered that this term is much broader and implied “health-related physical activity and fitness... [keeping]... students active for 50% of class time; engaging all students, regardless of physical ability; and significantly contributing to students’ overall physical activity preparation, thereby improving their health” (Sallis et al., 2012, pp. 131–132). GoFPEP attempts to bring voices from throughout the world together into a format where ideas can be shared. The forum has allowed participants to pay more attention to cultural and individual differences among people, programs, and countries. As the world is becoming increasingly globalized, it becomes apparent one must also learn to support and recognize differences. The rate of change worldwide challenges all to become more sensitive to cultural changes and, at the same time, pay more attention to individual differences.

GoFPEP seeks voices from across many segments of society including teachers, administrators, government officials, and leaders from the business community. However, the majority of those participating in GoFPEP are drawn from the academic world: university communities. It is interesting to note there was little mention of research (three responses). It is as if the members of the group know and understand a challenge exists that must be addressed and do not feel that they can wait for evidence-based or other type of research to offer solutions to problems.

## Conclusion

The discussion group program of GoFPEP 2012 was the culminating event, capping 2 days of intensive focus on community-based networking to support healthy active lifestyles

from birth to death. Nearly 80 delegates representing 50 countries explored two major topics: (a) what innovative strategies can be employed to revitalize health and physical education pedagogy through community-based networking? (b) Can we build a global network focused on advancing health and physical education pedagogy? Delegates to GoFPEP 2012 were asked to identify what strategies could be employed to facilitate either of the two aforementioned questions. As is the case with any similar type of conversation and dialogue, the challenge will be putting into effect the ideas offered. The adage of environmentalist David Brower to “Think Globally, Act Locally” seemingly applies to the efforts of the delegates of GoFPEP 2012. It will be important for all to take the message offered in this analysis into local communities.

As GoFPEP has reframed itself as a social movement focused on bringing about change worldwide, the efforts and application of the delegates participating in the most recent event will be of interest to those participating in GoFPEP 2014. The challenges of today will remain in the future, and in fact, policies and programs that address current concerns will create a new set of conditions that require new solutions and new strategies and actions.

## References

Andersen, L. B., Harro, M., Sardinha, L. B., Froberg, K., Ekelund, U., Brage, S., & Anderssen, S. A. (2006). Physical activity and clustered cardiovascular risk in children: A cross-sectional study (the European Youth Heart Study). *Lancet*, 368, 299–304.

Anzman, S. L., Rollins, B. Y., & Birch, L. L. (2010). Parental influence on children's early eating environments and obesity risk: Implications for prevention. *International Journal of Obesity*, 34(7), 1116–1124.

Bauman, A., Allman-Farinelli, M., Huxley, R., & James, W. P. T. (2008). Leisure-time physical activity alone may not be a sufficient public health approach to prevent obesity: A focus on China. *Obesity Reviews*, 9(Suppl.), 119–126.

Bell, J., Rogers, V. W., Dietz, W. H., Ogden, C. L., Schuler, C., & Popovic, T. (2011). CDC grand rounds: Childhood obesity in the United States. *Morbidity & Mortality Weekly Report*, 60(2), 42–46.

Bogdan, R. C., & Biklen, S. K. (2007). *Qualitative research for education: An introduction to theories and methods* (5th ed.). Boston, MA: Pearson Education.

Brettschneider, W. D., & Naul, R. (Eds.). (2007). *Obesity in Europe: Young people's physical activity and sedentary lifestyles*. Frankfurt, Germany: Lang.

Brown, T., & Summerbell, C. (2008). Systematic review of school-based interventions that focus on changing dietary intake and physical activity levels to prevent childhood obesity: An update to the obesity guidance produced by the National Institute for Health and Clinical Excellence. *Obesity Reviews*, 10, 110–141.

Carson, D. E., & Reiboldt, W. (2011). An after-school program on nutrition and physical activity for elementary school children. *Family & Consumer Sciences Research Journal*, 39(3), 267–278.

