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Can Tokyo Olympics Help Heal the World?

By Penny McCullagh, Ph.D., KT Editor

“Olympism is a philosophy of life, exalting and combining in a balanced whole the qualities of body, will and mind. Blending sport with culture and education, Olympism seeks to create a way of life based on the joy found in effort, the educational value and good example and respect for universal fundamental ethical principle.”
<https://www.olympic.org/the-ioc/promote-olympism>

Dr. Bruce Kidd, a professor of sport and public policy at the University of Toronto

is well-versed in Olympism. Bruce competed in the 5- and 10-meter events at the 1964 Tokyo Olympics. In addition to his expertise as an athlete, he is also a well-recognized researcher. His inter-

ests span the history and political economy of Canadian sport, the Olympic, Paralympic



Bruce Kidd

The American Kinesiology Association will hold its 14th annual Leadership Workshop virtually January 27-28, 2021. The workshop brings together over 150 kinesiology leaders, administrators, and faculty who are committed to advancing our discipline as a unified field of study. The workshop provides a unique opportunity to network with others engaged in university administration and with those who are interested in increasing their leadership knowledge and skills for effective administration of kinesiology departments. Two pre-workshop sessions will be offered prior to the AKA Leadership Workshop.

Leadership Workshop Theme: “Leading through Times of Uncertainty: The Future of Higher Education, Work, and Kinesiology”

and Commonwealth Games, sport and public policy, and sport for the development of peace. He is a well-published author of research articles and books and has been recognized by the National Academy of Kinesiology as an International Fellow in 1998 (<https://nationalacademyofkinesiology.org/>). In addition, he was the founding dean of the University of Toronto's Faculty of Kinesiology and Physical Education. He has received many honors and awards and is an honorary member of the Canadian Olympic Committee. He recently co-chaired a federal-provincial-territorial working group on women and sport whose recommendations led Canadian sports ministers to step up their efforts to [combat gender-based violence in sports](#).

I read with interest a recent article Dr. Kidd wrote for *The Conversation* (see link below) and encourage you to do so also. He advocates that perhaps the Japanese can redo some of the things they did in 1964 to help affirm internationalism and intercultural understanding. In this article he relays his experience as an athlete at the Tokyo Olympics in 1964. The Olympics followed the Second World War and the atomic bombings in Japan. There was obviously a lot of healing needed. He talked about the beautiful stadium and parks and revitalization of venues across the country. He also relayed that every athlete had an

opportunity to have dinner with a Japanese family to learn a little about their culture.

Dr. Kidd suggests that the spirit of Olympism has been lost in recent years and some athletes pop in and out of the games for their event and learn little about where they are or about the culture they are in. I wanted to gain some further insight from Dr. Kidd so I asked him a few questions:

1. We are certainly living in difficult times and the pandemic has led to divisiveness in the world. In fact, the summer of 2021 may be too soon to allow international travel. If the Olympics, and Paralympics are held, what steps do you think Japan can take to embrace the Olympic spirit?

I believe that the rescheduled 2020 Olympics should not take place until every one of the 206 national communities that make up the Olympics has free access to the hoped-for vaccine to prevent the spread of the virus (or other public health measures that will enable the Games to go ahead.) The International Olympic Committee (IOC) and the Tokyo Organizing Committee need to work with the World Health Organization to bring this about.

When the next Games do take place, the focus should be upon bringing the world back together under healthy, inter-

cultural auspices, to combat the xenophobia, racist scapegoating and violence against minorities that has been exacerbated by COVID-19. I would love to see a revised or augmented Opening Ceremony that artistically and symbolically shows the world that the Olympic Movement strenuously opposes discrimination of every kind, includes athletes, coaches and officials of every background and affords them all respect and dignity. In the past, the Olympic flag was brought into the stadium by athletes from the host nation but perhaps from now on, it could be carried in by athletes representing every continent, gender, major religion and racial background instead. No doubt there are other ways in which Olympic commitment to dignity and respect for all could be dramatized. I am very impressed by the way NBA players and coaches have shown respect and friendship for each other before and after games, especially during this difficult year. I know many Olympic athletes have close friendships with competitors from other countries—perhaps the IOC could encourage more of them to show that respect on the field of play.

I would also like to see the next Olympics take a major stand for human rights, and signal this in the Opening and Closing Ceremonies. While the IOC proclaims that

'the practice of sports is a human right', opposes discrimination in the Olympic Charter, and increasingly supports the protection of human rights in other ways, it does nothing concretely to protect these rights, nor provides a mechanism whereby injured persons can seek redress for the violation of their rights. This shortcoming has been extensively documented, most recently in a report by the United Nations High Commissioner for Human Rights; see <https://undocs.org/en/A/HRC/44/26>. Wouldn't it be great if during the Opening Ceremonies, the IOC president and the chair of the Athletes Council together jointly called upon the sports bodies and governments of the world to respect human rights?

2. Tell us a little bit about what you do in Canada to prepare athletes for their experience at the Olympics – and how do you do this?

I'm no longer directly involved in the briefing of Canadian athletes for the Olympics, and I fear that the focus is primarily upon performance-related issues, such as travel arrangements, sports medicine, the conditions in the Village, and so on. But when I was involved, the briefings included sessions on the Olympic values and the culture of the host country. For

the 1988 Olympics in Seoul, for example, we invited the Canadian-Korean Council to provide a day-long introduction to the history of Korea, the complexities of Korean communication and the richness of Korean culture, food and the arts.

3. Are you aware of what other countries do to prepare athletes for different cultures?

I am no longer on top of what's happening in other National Olympic Committees.

I think where cross-cultural exchange happens best is at the Youth Olympic Games, where every athlete is expected to participate in intercultural and cultural activities.

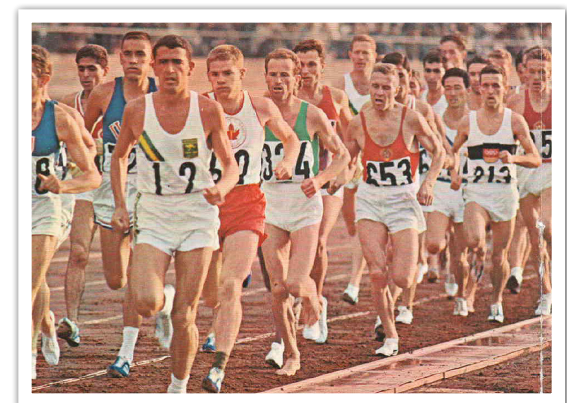
4. What are your hopes for the upcoming games?

Whenever it's safe for everyone to participate, I hope the Games are held, no matter how austere the conditions. That's what happened after World War I and World War II—Antwerp 1920 and London 1948 were very modest Games. Proportional to GDP, the budget for London 1948 was 1/70th of the budget for London 2012. I know that there will be thrilling performances but the focus should be upon bringing the world safely and harmoniously back together.

At the same time, I hope there will be focus on 'building back better'. As you say, COVID-19 has exposed the inadequacies and inequalities in every aspect of our societies, including sport. In response, many people are determined to 'build back better'. I recently worked on such a report for the Commonwealth; see <https://thecommonwealth.org/implications-covid-19-community-sport-and-physical-activity>.

I would like to think that the Olympic Movement and the Tokyo Organizing Committee would plan for rescheduled Olympics with the same ambition. For me, that would start with a renewed emphasis upon human rights in sports.

