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Diagnosis of Health related problem for student athletes

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Abstract

The intention of this study was to identify and to compare the diagnosis of health related problem for student athletes from various clubs and colleges from Puducherry. Total 150 subjects were randomly selected for this study. The study was done for both male and female athletes. Their age ranged from 18-28 years. The objective was to identify whether the athletes have health related problems. For this study the test administration was by questionnaire method. Each and every question was explained to the subjects and collected the response. The statistics used for this study was pie diagram and bar diagram. The results show that both male and female has slightly similar health problems.

Keywords: student athletes, Health problems, Puducherry.

Introduction

A balanced physical education program provides each student with an opportunity to develop into a physically-educated person; one who learns skills necessary to perform a variety of physical activities, is physically fit, participates regularly in physical activity, and knows the benefits from involvement in physical activity and its contributions to a healthy lifestyle. For all students to become physically educated, instruction is designed for all students with special consideration for students who need help the most, less skilled students and students with disabilities. Students who are skilled and blessed with innate ability have many opportunities to learn. All students must feel successful if they are expected to enjoy and value physical activity. Activity is the basis of the program and offers opportunities for repetition and refinement of physical skills. Activities are success oriented so students are motivated to continue. Physical education prepares students to participate in activities they can perform when they are adults. The physical education program will be of little value to the majority of adults if it is restricted to team sports. The process of gathering evidence to make inferences about student learning, communicates to students and all those concerned about their learning in physical education how students are progressing toward certain goals. The evidence gathered needs to be consistent with goals and will guide teaching as well as document student learning. The 1999 Legislature approved Physical Education to be part of the Certificate of Initial Mastery (CIM). The State Board of Education adopted revised Physical Education Common Curriculum Goals and Content Standards in September 2001. Tenth grade students who earn a CIM must demonstrate proficiency in physical education starting in 2003-2004. Standards are measurable so both teacher and students know when progress has been made. The legislation calls for the assessment and performance standards to be determined by school. The resources gathered here are to help educators build an environment where: Students can learn physical skills without barriers Students are engaged in active learning with teaching that builds upon past experiences and previous knowledge Skills and activities match student's physical and emotional development. An overview of the history and foundations of physical education and there is various dimensions of physical education such as motor behavior, biomechanics, exercise physiology, sociology, health, fitness, teaching and coaching are among the topics introduced. Special emphasis is devoted to the aims and objectives of physical education as a profession and career choices.

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Athletes Health Problem

Health issues of athletics concern the health and well-being of athletes who participate in an organized sport. If athletes are physically and mentally underdeveloped, they are susceptible to mental or physical problems. Athletes trying to improve their performance in sports can harm themselves by overtraining, adopting eating habits that damage them physically or psychologically, and using steroids or supplements

Not all athletic health issues are related to bones and joints. At Houston Methodist, our primary care sports medicine specialists are experienced treating the most common medical issues affecting athletes of all ages:

- a) Asthma
- b) Exercise-associated muscle cramps
- c) Heart problems
- d) Heat stroke
- e) Overtraining syndrome
- f) Rhabdomyolysis (a rapid breakdown of muscle tissue due to injury)
- g) Runner's stitch
- h) Supplements

The Components of a Sports Diet

Carbohydrates are necessary to meet the demands of energy needed during exercise, to maintain blood glucose and replenish muscle glycogen store. During sub-maximal exercise, carbohydrate in the body is the major fuel sources

Protein is needed for: nutrient transfer in the blood, connective tissue support, and the repair of tissue in response to periods of exercise. Athletes should have a slightly higher intake of protein than the general population. Protein can also be used as an energy source, particularly when carbohydrate reserves are very low.

Fat intake is important for: energy production, protecting organs, providing insulation to the body, and facilitating fat soluble vitamin uptake, and essential fatty acid intake. During sub-maximal exercise, fat and carbohydrate are both fuel sources.

Micronutrients are essential players in energy production, hemoglobin synthesis, bone health, immune function and antioxidant activity. Micronutrient needs can be met, through athletes consuming a high energy and balanced diet

Results of the Study

Table 1: Positive and Negative Response of Men Athlete's on Health Problem (Points)

Group	Subject (Q-46)	Positive Points	Negative Points	Mean of Health Problem	Athlete's Health Status Percentage %	
					Health Problem	Good Health
Men	100	3546	1054	10.54	22.91	77.09

Table I showed that positive and negative response of men athletes on health problem. From the result it is cleared that 77.09% men athletes had good health. Rest of the 22.91% of

Methodology

In this chapter the procedure for selection of subjects, selection of variables, orientation of subjects, collection of data and the technique applied for analyzing the data have been explained in detail.

Selection of Subjects

To achieve the purpose of these study one fifty sports person were randomly selected both men and women were taken from SAI center, colleges and clubs. The age group of the subjects ranged from 18-28 years. The subjected were selected according to various sports and games for which they played regularly.

Selection of Variables

The variables selected for this study medical illness, asthma, diabetes, arthritis etc causes of all health related problem.

Orientation of Subjects

The subjects were fully oriented about the purpose of the study and questionnaire method was administered for the determining their health problem and its causes, thus the investigator's efforts evoked full cooperation from the subjects voluntarily.

Test Administration

The test was administrated by questionnaire method. The questions were in English. Each and every question was explained orally to the subjects in both English and Tamil and the data was collected for analysis.