Chin, M.-K. (2010). Epidemic obesity in school and community: Current issues on causes, consequences, prevention and management with an Asia Pacific perspective [Abstract]. *British Journal of Sports Medicine*, 44, i73. doi:10.1136/bjsm.2010.078725.239

Chin, M.-K., Yang, J. Z., Edginton, C. R., Tang, M. S., & Phua, K. W. (2010). School and community based physical education and healthy active living programs: Holistic practices in Hong Kong, Singapore and the USA. In D. Bagchi (Ed.), *Global perspective on childhood obesity: Current status, consequences and prevention* (pp. 345–357). Maryland Heights, MO: Elsevier/Academic Press.

Chopra, M., Galbraith, S., & Darnton-Hill, I. (2002). A global response to a global problem: The epidemic of over-nutrition. *Bulletin of the World Health Organization*, 80, 952–958.

Corbin, J., & Strauss, A. (2007). *Basics of qualitative research: Grounded theory procedures and techniques* (3rd ed.). Newbury Park, CA: Sage.

Dale, S., Godinet, S., Kearse, N., & Field, A. (2009). *The future of fitness: A white paper*. Retrieved from [http://www.lesmills.com/files/globalcentral/docs/Future%20of%20Fitness%20White%20Paper\\_Nielsen%20&%20Les%20Mills\\_final\\_Jan%202010.pdf](http://www.lesmills.com/files/globalcentral/docs/Future%20of%20Fitness%20White%20Paper_Nielsen%20&%20Les%20Mills_final_Jan%202010.pdf)

Dewey, J., & Childs, J. L. (1933). The social-economic situation and education. In W. H. Kilpatrick (Ed.), *The educational frontier* (pp. 32–72). New York, NY: D. Appleton-Century.

Eagle, T. F., Sheetz, A., Gurm, R., Woodward, A. C., Rogers, E. K., Leibowitz, R., . . . Eagle, K. A. (2012). Understanding childhood obesity in America: Linkages between household income, community resources, and children's behaviors. *American Heart Journal*, 163(5), 836–843.

Edginton, C. R., Chin, M.-K., Gadelmann, P., & Ahrabi-Fard, I. (2011). Global Forum for Physical Education Pedagogy 2010 (GoFPEP 2010): Health and physical education pedagogy in the 21st century – A statement of consensus. *International Journal of Physical Education*, 48(2), 33–41.

Edginton, C. R., Chin, M.-K., & Naul, R. (2012). The Global Forum for Health and Physical Education Pedagogy: A new social movement. *International Journal of Physical Education*, 49(3), 31–39.

Flegal, K. M., Carroll, M. D., Ogden, C. L., & Curtin, L. R. (2010). Prevalence and trends in obesity among US adults, 1999–2008. *The Journal of the American Medical Association*, 303(3), 235–241.

Goldman, H., & Patton, L. (2012, September 13). *NYC health panel backs Bloomberg ban of super-size sodas*. Retrieved from <http://www.bloomberg.com/news/2012-09-13/nyc-health-panel-backs-bloomberg-ban-on-super-size-sugar-drinks.html>

Gutin, B. (2008). Child obesity can be reduced with vigorous activity rather than restriction of energy intake. *Obesity*, 16(10), 2193–2196.

Hartman, K., & Green, K. (2011). *Contemporary issues in physical education*. Maidenhead, United Kingdom: Meyer & Meyer Sport.

Herring, M. C., Edginton, C. R., Gadelmann, P. L., & Chin, M.-K. (2012). Emerging perspectives on learning and technology in physical education: Policy implications. In S. Sanders & L. Witherspoon (Eds.), *Contemporary uses of technology in K-12 physical education: Policy, practice and advocacy* (pp. 21–53). Charlotte, NC: Information Age.

Hills, A. P., Andersen, L. B., & Byrne, N. M. (2011). Physical activity and obesity in children. *British Journal of Sports Medicine*, 45, 866–870.

Katz, D. L. (2009). School-based intervention for health promotion and weight control: Not just waiting on the world to change. *Annual Review of Public Health*, 30(1), 253–272.

Katz, D. L., Katz, C. S., Treu, J. A., Reynolds, J., Njike, V., Walker, J., . . . Michael, J. (2011). Teaching healthful food choices to elementary school students and their parents: The Nutrition Detectives™ Program. *Journal of School Health*, 81(1), 21–28.