<https://theconversation.com/how-the-rescheduled-tokyo-olympics-could-heal-a-post-coronavirus-world-134757>



Kidd (in red shorts) running in the 10K at the 1964 Olympics

PRESIDENT'S COLUMN

Join Us in January for Our Annual Gathering of Kinesiology Leaders

Alan L. Smith, Ph.D., President, American Kinesiology Association



Al Smith

We continue to problem-solve, adapt, and pivot our energies at a dizzying pace as the COVID-19 pandemic continues, testing our leadership skills and our well-being. This has introduced incredible challenge to our lives, while also cultivating innovation, wisdom, and an acute interest in what the future will look like for higher education and kinesiology. There is much for kinesiology to gain by its leaders sharing the lessons learned thus far and reflecting on the possibilities for strengthening and advancing the field. I hope that you will actively participate in our annual gathering, which is focused on *Preparing Kinesiology for the Evolution of Higher Education and the Workplace*. The annual workshop will take place in a virtual format on January 27 and 28, 2021.

You can learn more about our workshop theme and invited guests as well as find general information on the AKA website [here](#). Registration links and sponsorship

information are forthcoming. Importantly, as in the past, you will be able to submit to present at the workshop and/or one of the pre-workshop sessions (*November 13 deadline*). I hope you will actively participate in this way, as there is much for us to learn from one another – about how to navigate our present work challenges, take care of ourselves, and effectively plan for coming (and accelerated) changes in higher education and the workplace in ways that enable kinesiology to thrive.

In light of the virtual format of this year's meeting, you may submit presentations for the *main workshop* that are pre-recorded (5- to 7-minutes maximum, incorporating slides or other media as desired). The presentations will be made available for viewing by workshop attendees during the week of the workshop. In one of the workshop sessions we will hold simultaneous moderated group discussions in virtual rooms. The discussions will be facilitated by authors of the presentations, with discussions organized by subthemes. Attendees will have opportunity to “rotate” to other discussions during the session, much like our roundtable format in the past.

There will be two concurrent *pre-workshops* this year. The workshops are hosted by two new groups that we are developing – the *Undergraduate Education Network* and the *Graduate Education Network*. It is our hope that these networks will come to meet the needs and interests of kinesiology program directors. Pre-workshop presentations will be given live or pre-recorded and displayed within the pre-workshop session (with author available for questions and interactive activity). Time available for presentations will depend on submissions relative to program time and will be selected by the organizing committee based on thematic coherence.

Guiding subthemes are offered below; however, as a general rule the most competitive submissions will be those that link closely to the overall workshop theme. We encourage presenters to address how their leadership efforts will position kinesiology to thrive in a changing higher education and workplace context. Specifically, *how are we working toward a vibrant, equitable, and impactful kinesiology as we look ahead a decade or two?*

Preferred subthemes for the *Main Workshop* include:

- Crisis leadership
- Demographic shifts in college-going students
- Inclusive Excellence
- Preparing students for work opportunities of the future
- Surviving and thriving in the evolving higher education context

Please direct questions to Al Smith (alsmith@msu.edu)

Preferred subthemes for the *Undergraduate Education Pre-workshop* include:

- Engaging learners in asynchronous, synchronous, and hybrid learning
- Juggling multiple learning modalities
- Lessons learned from the COVID-19 crisis
- Leveraging technology for success
- Technology and physical activity instruction

Please direct questions to Heather Van Mullem (hivanmullem@lcsc.edu) or Sarah Price (sarah.price@famu.edu)

Preferred subthemes for the *Graduate Education Pre-workshop* include:

- Mentoring faculty – to tenure and beyond
- Mentoring students – to degree and beyond
- Online programs and the future of graduate education
- Preparing graduate students for academic life
- Recruitment and retention of students as higher ed evolves
- Retaining faculty in a context of ever-increasing demands

Please direct questions to Steven Petruzello (petruzze@illinois.edu)

Because of the virtual format of this year's gathering, there are fewer barriers (e.g., financial, travel) to participation than usual. In light of this, I hope that you will strongly encourage colleagues from your institution to participate in our main workshop and pre-workshops. We have a wonderful opportunity to introduce emerging leaders to our organization, but this may require some gentle nudging from you. Please offer that encouragement, and also do not

forget to alert your Deans that we will again hold a forum specific to their interests on January 27. Stay tuned for more information on the Dean's Forum over the coming month – we will send that information to you directly and include it on our website.

Serving as President of AKA this year has presented its challenges, but it has been especially gratifying. I have the privilege of engaging with you, a diverse span of dynamic, thoughtful, and committed kinesiology leaders who have kept us moving in productive and exciting directions. I very much look forward to coming together in January to chart a course for the future of kinesiology. Please invite your colleagues to join us, and know that your leadership efforts are especially valuable and valued as we navigate the uncertainties of this academic year and beyond.

Adapting Research During Covid-19

By Penny McCullagh, Ph.D., KT Editor (With a little help from my friends and colleagues)

Well the last six months have created havoc with many ongoing research projects. In the Summer 2020 issue of KT, I reported on "Research During the Covid-19 Pandemic" and some of the obstacles that researchers were facing. I wanted to solicit some ideas on how individuals are adapting, modifying, creating, and maintaining their research. Here are a few examples:

Physical Programming for Post-Secondary Student Mental Health: Transitioning to Online Delivery

Department of Kinesiology, Mental Health and Physical Activity Research Centre, University of Toronto

MoveU.HappyU is a 6-week, one-on-one and individualized physical activity program focused on student mental health. At the University of Toronto (U of T), the program is tailored towards students seeking mental health support and is offered through the Mental Health and Physical Activity Research Centre. The principle investigator, Dr. Catherine Sabiston, and the program coordinators Melissa deJonge, Sonia Jain, David Kuzmochka-Wilks and

Vaylen Petrella have successfully adapted the in-person program to be offered in an online format. Key program components were maintained when the program was adapted to online delivery. Specifically, students engage in weekly, one-on-one exercise sessions that offer behavior change coaching (i.e., strategies such as goal setting, planning, and self-monitoring) and individualized support to engage in exercise as a mental health and well-being strategy. In addition to the online program offered to students, Catherine Sabiston and her MSc student Melissa deJonge have used an online data collection method, and phone-based interviews to understand post-secondary mental health care providers' perceptions of physical activity as a mental health treatment approach. Taken together, our successful transition during the COVID-19 pandemic can be attributed to the research team's ongoing teamwork and communication, continued collaboration with U of T's Sport and Recreation, and efficient introduction of new virtual platforms for online data collection and intervention delivery. If you would like more information on how we've adapted our research, please feel free to contact

Melissa deJonge (melissa.dejonge@utoronto.ca) or Catherine Sabiston (catherine.sabiston@utoronto.ca).

The Efficacy of Home Web-Based Rehab Program

Department of Physical Therapy, University of Maryland at Baltimore

This example was provided by Jill Whitall. The project was funded by the National Institute of Disability, Independent Living and Rehabilitation Research (NIDILRR). (Sandy McCombe Waller and Kelly Westlake are colleagues who serve as PIs.) The goal of the study is to compare a home-based, self-managed, web-based program for stroke rehabilitation with usual care in the form of written exercises to do at home. The original study required a research assistant to visit patients at home after their stroke. We asked NIDILRR for extra money to keep our research assistants employed but they were unable to provide any. We decided to find a way to conduct consenting, eligibility and the motor performance testing online and a better way to recruit potential participants. Here are the steps we took and how we accomplished this:

1. Contacted IRB to allow verbal consent followed by participants returning their signature at a later date. In addition, we proposed to administer the motor components of the eligibility and the motor testing over an audio-visual platform (Zoom or Microsoft Teams). It was approved.
2. Contacted NIDILRR with changes and received approval.
3. Contacted an organization called ResearchMatch <https://www.researchmatch.org/> to assist with subject recruitment since we could technically have participants from all over the world. This service is free for IRB approved studies and has an American database where they match your eligibility criteria with their database and region (for non-online studies).

