



ROLE OF THE PHYSICAL FITNESS AND MENTAL STABILITY IN HUMAN LIFE

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ABSTRACT:

Physical fitness can achieve mental stability. There is a strong link between mental health and physical health, but little is known about the pathways from one to the other. We analyze the direct and indirect effects of past mental health on present physical health and past physical health on present mental health using lifestyle choices and social capital in a mediation framework. Mental health usually depends on physical fitness. We find significant direct and indirect effects for both forms of health, with indirect effects explaining 10% of the effect of past mental health on physical health and 8% of the effect of past physical health on mental health. Physical activity is the largest contributor to the indirect effects. There are stronger indirect effects for males in mental health (9.9%) and older age groups in mental health (13.6%) and physical health (12.6%). Health policies aiming at changing physical and mental health need to consider not only the direct cross-effects but also the indirect cross-effects between mental health and physical health. The older population's stamina is always high due to their intake of food at a young age. But now purity in the diet is disappearing day by day.

Key words: -Mental health, Physical health, Mediation analysis, older population, stability.

INTRODUCTION:

Physical fitness is a state of health and well-being and, more specifically, the ability to perform aspects of sports, occupations, and daily activities. Physical fitness is generally achieved through proper nutrition, moderate-vigorous physical exercise, and sufficient rest along with a formal recovery plan. Physical fitness can achieve mental stability. There is a strong link between mental health and physical health, but little is known about the pathways from one to the other. We analyze the direct and

indirect effects of past mental health on present physical health and past physical health on present mental health using lifestyle choices and social capital in a mediation framework. Mental health usually depends on physical fitness (Morgan,1997)

In human life, everyone is trying to be fit by doing whatever they need to do. Regular physical activity is proven to help prevent and manage non-communicable diseases such as heart disease, stroke, diabetes, and several cancers. In this present scenario in the cove,

most people were trying to do it for the sake of their health. It also helps prevent hypertension, maintains healthy body weight, and can improve mental health, quality of life, and well-being.

MENTAL STABILITY:

It is the heart of everything because we know that a sound mind is in a sound body. Therefore mental position must be stable to live a happy life. Generally, people who are considered mentally stable and emotionally healthy have a number of positive traits in common. Signs that someone is mentally and emotionally stable: A sense of being in control of their personal thoughts and actions (Kimmet al., 2005). It affects how we think, feels, and act as we cope with life. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood and aging.

People who exercise regularly have better mental health and emotional wellbeing, and lower rates of mental illness. Taking up exercise seems to reduce the risk of developing mental illness. It also seems to help in treating some mental health conditions, like depression and anxiety. For a stable position of mind, we should be always optimistic. It is well-established that physical activity or exercise is essential to improve and maintain physical and mental health and improve the quality of life. Life has always had various ups and downs. Then also we live in the hope of getting a better lifestyle and always try for the same.

EFFECTS:

The aim of this paper is to fill this gap by proposing a mediation framework and estimating the mediating effects of lifestyle choices and social capital in the relationships between physical and physical and mental health may impact upon each other via employment. Worse physical (or mental) health

may imply a loss of wages or productivity reducing access to healthier foods and environments. This income effect impacts negatively on mental (or physical) health. Similar negative health effects may also be induced by lack of sleep or stress at work associated with having a mental (or physical) health condition of mental health in the older population.

Mental health may affect individuals' decision-making process, impairing their ability to access information on their health, on prevention, and on the quality of healthcare providers, and thus impacting their physical health. Physical activity is the largest contributor to the indirect effects (Bartram et al., 2011). There are stronger indirect effects for males in mental health (9.9%) and older age groups in mental health (13.6%) and physical health (12.6%). Physical and mental health are associated with lifestyle choices such as physical activity, smoking and alcohol consumption, and diet. Moderate alcohol consumption has been found to have a positive relationship with both mental and physical health, and better mental health and better physical health have been found to predict moderate drinking (WHO, 1995)

CONCLUSION:

We examined the direct and indirect effects of mental health on physical health and vice versa, through mediation analysis. We developed a mediation framework and tested whether the effects of mental health on physical health and physical health on mental health are mediated by lifestyle choices (physical activity, number of cigarettes smoked) and social capital (social interaction). We find that past mental (physical) health has a significant direct and indirect impact on physical (mental) health. The indirect effect of past mental health on physical health is mediated by lifestyle choices and social



interactions. The relationship of past physical health with present mental health is only mediated by past physical activity (Duihofet al.,1986). The main finding of this paper is that past mental and physical have strong indirect cross-effects on current mental and physical health. Health policies aiming at changing physical and mental health need to consider not only the direct cross-effects but also the indirect cross-effects between mental health and physical health. The older population's stamina is always high due to their intake of food at a young age. But now purity in the diet is disappearing day by day (Leith, 1994). The key indirect pathways are past cigarette consumption, past physical activity, and past social interaction. Similar associations apply to the relationship between past mental health and present physical health.

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