Ki-moon, B. (2011, September 19). *Remarks to general assembly meeting on the prevention and control of non-communicable diseases*. New York, NY: The United Nations.

Kriemler, S., Meyer, U., Martin, E., Van Sluijs, E. M. S., Andersen, L. B., & Martin, B. W. (2011). Effect of school based intervention on physical activity and fitness in children and adolescents: A review of reviews and systematic update. *British Journal of Sport Medicine*, 45, 923–930.

Kuczala, M. S., Lengel, T., & Kuczala, M. (2010). *The kinesthetic classroom: Teaching and learning through movement*. Thousand Oaks, CA: Corwin Press.

Kumanyika, S. K., Rigby, N., Lobstein, T., Leach, R. J., & James, W. P. T. (2010). Obesity: Global pandemic. In P. G. Kopelman, I. D. Caterson, & W. H. Dietz (Eds.), *Clinical obesity in adults and children* (3rd ed., pp. 423–239). Oxford, United Kingdom: Wiley-Blackwell. doi:10.1002/9781444307627.ch31

Lichtenstein, A. H., Appel, L. J., Brands, M., Mercedes, C., Daniels, S., Franch, H. A., . . . Wylie-Rosett, J. (2006). AHA scientific statement: Diet and lifestyle recommendations revision 2006: A scientific statement from the American Heart Association Nutrition Committee. *Circulation*, 114, 82–96.

McKenzie, T. L. (2012). *Evidence-based outcomes of youth obesity intervention studies in the USA: A critical review*. A keynote presentation at the Global Forum for Physical Education Pedagogy 2012, Velen, Germany.

Morlanda, K. B., & Evensonb, K. R. (2009). Obesity prevalence and the local food environment. *Health & Place*, 15(2), 491–495.

Naul, R. (2012). European Union multisector strategies to enhance health, physical education, and physical activities for children and youth. *The Global Journal of Health and Physical Education Pedagogy*, 1(1), 22–41.

Pietiläinen, K. H., Kaprio, J., Borg, P., Plasqui, G., Yki-Järvinen, H., Kujala, U. M., . . . Rissanen, A. (2008). Physical inactivity and obesity: A vicious circle. *Obesity*, 16(2), 409–414.

Pietrobelli, A., Espinoza, M. C., & De Cristofaro, P. (2008). Childhood obesity: Looking into the future. *Angiology*, 59(2), 30S–33S.

Procter, K. L. (2007). The etiology of childhood obesity: A review. *Nutrition Research Reviews*, 20, 29–45.

Sallis, J. F., McKenzie, T. L., Beets, M. W., Beighle, A., Erwin, H., & Lee, S. (2012). Physical education's role in public health: Steps forward and backward over 20 years and HOPE for the future. *Research Quarterly for Exercise and Sport*, 83(2), 125–135.

Van Acker, R., de Bourdeauhuij, I., de Martelaer, K., Seghers, J., Kirk, D., Haerens, L., . . . Cardon, G. A. (2011). Framework for physical activity programs within school-community partnerships. *Quest*, 63, 300–320.

Van Lippevelde, W., Verloigne, M., De Bourdeauhuij, I., Brug, J., Bjelland, M., Maes, L. (2012). Does parental involvement make a difference in school-based nutrition and physical activity interventions? A systematic review of randomized controlled trials. *International Journal of Public Health*, 57(4), 673–678. doi:10.1007/s00038-012-0335-3

Wang, L., Gutin, B., Barbeau, P., Hanes, J., Johnson, M., Cavnar, M., . . . Yin, Z. (2008). Cost-effectiveness of a school-based obesity prevention program. *Journal of School Health*, 78(12), 619–624.

Yang, Z. J., Liu, J., Ge, J. P., Chen, L., Zhao, Z. G., & Yang, W. Y. (2012). Prevalence of cardiovascular disease risk factor in the Chinese population: The 2007–2008 China national diabetes and metabolic disorders study. *European Heart Journal*, 33(2), 213–220.

Zuga, K. (1992). Social reconstruction curriculum and technology education. *Journal of Technology Education*, 3(2), 48–58.