The project is ongoing and you can follow up in a few months to determine its success.

Sex Differences in Automatic Affective Associations Related to Sport

Department of Kinesiology, Health Behaviour and Emotion Lab, University of Toronto

Before the pandemic, the researchers at the Health Behaviour and Emotion lab at the

University of Toronto were running a study examining differences between girls and boys in their automatic affective associations related to sport. Adolescents were invited into our lab to complete a questionnaire and a reaction time task whereby participants sorted sport and non-sport images into good and bad labelled categories. However, after in-person research shut down in early March, we had to adapt our study protocol.

Our team identified the online experiment software “Psychstudio” which allows researchers to customize study protocol for online reaction time experiments. Shifting from our in-person software to the online software was challenging. It required a lot of trial and error and our research assistant Alyona Koulanova did a fantastic job identifying small details that allowed our online protocol to closely resemble the in-person protocol. After a few weeks of pilots with varying degrees of success, our team was able to get the experiment up and running smoothly!

One of the biggest challenges was shifting our participant recruitment strategy. Just before the pandemic we organized in-person participant recruitment at the local March break sports camps. However, we had to cancel only a few days before it was scheduled. Our research assistant Tiahn Den Houdyker did an amazing job

organizing and implementing our virtual recruitment strategy by liaising with parents, obtaining appropriate consent forms and administering participant compensation. We have recently wrapped up data collection and are now in the process of analyzing the data. If you have any questions please contact Ross Murray at rm.murray@utoronto.ca

The Effect of the Coach-Athlete Relationship on Mental Health, Adaptive Coping and Psychological Skills: Profiles of Adolescent Athletes in Greater Lansing, Michigan

Department of Kinesiology, Michigan State University

Kapule David Mabuta, a kinesiology doctoral student working with Leapetswe Maletse at Michigan State University (MSU) received funding from MSU's College of Education Summer Research Fellowship program to do a study on how coach-athlete relationships affect mental health, adaptive coping, and psychological skills of adolescent athletes in Botswana. The primary hypotheses to be tested in this study is whether coach-athletes relationships predict youth mental health and if adaptive coping depend on athletes' psychological skills profiles. This study would have been the first of its kind in Botswana, but part of the broader

research on international dimensions of youth psychosocial development through sport and physical activity led by Leps Malete's research group at MSU's Institute for the Study of Youth Sport.

The original plan for the study was for David to travel to Botswana to administer questionnaires in person. IRB approval was obtained from MSU, but COVID-19 hit while the external IRB application in Botswana was still in progress. In response to the pandemic, Botswana put in place very strict lockdown, testing and quarantine guidelines, and banned all international travel. There was uncertainty about reopening and when IRB applications will be considered. Doing the study in Botswana was no longer feasible so the decision was to do this in Michigan. Just when a modification application was about to be submitted to MSU IRB, MSU responded to new cases of COVID-19 in the state by restricting on-campus movement, moving all instruction online, and suspending all in-person research activity. This was

followed by lockdowns at state level. An IRB modification that included an online survey, broadening the age range, and types of youth sport programs was approved. These changes were time consuming, labor-intensive, and anxiety-inducing. This was mainly because the situation remained very fluid and youth sport programs were not allowed throughout the summer and early fall. The stakes are high because the data will be used to meet practicum requirements in the doctoral program. The subject recruitment and data collection process are ongoing but extremely slow because youth sport programs began in September. David has to rely on referrals and the goodwill of youth coaches and their athletes at a time when the online space is extremely crowded and inducing a lot of fatigue. It remains to be seen what the response rate will be and what the overall impact of COVID-19 is going to be on youth sport research. Contact mabutaka@msu.edu and malete@msu.edu for more details.

There Are Good Guys!

A Spanish triathlete had been trailing behind James Teagle from England for the entire race in the 2020 Santander Triathlon held in September. Just a few yards from the finish line, Teagle took a wrong turn that would allow Diego Métrida to cross the finish line in third place. When Diego realized what happened he stopped and let Teagle cross the line first. His display of sportsmanship went viral and the race organizers awarded him honorary third place and the same prize money. You can see what happened in the Runner's World post

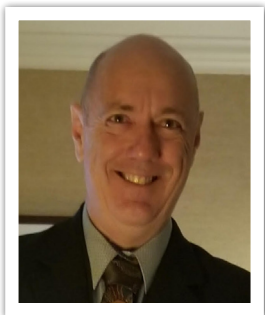
<https://www.runnersworld.com/uk/news/a34094132/spanish-triathlete-gives-up-his-medal/>

Delivering Physical Education Virtually

By Penny McCullagh, Ph.D., KT Editor

In the Summer issue of KT, there was a story on the value of physical education and Dr. Colin Webster, a pedagogy specialist relayed the importance of universities working with school systems to insure best practices in the development of curriculum. Well, Dr. Peter Hastie, from the Department of Kinesiology at Auburn University is trying to do just that. Portland Public Schools in Oregon has near 50,000 students and they were looking for some physical education content for their “virtual backpack”.

The School of Kinesiology at Auburn has for years been offering a class to about 1,000 students a semester, where students wear activity monitors and must reach step targets each week. The students download their data from their Movband (engagemoves.com) and their progress is monitored by their instructor. The goal as the semester progresses is 10,000 steps a day or 70,000 for the



Peter Hastie

week. The goal of this course, which is now available across the nation as “Active U”, is for students to develop self-regulatory skills and strategies to move them towards becoming active adults.

Dr Hastie is extending this concept of Active U for 4th and 5th grade students and presenting it as “Active Me”. Active Me consists of four modules, each of which lasts one school term (or nine weeks). The content for each week includes: a fact sheet, a mission possible task, and an activity target. Each student will receive a Movband purchased by the school district to monitor their activity levels, and will submit the results of their mission possible through their school’s learning management system.

The modules are designed to be Covid friendly, with the activities not requiring other participants (or not too many), using equipment that can be found around the house, and not needing a lot of space. The four modules are:

1. Me as a games architect – where students design their own target games

2. Me as a mover – where the focus is on being physically active

3. Me as a skillful player – where the focus is on how we learn new skills and improve on others

4. Me as a responsible mover – where the focus is on self-awareness and self-responsibility in physical activity settings.

The Media Production Group at Auburn University staff are working on the content so that it will be highly illustrated. The central characters are Rocky the Raccoon and his friend Felicia the Fox. They are joined by a band of other animal friends who learn and play together across the modules.

I asked Dr Hastie a few questions about the program he was designing.

1. A lot of people think physical education is all about playing sports. I don’t see that emphasis here at all. Tell us a little about the rationale for your curriculum.

I am a strong advocate for an autonomy supportive (versus controlling) teaching environment, even in the

best of times. Given that students in this project will ALL be experiencing different biographies, it does not make any sense to try to create a “one size fits all” curriculum. Rather, the goal is the let students solve problems and create enjoyable and meaningful activities that are specific to their very own backyard.

The being said, the modules align comfortably with the national standards for the development of physically literate students – perhaps even more so than current iterations of most programs nationally.

2. Are you aware of any programs that have used activity monitors with children and the success of such programs?

Many schools use various devices (e.g. pedometers, heart rate monitors) to either hold students accountable for their participation in class, and/or to help them understand the concepts of exercise intensity and other fitness knowledge. However, I’m not sure of any who have embedded it specifically with the promotion of out of school activity, and where it is formally aligned with the content of instruction.

