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**REVIEW OF HEALTH RELATED PHYSICAL
FITNESS VARIABLES AND PSYCHOMOTOR
ABILITY BETWEEN RURAL AND URBAN
SCHOOL GOING CHILDREN**

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“Review of Health Related Physical Fitness Variables and Psychomotor Ability between Rural and Urban School Going Children”

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Abstract – The purpose of the study was to compare the Health related physical fitness variables and psychomotor ability between rural and urban school going children. Health and physical fitness have a vital role in the life of men from time immemorial. The progress of the Nation lies in the hands of the people, who are healthy and physically fit. Every individual should develop physical fitness for a happy and effective living. In order to get physical fitness one has to involve in physical activities.

Keyword: Health, Physical Fitness, Psychomotor, Rural and Urban, Children

INTRODUCTION:-

A sport is an activity in our lives where pursuits of different movement achieved through the total investigation of Neuro – muscular co-ordination. In this modern era, we can see that each and every individual directly or indirectly related to sports. Modern Physical Education commonly known as there is sports where pursuit of discipline freely formed such as biological, social and physical sciences.

Health related Physical Fitness According to current thinking in the physical education profession, physical fitness is either health related or performance related. In keeping with wellness trend today and an emphasis on all aspects of healthful living in addition to stressing performance or motor skill related to fitness. This aspect of physical fitness concerns the development of qualities necessary to function efficiently and maintain a healthy life style. Each of the components of health related fitness cardio respiratory endurance, muscular strength and endurance, flexibility and body composition Bucher and Prentice (1985).

REVIEW OF LITERATURE:

Over the past four decades, there has been an increase in the prevalence of overweight and physical fitness deterioration in adult across all genders, ages and racial/ethnic groups (Ichinohe et al, 2004).

The level of physical fitness (H-RF), similar to other elements of life style, including physical activity and inactive behaviour, is engaged in the etiology and occurrence of many non-infectious general diseases, such as: cardiovascular diseases, diabetes, selected

types of cancer, and is also among the risk factors for arterial hypertension or obesity [1,2, 3, 4]. Although the majority of these alarming states concern adults, some of them – overweight and obesity – occur already from the youngest age [5, 6].

URBAN AND RURAL :

For Census 2000, the Census Bureau classifies as “urban” all territory, population and housing units located within an urbanized area (UA) or an urban cluster (UC). It delineates UA and UC boundaries to encompass densely settled territory, which consists of: Core census block groups or blocks that have a population density of at least 1,000 people per square mile and Surrounding census blocks that have an overall density of at least 500 people per square mile. Common attributes are as:

STRENGTH :

According to Barrow and McGee (1979) strength is the capacity of the whole body or of any of its parts to exert force.

ENDURANCE :

Endurance is the capacity for protracted work and is a measure of the ability to stave off fatigue. Barrow and McGee(1973) define Endurance is the result of a physiologic capacity of the individual to sustain movement over a period of time.

AGILITY:

Barrow and McGee (1979) Interpret Agil提高 as the ability of the body or parts of the body to change directions rapidly and accurately. According to Phillips and Hornak (1979) the agility is the ability to change directions rapidly and accurately. It depends essentially on strength, speed of reaction and movement, and big muscle coordination.

CONCLUSION:

Factors of considerable importance for the development of HR-F components are at this age. Hence, there is a need for the creation of a social policy in Polish rural areas in order to solve problems related with disturbed height-weight ratio in children prior to school education. In addition, considering the scale of sedentary behaviours and rather low level of the respondents' additional activity, attention should be paid to physical exercise classes at nursery schools, as well as classes proposed outside the educational facility. The limitation of obligatory physical exercise classes in Polish nursery schools seems to be inexplicable, as well as the limitation of access to other active forms of spending leisure time, especially in the rural environment. The neglect in these spheres should be considered as non-educational, and enhancing sedentary behaviour habits.

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