Analysis Technique

The data was collected from 150 sports person from various sports and games. The results were analyzed by quantifying the data according to the variables, demography and types of health problem and interpreting the results.

Results And Interpretations Of The Data

The collected data were analyzed and the results of the analysis are presented in this chapter.

The purpose of the study was to diagnosis of health related problem for student athletes.

The researcher has analyzed only based on percentage aspect from the above said data.

men athletes had health problems. Positive points 3546 and negative points 1054 were given by the subjects and the mean value of health problem was 10.54.

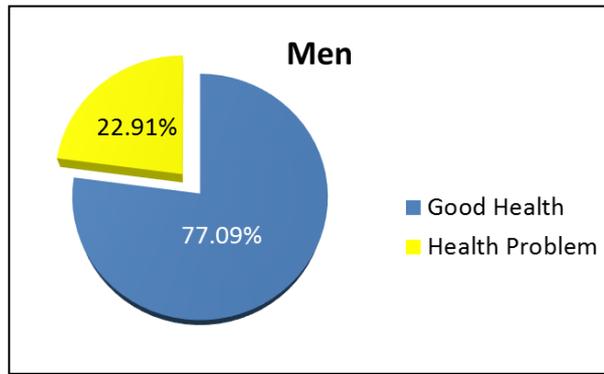


Fig 1: Pie Diagram Showing the Good Health and Health Problem Response among Men Athletes (Percentage %)

Table 2: Positive and Negative Response of Women Athlete’s on health Problem (Points)

Group	Subject (Q-46)	Positive Points	Negative Points	Mean of Health Problem	Athlete’s Health Status Percentage %	
					Health Problem	Good Health
women	50	1975	575	11.5	22.55	77.45

Table II showed that positive and negative response of women athletes on health problem. From the result of the study 77.45% women athletes had more than moderate good health. Rest of the 22.55% women athletes has health problem. Positive points 1975 and negative points 575 were given by the subjects and the mean value of health problem was 11.5.

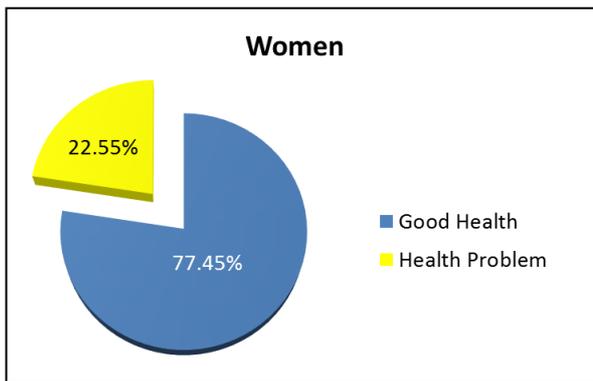


Fig 2: Pie Diagram Showing the Good Health and Health Problem Response among Women Athletes (percentage %)

Table 3: The Mean, Standard Deviation and ‘t’ Ratio of Men and Women Athletes on Health Problem

Group	Number of Subjects (N)	Mean of Health Problem	Standard Deviation	t-ratio
Men	100	10.54	6.34	0.84*
Women	50	11.50	7.01	

*Significant at 0.05 level of confidence

(The table value required for significance at 0.05 level with df1, 148 was at 1.98)

Table III Shows that mean values of men and women athletes on health problem were 10.54 and 11.50 respectively. The obtained t- ratio value of 0.84 was less than required table value 1.98 for significance at 0.05 level of confidence with df1, 148. The result of the study show that there was a no significant difference between men and women athletes in health related problem. Therefore both men and women athletes are similar health problem and good health.

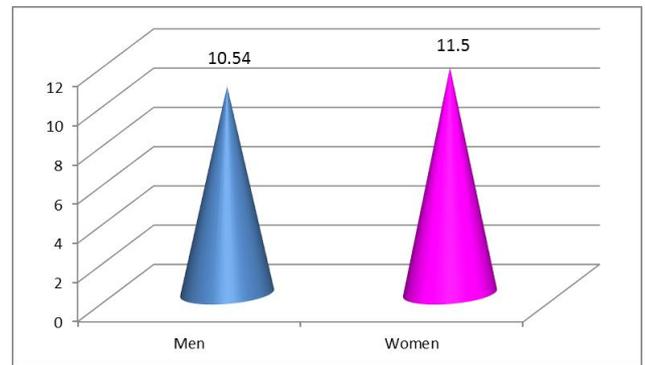


Fig 3: Bar Diagram Showing the Mean Values of Men and Women Health Problem

Summary Conclusion and Recommendation

The purpose of this study is to diagnosis of health related problems for student athletes.

The data collected for each variable are interpreted and analyzed for these hundred and fifty subjects who were selected from various clubs and colleges. And their age group ranged from 18 to 28 both men and women.

Conclusion

The analysis of data reveals that there was no significant difference in health problems in both men and women athletes.

The data shows that the health problems of men and women athletes are similar

As per the hypothesis one and two there will be more than moderate good health for both men and women athletes so the hypothesis one and two is accepted.

Recommendations

From this study Mr. VIVEK. R suggest that the following recommendation on the basis of the results

- A similar study can be conducted for non-athletes.
- A similar study can be conducted by selecting selected subject.
- This study can be done on the major and minor diseases and injuries.
- A detailed study can be done on more numbers of elite athletes.

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