3. Do you think you will have the opportunity to collect data so you can evaluate the success of your program?

It certainly would be great if we are able to get the responses of the various stakeholders involved in this project. That would include not only teachers and students, but also parents. The Engage Moves company is making the Movbands available to parents as well. Personally, apart

from the pragmatic issues relating to the challenges of implementation, I am mostly interested in how the students feel about the format of the delivery, and whether the possible missions and the lesson content motivated them to develop an identity as an “Active Me.”

If you want to learn more about the program please contact Dr. Peter Hastie at hastipe@auburn.edu



Robots Helping Kids Walk

By Penny McCullagh, Ph.D., KT Editor

“One in four U.S. adults – 61 million Americans – have a disability that impacts major life activities”, according to a report in CDC’s *Morbidity and Mortality Weekly Report* published in August of 2018. Mobility refers to difficulty walking or climbing stairs and is one on the major disabilities. Individuals with Cerebral Palsy (CP), particularly the 500,000 children with this condition, are especially susceptible to mobility concerns.

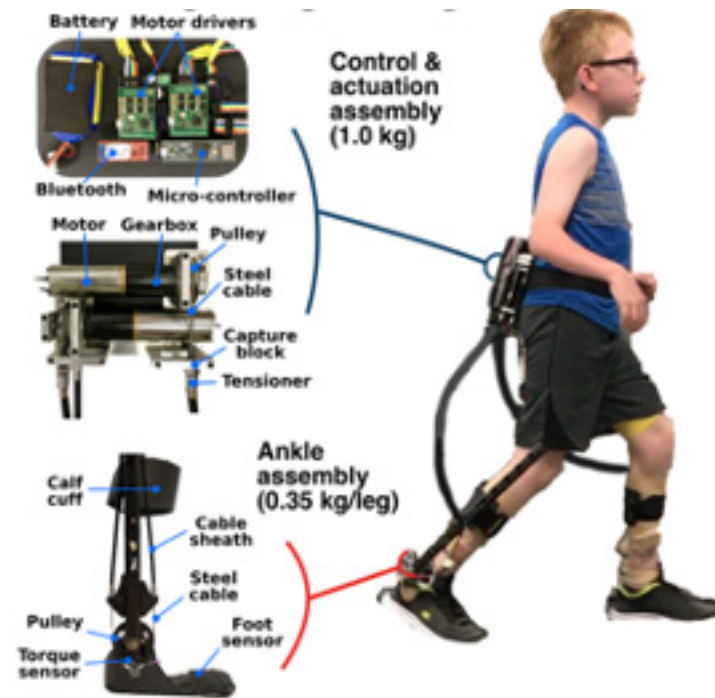
Dr. Zach Lerner, an Assistant Professor of Mechanical Engineering at Northern Arizona State University and Ray Browning who holds a Ph.D. with a specialty in Biomechanics, met at Colorado State University (CSU) while Ray was on the faculty in the Department of Health and Exercise Science and Zack was a Ph.D. student in Biomedical Engineering from CSU. Both Lerner and Browning investigate movement from a biomechanical perspective and both are former elite athletes – Zach, a rock climber and Ray, a tri-



Ray Browning

athlete. After his Ph.D., Zach began creating “robotic devices that offer a lightweight, portable, and effective way to improve mobility in children with Cerebral Palsy”. The creation of the device and research related to its effectiveness was the basis and underlying motivation for the formation of BiOMOTUM (<https://www.biomotum.com/>). BiOMOTUM is a rehabilitation robotics company that aims to change the trajectory of mobility in individuals with movement disorders like CP.

Part of the rationale for creating the assistive devices is based on their argument, that while physical therapy (PT) can certainly assist in mobility issues, most individuals do not get sufficient doses of PT to lead to long-term improvements in mobility. This is because they do not see a PT often enough and/or it’s difficult to get a sufficient number of steps during a session (due to fatigue). BiOMOTUM’s robotic ankle assist device (RA²D) can deliver gait training anytime, anywhere. The RA²D is a lower extremity exoskeleton that includes



a waistpack with motors, batteries and a control board, a carbon fiber ankle/foot assembly and cables that connect the motors to the ankle/foot assembly. The RA²D is lightweight, easy to use and can assist or resist ankle motion during walking, making it useful for getting around or engaging the rehabilitation. The device is

controlled by a phone and data from the device is stored in the cloud. This allows PTs and individuals to see the data from the device and either adjust their rehabilitation or share their data with other users.

An examination of the BIOMOTUM website provides some interesting videos that highlight children with CP and shows before and after footage of how they have improved their gait and walking capabilities as a result of wearing the device. What I really liked is that the site also contains links to scholarly publications testing the efficacy of the “robots”. Oftentimes we see all kinds of claims on the internet about how wonderful products are, but there is no evidence-based research to document the claims.

I wanted to learn a little more about how Ray and Zach started their company so I contacted Dr. Browning and asked a few questions:

How did you and Zach first meet and when did you realize that you had overlapping interests?

We met in 2010 when Zach contacted me about doing a PhD at Colorado State University. Zach was interested in putting his considerable engineering talents to use helping improve the lives of others. We had several research projects in the

lab, primarily around using biomechanic principles to devise better exercise programs for children and adults who were overweight or obese. We immediately hit it off and have been collaborating ever since.

You were a former academic in a typical university job and then moved on to work in the Sport Research Lab at Nike. From there you joined forces with Dr. Lerner to start a company. Tell us a little bit about that journey in the life of a biomechanist and how important is that you have a research background in your present role?

One of the most difficult professional decisions I have made was to leave an academic job that I enjoyed, to join Nike. The underlying motivation was impact: I felt I could make a larger impact at Nike than as a professor. My role as a manager was to lead a team of ~25 biomechanists, engineers and other very talented professionals as they worked on innovative concepts for future footwear. In hindsight, I don't think I fully appreciated the impact I was making as an academic and might make a different decision today. However, had I not taken the Nike position, I don't think Zach and I would have been able to start BiOMOTUM. Both Zach and I are technical founders and that is really important.

We can discuss aspects of the design as well as how to integrate feedback from users into the product. That would not be possible without my biomechanics and engineering background.

As you are well aware, Kinesiology is one of the most popular majors on many university campuses in the USA. What advice would you give to students or young professionals that may not want to pursue a “normal” stamped out career?

Yes, I am aware of the popularity of Kinesiology across the university landscape. At CSU, our department was one of the largest on campus. I think young people who want to make an impact and help others are drawn to the major. I'm not sure I'm qualified to give career advice, as I'm on my 5th or 6th different role, but I would encourage all students to engage in their education. Explore what faculty are researching, take classes far from your field (my personal favorites were in philosophy) and ask lots of questions. Pursuing a less traditional career involves risk, but when you're young those risks are relatively small. If you or someone you know “has an idea” – try to make it a reality. You may not “succeed” but you'll learn so much by trying.

Tell us a little about how a faculty member at a university can be connected to and own a company and when grants are received, do they go to the company or the university of some combination?

Commercializing an idea is difficult. There are many fantastic ideas sitting in university research labs that never get to market. However, if you have an idea/concept/prototype, university technology transfer offices can help you form a company and look for ways to fund it. One of the most common ways faculty do this is using Small Business Innovative Research (SBIR) grants. These grants are awarded to the company and are intended to assist with proof of concept and commercialization of a product or service. You will need to find someone who can run the company (full-time faculty are typically not allowed to do this) and that can be a challenge. Resist the temptation to maintain control and find someone with a track record of successfully building a start-up company. If you are successful with an SBIR, the company will receive the grant but very often the faculty member will conduct some or all of the research and will receive funding to do this.

What are your hopes and dreams for BiOMOTUM?

Our overarching goal is to provide a way for those with disabilities to see and seek to achieve their true potential. If we are success-

ful, many individuals will not see their physical disability as something they manage, but as something they can treat and improve. Once I see a child walking down the street using one of our devices, I will know that we are on the path to achieving that goal.

The Status of High School & College Sports During the Pandemic

Mitch Stephen reported on the Status of high school sports for the 20-21 school year. In his article (see link below) he has a map that shows about 15 states that have canceled fall sports and hope to resume in 2021. However, a majority of states are moving forward with their fall programs. He indicates the National Federation of State High School Associations has offered a guide that may help states plan their re-opening. Take a look to see the vast differences between states. <https://www.maxpreps.com/news/qiL5GOXkFkyfJ9jwZ8wb-g/where-the-start-of-high-school-sports-stands-in-all-50-states-amid-pandemic.htm>

The status of college sports is likewise compromised and varies across leagues. Some are cancelling fall sports and some are not. Some universities are cutting some sports completely. For example, Stanford University announced that it will cut 11 intercollegiate sports after the 20-21 season. <https://news.stanford.edu/2020/07/08/athletics/>

Of course college recruiting will be markedly changed depending on what happens in each state. In an article written by Josh Moody for US News (see link below), he interviews a number of people including a college recruiter. The recruiter notes that high school student athletes will need to get creative in producing materials. Since many will not be playing actual games, they may need to create videos showing their skills, and develop materials on social media to share with college coaches. He notes that student-athletes will need to get proactive to insure they are seen for consideration. <https://www.usnews.com/education/best-colleges/articles/what-the-coronavirus-means-for-college-sports-and-recruiting>

Q&A: What Athletes Should Know About How Viral Infections Affect the Body

By Patrick Wade, KT Staff Writer

In May, Dr. Michael Scott Emery of Cleveland Clinic and his colleagues published an expert analysis with the American College of Cardiology on the effect of COVID-19 on the heart – hinting at the fact that COVID-19 may have a more significant effect on the heart than other viral infections. We have learned a lot about the virus since that analysis was printed



Michael Scott Emery

in May, so Kinesiology Today asked Dr. Emery about what we have learned about COVID-19 in the intervening time, and what athletes might need to know about how viral infections affect the heart.

What is our understanding of COVID-19 and its effect on the heart at this point?

It's still a good question. All the data that had come out prior to June had been on hospitalized patients. So, when we talk about sports and athletics and non-hospitalized patients, we still didn't know anything really. Since then, there's been a few studies

that have come out on non-hospitalized patients. A study out of Germany had ... non-hospitalized patients, and a portion of those were reportedly asymptomatic, who had cardiac MRIs.

That study found that 78 out of the 100 patients studied had cardiac involvement, and ongoing cardiac inflammation in 60 patients, independent of pre-existing conditions or the severity of the illness (Puntmann, Carerj, & Wieters, 2020). Can you talk more about some of the research that's been happening?

It had some interesting findings that set off a whirlwind of speculation and concern, particularly in the athletic arena. Lots and lots of criticisms of that study. In fact, there was at one point a few very vocal people calling for that study to be retracted because they thought it was so poorly done. It got updated with new statistical analysis and some missing data in the journal itself, so there were some additional data issues with it. But the overall theme didn't seem to change. Putting it into context is still pretty



difficult because it's such a small study.

The other big piece that came out was a study out of Ohio State that looked specifically at athletes. It was a research letter, not a full manuscript, in JAMA Cardiology. Two athletes with COVID-19 who were completely asymptomatic with their COVID infection had what they called cardiac MRI indications of myocarditis. That study was roundly criticized as well. ... It really doesn't help put a lot of findings into context. It's kind of this curious finding, makes you scratch your head, makes us go, "We need to learn more about this."

But it's a little bit of a stretch to say those studies are clearly indicating that asymp-

omatic people have overt heart damage from COVID. We still don't truly know that. Hopefully more studies, larger studies and better controlled studies will help that in the future. We're still learning a lot.

So do researchers kind of feel like something is going on with these athletes who contracted COVID-19, but they just cannot quite quantify it at this point. We are trying to make quick decisions about whether or not to play sports, but it seems like we still do not quite understand the data.

I can't say whether we should play sports or not. My level of concern, and a lot of our expert level of concern, is looking at whether there is some signal that COVID has more myocardial affinity and damage than other viruses. We don't even have a good handle on what other viruses do to the heart, but we were concerned because of the inpatient stuff. Since May when we initially published those guidelines, there hasn't been enough data to come out for us to say, yes, we need to move forward and do even more screening. We have another manuscript under review that will specifically say that we still don't have enough data. There hasn't been enough data to update those recommendations strongly one way or the other.

You hit on another question we had. Is this phenomenon unique to the SARS-CoV-2 virus, or have we seen this with other viruses?

No, we've seen myocarditis with other viruses. The most common cause of myocarditis is viral infections. Typically, common cold infections. Flu can do it. It seems based on inpatient data and limited registry studies that inpatient myocardial involvement seems higher than what we would expect for the flu. Most people with the common cold don't get admitted for their cold-like symptoms, so we're not hunting around doing as much studying of those people as we are with COVID. So many of them aren't getting admitted. Same thing with flu. But there are data that people can get myocarditis and get hospitalized from a standard respiratory infection.

We also know from registry data on sudden cardiac death in athletes, about eight to ten percent of young athletes who die suddenly, it's from myocarditis. That's not a huge number. When we think of 100 to maybe 125 deaths in the U.S. in that young athlete age group per year, with eight to ten percent of those being from myocarditis. Not a huge number, but certainly a number that we can point our finger at.

Now, we don't know a lot of times whether they had acute myocarditis, meaning they

are still in the throes of active myocardial inflammation when this happens. Or, they recover from that initial episode, and they have long-standing damage. And it's the damage a year or two years down the road that leads to their sudden cardiac death.

Is it too early to say how an athlete who experiences COVID-19 can expect to be affected over the long term?

We don't know anything about the long-term effects of COVID, whether it's pulmonary or anything neurologic, or cardiac – whether you were hospitalized or whether you had a mild infection. We don't know that in anyone. To bring that down to an athlete is even more an area where there's a giant question mark. We certainly would be concerned about that, but the same thing would be said for a typical upper respiratory rhinovirus that ends up attacking someone's heart, or a coxsackievirus, or the flu.

Are athletes at any additional risk versus a non-athlete?

The risk for athletes isn't from being an athlete – it's from the activities associated with being an athlete. You're in a locker

room, which is a closed environment with other people. You're on a field, tackling each other. You may travel with each other on a plane or on a bus, or stay together in a hotel room. That's what tends to be the process by which an athlete may be more likely to get a virus. It's because they are in close proximity to someone with the virus. Being physically fit does not make you more prone to getting a virus and having complications from it.

Having said that, if you contract a virus – and this goes for anyone, not just an athlete – we've always recommended that if you're actively infected and sick and symptomatic, then you shouldn't exercise. Particularly high intensity. There are some small animal studies that suggest that if you exercise at high intensity in the setting of an active viral infection, your risk of myocarditis associated with that infection is elevated above someone who is not exercising with that viral infection. If you have flu-like symptoms or a bad cold, you probably need to dial back the intensity or completely rest until you are over that viral infection. That's whether you are a recreational athlete, college athlete, pro athlete – that recommendation always stands.

So COVID-19 aside, what are your recommendations for an athlete who has recovered from a viral infection and wants to return to exercise or competitive sports?

So, the first part is what I just mentioned, which is don't engage in particularly high-intensity exercise while you are in the throes of an active viral infection. You need to back way off or, more than likely, you need to rest.

Once you've recovered from your viral infection and you're feeling fine, then you can start going back to your regular activities. I wouldn't recommend that, now that you've been off for a week or two weeks recovering from a viral infection, that you think you can just jump right back into that level of capacity that you had before you got sick. You just spent two weeks de-training, and that viral infection may have knocked you down even more.

If you have concerning residual symptoms or you're having difficulty getting over it, then you need to get checked out. If you recover from it fine and you didn't have any concerning cardiac symptoms, meaning bad chest discomfort or really bad shortness of breath, then you can ease back into your activities and take note of how you feel as you ease back in.

If your return to activity isn't going well – you're having excessive fatigue, you're having a lot of excess shortness of breath, you just can't get your fitness back, you have exertional chest discomfort – that's a time to stop and get checked out.

Diversity and Inclusion Continues: Indigenous Public Health Certificate

By Penny McCullagh, Ph.D., KT Editor

The Kinesiology and Exercise Sciences Department at the University of Hawai'i-Hilo is no stranger to excellence. In 2020, the department was awarded the Inclusive Excellence Award from the American Kinesiology Association (AKA). The award is given annually to a department that provides evidence that it promotes diversity and inclusion through the unit's activities, research, teaching, service, and mentorship. Harald Barkhoff who was awarded the Distinguished Leadership Award for institutions offering undergraduate degrees only in Kinesiology accepted the award on behalf of the department in January of 2020.

Dr. Jennifer Stotter, Director of UHH Office of Equal Opportunity noted that while the campus is very diverse, the department had increased its diversity to 84% which is above the Hilo average of 76%. She attributes the department's success in part to [Uluākea](#), a



Harald Barkhoff

faculty training and curriculum development program to include authentic Hawaiian culture. In addition the department faculty support the [Hawai'i Papa O Ke Ao](#) initiative, a system-wide strategic goal to indigenize the UH System.

A new certificate program in Indigenous Public Health is now housed in the department. It is an interdisciplinary program developed by faculty and staff from the College of Pharmacy, the Department of Sociology and Kinesiology and Exercise Sciences. The program was facilitated by Kīpuka - [Native Hawaiian Student Center](#). Students will develop their personal indigenous perspective or develop an understanding of indigenous perspectives on awareness of place, the natural environment, cultural practices, as they relate to health and well-being.”

Dr. Misty Pacheco, a member of the department who specializes in health disparities in Hawai'i suggests that the Covid-19 pandemic has heightened our awareness of the need for sound public health, making the Indigenous Public Health certificate even more relevant. She notes that “We have also seen the disproportionate effect Covid-19

has had on indigenous populations around the world, and are once again reminded that we must consider the specific needs and priorities of indigenous communities.”

I asked Dr. Barkhoff a few questions about the program.

This type of program seems especially appropriate during the pandemic. Tell me a little about the origins of the program.

This was a truly interdisciplinary initiative because there was a gap in the UHH programming that addressed indigenous health overall as well as specific health disparities, and the idea for the Indigenous Public Health Certificate grew from there. It also compliments the KES Health Promotions track, and is a focus area of study for students who are interested in indigenous public health.

Since this is a certificate – do students need to complete this along with a degree in your department or is this a stand-alone program?

This is a stand-alone certificate, so students in any major can add it to their course work, however it can be particularly appropriate for students interested in careers in kinesiology, health, psychology or social work fields.

What type of agencies may be looking for students who complete this program and does it extend beyond Hawai'i?

Any variety of agencies may be looking for students who complete this program, both within Hawai'i and beyond. Students with this certificate can enter organizations across all sectors from private, public, and government sectors. Many people with a public health background join the federal, state, county or city health departments. Others may want to go towards nonprofit organizations focused on health or other social services. Even corporations whose business is in the public health arena (i.e. CVS, Walgreens) would benefit by hiring individuals with this certificate to conduct training and outreach to their direct service employees.

Students with this certificate will have an understanding of the unique health and sociological issues rural areas and indigenous populations face so they are particularly equipped to seek out orga-

nizations or institutions that serve minority, indigenous or vulnerable populations. Students who are interested in working and getting experience in the U.S. and abroad will benefit from this certificate because they learn about cultural competency as well and are therefore able to seek indigenous health professional opportunities for example in Aotearoa (New Zealand), Australia, Canada and native communities across the U.S. including Alaska through the Indian Health Services.

As we know treatment options can also vary, so familiarity and comfort with indigenous health and ways of knowing will make us better equipped to make recommendations that help our patient/client/consumer feel comfortable and thus more likely to follow through. Hospitals, clinics and pharmacies should have a direct interest in applicants bringing this set of skills to the workforce, as the indigenous approach is holistic and all inclusive.

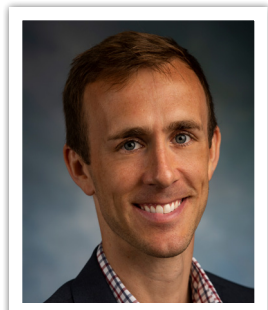


Virtual Learning and the Future of Physical Education

By Amy Rose, KT Staff Writer

The abrupt switch to exclusive online learning when the pandemic hit full force in March of 2020 threw the entire United States education system into a tailspin. Online learning was still a relatively new concept and especially in the physical education field. Faculty and administration at all levels were scrambling to find the best ways to teach students, while also keeping them safe and healthy.

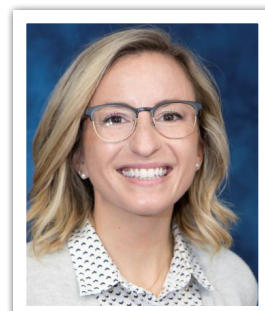
Many school districts are still restricted to exclusively offering virtual learning or a hybrid of online and face-to-face instruction. What does this mean for current physical education teachers and the training for future physical educators? According to Chad Killian, PhD, Assistant Professor in the Department of Kinesiology at Georgia State



Chad Killian

University, virtual learning for physical education opens up many exciting new opportunities for students at all levels and gives educators a new way to inspire their students and themselves.

Prior to the pandemic, there was an aversion to online learning in the physical education field, because it didn't align with the traditional thinking of teaching P.E. "It is now safe to talk about online learning," said Killian, who was one of the few researching the benefits and modalities of online learning in the physical education field since before the pandemic. "It is hard to teach using evidence-based practice, with no evidence. Only 11 studies had been done prior to this time," he added. Killian does believe that online physical education is not appropriate at the Elementary level, because of the importance of motor development in young children, but he does see great potential for its use with high school students. "It's about not accepting the status quo and



Shelby Ison

loving physical education enough to let it grow," Killian said.

Shelby Ison, doctoral student and research assistant at the University of Illinois-Urbana, Champaign, has worked with Killian

on this research and she is also enthusiastic about the future of online learning for physical education. She and Killian both have been working with current physical educators to provide professional development seminars and online learning tools to help teachers create engaging and effective programs for their students. "The biggest thing I've learned is that the best way of engaging students in online learning is to start with current curriculum. What engaged them face to face?" said Ison. She has also learned that some P.E. teachers do not have a current curriculum, so they should start with developing one. The next step she recommends would be examining the desired learning outcomes. "The purpose is not about requiring a certain number of minutes of activity necessarily. It is about inspiring them to enjoy movement and see the value of movement and to have control over their health in life," Ison said.

Killian also agrees with the switch to a physical activity for wellness approach. "Especially during the current situation, exercise helps with anxiety, depression and mood swings, which students are experiencing being removed from school

routines.” Killian said. “Autonomy is a big motivator for students also.” The autonomy and option of online learning is especially important for teens who work, those who are not skilled in sports or even young people who are uncomfortable changing in a locker room with their peers.

Both scholars also see online learning as a way to advocate for the importance of physical activity and wellness in the student’s education and life. “This pandemic is forcing people to see what is important in life. At the end of the day, what is really important is your health and the ones you love,” said Ison.

Preparing physical education majors for the shift to online teaching is crucial to its success. Some suggestions given by Killian and Ison, include offering physical education technology class, which would include how to prepare engaging programs and record and edit audio and video for online lessons. Ison also suggests restructuring the curriculum to provide more opportunities for kinesiology and movement classes, wellness-based education and a higher priority on mental health and stress release. There should also be a movement away from so many “message courses” and sport-related classes. “With technology,

students can be more specialized in physical education and chose what is best for them and follow their passion,” Ison said. Killian predicts that online physical education instructor is a future career path that physical education undergrads will pursue.

Meanwhile, many resources are being created to help everyone in the field be better prepared and more confident in their use of online learning skills. Ison suggests finding a Learning Management System that is easy to navigate and allows creativity. Also find ways to make home learning more fun and enjoyable for students, parents and teachers, like having students walk while listening to a recorded lecture or moving your workstation outside for a lesson.

To provide more professional assistance, Killian has organized a PETE Collaborative Call (<https://sites.google.com/view/petecollaborative/home>), as a way for U.S. PETE faculty to gather virtually to build community and foster a broad sense of collaboration. It covers online learning challenges and solutions and has expanded to include other issues PETE professionals are concerned with. Kason O’Neil, another PETE Collaborative Call organizer, from Eastern Tennessee State University maintains the website, which includes resources call

participants submit for community use. All call recordings are posted as podcasts on the Playing with Research in Health and Physical Education podcast (<https://anchor.fm/PwRHPE>).

Ison has started a company to connect research with practice for educators. Pracademic Education <https://www.pracademiceducation.org/> provides a variety of services: virtual course design, student wellness research, curriculum development and virtual instruction for professional development.

Online learning has taken a huge leap forward in the last six months and appears to be sticking around long after the coronavirus is under control. A positive approach to the benefits, opportunities and outcomes for students and teachers will propel the field of physical education into a brighter and healthier future.

As Seasons Change, ACSM Calls for Creativity in Getting Active

By Patrick Wade, Staff Writer

As the country grapples with how to safely return to sports during the COVID-19 pandemic, the American College of Sports Medicine has issued a “call to action” statement on items practitioners might want to consider as the general gets active again.

Many professional and college sports are already under way, as Major League Baseball began its playoffs in October and college football is headed toward mid-season. Dr. Thomas Best is no stranger to the two as a team physician for the Miami Marlins professional baseball club and the University of Miami Division of Intercollegiate Athletics. He also serves on the American College of Sports Medicine Board of Trustees, which issued the call to action. And while each of the professional and college leagues have



Thomas Best

drawn up their own guidelines on how to safely return to sports, he said that might not be particularly helpful for average people or recreational athletes. “If you look at least in the sports world,

everything was targeted toward athletes, specifically professional athletes,” Best said. “There are guidelines that are written, but the critical difference there is that these are elite athletes.”

At ACSM, the policy makers could not find anything that spoke to a return to physical activity or maintenance of physical activity for the broader population during the pandemic. “It would be essential to try and raise awareness to this for everyday folks like you and I and the general public,” Best said. “That was really the motivation behind this call to action.”

So what is the call to action?

According to the article, ACSM recognizes that “the COVID crisis requires a flexible approach to physical activity based on the need for social distancing combines with changes to personal demands and environments.” In a nutshell, it means that those who want to stay active should be prepared to get moving in some new ways with which they may not be accustomed. Creativity is more important now than ever, ACSM says, especially for people who lives in areas where the outdoor environment is not safe or too crowded for social distancing.



AMERICAN COLLEGE
of SPORTS MEDICINE

Between complications of weather (although much of the pandemic to this point has occurred over the spring and summer, it’s about to get very cold in the northern parts of the country) and the ongoing closure of indoor gyms, Best said it can be difficult. “We’re still early in this and acquiring data,” Best said. “But it does appear that many of us – most of us, perhaps – the amount of physical activity we’re used to getting is no longer the case.”

ACSM is recommending 12 specific action items for practitioners to get people moving again. Among those:

- For people who are healthy, encourage individuals to start or continue adequate physical activity.
- For those who have contracted COVID-19, they should contact their physicians to determine if they need to be evaluated before they can safely return to physical activity. Even brief periods of physical activity can really set you back, Best said. But especially with COVID-19, people should be aware that the virus can affect the cardiovascular system. The Atlantic Coast Conference where Best's University of Miami competes, now requires cardiac clearance before athletes can return to competition.
- Additionally for those who have recovered from COVID-19, ACSM tells physicians to recommend rest and no exercise for two weeks after the resolution of a mild or moderate version of the illness, followed by a slow resumption of activity with monitoring.
- Physical activity should be done in one's own home, or outside if social distancing is possible. Exercisers should use face coverings when needed to minimize droplet spread.
- Individuals who are at higher risk for COVID-19 should refrain from exhaustive exercise or overtraining.

Other recommendations from ACSM call for finding innovative strategies to promote physical activity, developing policies for a return to team sports, optimizing sports medicine telehealth opportunities, ensuring equal access to telehealth and implementing the use of testing and masking to minimize the spread of the virus. The full statement and complete list of recommendations is available on the American College of Sports Medicine website.

Best said that we can take some lessons from the ways professional and college sports have set themselves up for a return – especially in terms of preventative measures and the testing and monitoring of athletes. “The overarching theme to all of this is what applies to elite athletes should probably also apply to the everyday individual,” Best said. “Maybe even more constraints, particularly when you think of the physical inactivity and the training piece of it.”

That being said, if Best's personal observation in Miami is any evidence, we may be moving in the right direction. He says all of the bicycle shops near him are nearly sold out. “At least in southern Florida, I've seen more people out, whether it's walking or jogging or riding a bike, than I've ever seen,” Best said. “It's not a high-level study I realize, but I think it's an important

observation. It looks to me like people are responding.” One concern for Best, however, is strength training. Recent research has shown that strength training is an important part of a solid exercise regimen – but with gyms closed, it can make that piece far more difficult.

And the real unknown is what happens as the seasons change and the weather gets colder. “What's going to happen if you don't have access to the gym and you can't be outside to exercise?” Best said. “Moving forward, we really need to pay attention to that – respect it, if you will – and try to figure out how the heck we're going to make things happen.”

American College of Sports Medicine. (2020). ACSM Publishes Call to Action Addressing COVID-19 and Return to Sports and Physical Activity. Retrieved from <https://www.acsm.org/read-research/newsroom/news-releases/news-detail/2020/08/07/acsm-publishes-call-to-action-addressing-covid-19-and-return-to-sports-and-physical-activity>

AKA Leadership Institute – Preparing Future Leaders

By Mary Rudisill, Ph.D. Director of AKA Leadership Institute

American Kinesiology Association is pleased to announce that the 3rd Leadership Institute cohort has been selected. Eleven participants will join the AKA Leadership Institute January 2021 and spend a year learning the intricacies of being a leader in the academic discipline of Kinesiology (see photo)

The success of the Leadership Institute is attributed to the great contributions of our AKA members who serve as mentors. If you are interested in serving as a mentor for the Institute with future cohorts, please let us know! Many thanks to our Cohort 3 mentors by serving in this role and helping to develop strong future Kinesiology leaders:

Heather VanMullem – Lewis-Clark State College

Christopher Hearon – Texas A & M University - Kingsville

Karen Meaney – Texas State University

Timothy Brusseau – University of Utah

Tim Gavin – Purdue University

Nancy Williams – Penn State University

Penny McCullagh, CSU East Bay - Alternate

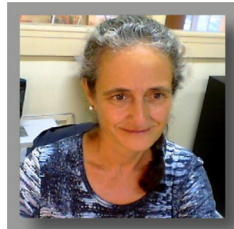
We have been planning an exciting agenda of topics for AKA Leadership Institute participants Cohort 3, including:

- The discipline of Kinesiology and the diversity of program areas that make up our discipline
- Moving into a new leadership role
- The various budget models that are implemented in higher education and how to manage each
- Embracing entrepreneurship and innovation in Kinesiology
- The importance of strategic planning, effective communication, and strategies for implementing change
- Understanding national trends in higher education/Kinesiology, including:
 - COVID-19 and meeting curricular requirements (labs and basic instruction courses), managing/ serving people and meeting their needs (faculty, staff, students), dealing with the budget fallout, addressing safety and conducting research, job placement with limited job opportunities, etc.
- Promoting social justice, through diversity, inclusion, and inclusive excellence within your curriculum, research, and outreach experiences
 - anti-racist and anti-sexist curriculum, bullying, microaggressions, implicit and explicit bias, pronouns, etc.
- Managing people & evaluating them
- Balancing time in a leadership role: Prioritizing & time management
- Legal issues and pitfalls, including: FERPA, HIPAA, Free Speech, COVID-19
- And mentorship opportunities!



Marry Rudisill

**AMERICAN KINESIOLOGY ASSOCIATION
LEADERSHIP INSTITUTE
2022 CLASS OF NEW FELLOWS**



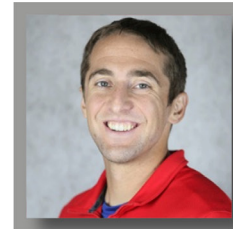
ROSA ANGULO-BARROSO, PHD
CALIFORNIA STATE
UNIVERSITY-NORTHRIDGE



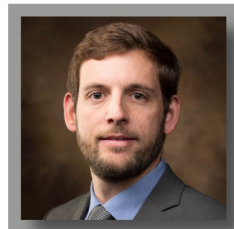
MELISSA BOPP, PHD
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EADRIC BRESSEL, PHD
UTAH STATE UNIVERSITY



GREGG DAVIS, PHD
UNIVERSITY OF LOUISIANA
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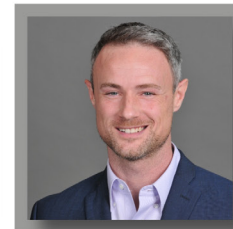
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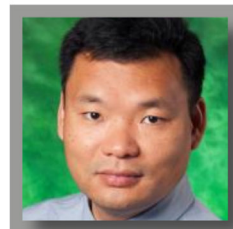
GREGORY LOTT, PHD
DENISON UNIVERSITY



JOEL MARTIN, PHD
GEORGE MASON UNIVERSITY



JENNY O, PHD
CALIFORNIA STATE
UNIVERSITY - EAST BAY



TAO ZHANG, PHD
UNIVERSITY OF NORTH TEXAS



EDITOR'S ONE CENTS WORTH

The Times Are Still Changing

By Penny McCullagh, Ph.D. KT Editor



Penny McCullagh

In the summer issue of KT in my column, I wrote about the difficulties faculty were having with their teaching and research during the pandemic and put out a call for cooperation and sharing. I framed that column in Bob Dylan's classic song, The Times They Are a Changin. Well the times are still changing and each day brings us more uncertainties.

Many universities returned to face-to-face classes and then had to shut down due to the spread of Covid. Professional organizations are trying to help their members in a host of ways and some for example are sharing resources for teaching e.g., (www.naspspa.com). AKA was a leader in getting three additional organizations to cooperate on sharing a contract for a company that helps hosts virtual conferences. Many of you are attending virtual conferences as we speak and hopefully will attend the AKA workshop in January.

As you can see by the variety of articles in this issue of KT, the pandemic has altered

our lives at all levels related to kinesiology and physical activity. I not only serve on the AKA Executive Committee but am also involved in other professional organizations, and many people are saying they are working harder than they ever have and many individuals are experiencing additional stressors beyond the virus. A recent article by Mindi Thompson of UW – Madison - published in Inside Higher Ed suggested six items that faculty should consider during turbulent times. I would suggest these would be useful not only for faculty but for leaders like department chairs and for sharing with students as well. In the [article](#), she discusses strategies for addressing each of these but conversation with colleagues might be useful.

- Create boundaries around your consumption of media, social media, emails and text messages
- Stay active and prioritize your physical and mental health
- Maintain connections with others
- Exercise patience, kindness and compassion toward yourself and others
- Pay attention to your feelings and thoughts and know when to reach out for help

- Create structures to allow you to focus on select responsibilities and goals – working at home

While these suggestions may sound straight forward they are not necessarily easy to achieve. For example, I gave a recent assignment in my class that asks students to listen to a YouTube video by Dr. Brendan Egan, from the University College Dublin. He talked about the concept of active couch potato, which he classifies as people who may do their bout of exercise each day but that is all they do – thus they are active couch potatoes. Part of the class assignment was to answer the question – Are you an active couch potato?. The answers provided by students were fascinating, encouraging, and also concerning. Many students had been able to maintain their regular exercise and were doing well. Others had completely abandoned, for a host of reasons, their regimen. I think many of us may be active couch potatoes because we are spending so much of our waking hours in front of the computer. In my class, I do not do lectures on zoom. Rather they watch a short clip, they watch short pre-recorded videos, and then do projects and discussions. I suggested to the students that every time they work on items for my class – they stand up instead of sit – and I would do the same. <https://www.youtube.com/watch?v=LkXwfTsqQgQ>

An Easier Process for Submitting Nominations for AKA Student Scholar and Writing Awards

COVID-19 impacts have certainly nudged all of us to further leverage technologies to work efficiently. Given the Student Awards Committee assesses approximately 160 applications annually, we wanted to build in efficiency for the entire AKA membership in relation to AKA National Scholar Awards. Starting in 2021, we will be using an online application process that was co-created by Kim Scott and the entire [awards committee](#), so that department chairs (or their designate) submit applications through an online form. Head to the [AKA National Scholar Awards](#) site for some additional details and list of past year's winners.

In addition to an online application process, the AKA Executive Committee approved the committee's revision to the awards beginning in 2021. There will be winners in 2021 for undergraduate, master's, doctoral, and writing across each type of department membership. This means there will be three undergraduate winners, two master's degree winners, one doctoral winner, and one writing award winner. AKA recognizes the unique and diverse student experience based on their chosen institution and we want to recognize and celebrate the distinctiveness of kinesiology students across these departments. I want to thank the Student Awards Committee, Kim Scott, and Lanie Dornier for their work on this revision in supporting the AKA mission through our National Student Awards. Contact Lara Duke with questions. laraduke@caplinou.ca



Kinesiology Today

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