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Physical activity: A comprehensive research review

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Abstract

After much-qualified research into the effects of physical inactivity and sedentarism on human health, this topic is still being debated and it remains a challenge to achieve adequate levels of physical activity. Sedentary timeline evolution has long-term, progressive, unforgiving, and almost silent consequences. A cyclic pattern is established, with no specific beginning, but includes a reduction in corporeal capacity; an increase in physical and emotional discomfort when exposed to higher levels of physical demand; and a sedentarism behavioural pattern associated with any kind of exercise avoidance, which is frequently associated with other harmful health behaviours. The initiation of this vicious cycle may be facilitated by social, economic, clinical, age, gender, education, race, civil status, and other factors. Regardless of these aspects, it is beyond the scope of this review to investigate these determinants.

Keywords: Physical activity

Introduction

In an era of sedentary lifestyles and growing public health concerns, physical activity has emerged as a powerful tool for combating the negative effects of inactivity and promoting overall well-being. Physical activity's profound impact on human physiology, mental health, and social dynamics has piqued the interest of researchers, healthcare professionals, and policymakers alike. As a result, scientific research into physical activity has expanded rapidly, providing invaluable insights into its multifaceted benefits and establishing a compelling case for its inclusion in daily life. This research paper intends to delve into the vast body of knowledge surrounding physical activity, emphasising its transformative potential across multiple dimensions of human existence. This study aims to provide a comprehensive overview of the topic by synthesising existing literature and examining the intricate relationships between physical activity and health, cognition, emotional well-being, and social engagement. Furthermore, it will shed light on the underlying mechanisms that drive these positive outcomes, enhancing our understanding of the relationship between physical activity and human physiology. Fitness is defined as a state of health and well-being marked by the ability to participate in daily physical activities or exercise ^[1]. Thus, strength and conditioning coaches' primary goal is to prescribe the appropriate physical fitness exercises to their athletes and/or clients in order for them to achieve specific fitness goals ^[2]. Several studies have shown that core training and testing are important in a variety of populations ^[3, 4] for improving performance ^[5, 6] and lowering the risk of injury (e.g., back and lower extremity injury) ^[6, 7]. Furthermore, core physical fitness exercises may help to reduce the risk of other musculoskeletal disorders caused by poor posture and sedentary lifestyles (e.g., lumbar spine overload, hip extensor imbalance, paraspinal muscle atrophy) ^[8]. The World Health Organisation (WHO) recommends at least 60 minutes of moderate-to-vigorous physical activity (PA) per day for children and adolescents aged 5 to 17, as well as muscle and bone strengthening activities three times per week ^[9]. According to recent studies, the majority of children and adolescents (80%) worldwide do not meet the recommended level of physical activity of 60 minutes per day ^[10-12]. Children and adolescents who do not follow WHO recommendations ^[9] are diagnosed with 'exercise deficit disorder,' which includes all negative health outcomes ^[13]. Childhood is an important developmental stage for acquiring basic movement skills through daily physical activity in order to achieve motor skill competence and movement confidence. Sedentary children are more likely to have negative health outcomes later in life ^[13]. Furthermore, it has been proposed that a physically active lifestyle is beneficial during childhood and adolescence and continues into adulthood ^[14-17]. Physical inactivity is one of the leading causes of death throughout the world ^[18, 19]. As a result, there is a global need to promote physical activity (PA) strategies. PA can be performed in a variety of settings, including work, organised sports, recreational activities, home activities, and active travel/commuting ^[19, 20, 21, 22].

Active travel/commuting is a non-motorized, environmentally friendly mode of transportation for people of all ages that involves physical displacement from/to home and workplace/school. Active commuting burns more calories and is easy to fit into daily routines^[23, 24]. Cycling and walking appear to be effective strategies for increasing daily PA levels; however, it may also improve physical fitness (PF) levels while promoting health^[25, 26, 27]. Previous research has found a strong link between active travel/commuting and PA levels; cycling and walking to school/work has also been linked to higher cardiorespiratory fitness (CRF), strength levels, and lower obesity indicator values in young and adult populations^[28, 29, 30]. PF is regarded as a biomarker of health, with the most common health-related attributes of PF being CRF, muscular fitness (MF), and body composition^[31, 32]. Assessing body composition, CRF, and/or MF attributes through the performance of most human systems allows one to monitor an individual's PA levels and health status^[31]. Previous reviews looked into the associations between active commuting and various PF characteristics at a young age^[33, 34, 35, 36]. Although some positive associations exist between active commuting and CRF, MF, and body composition^[37, 38, 39], the findings are inconsistent. Furthermore, while some studies in adults have been conducted, no systematic reviews have been conducted to investigate the relationships between PF and active travel/commuting in adults^[40]. As a result, the link between active travel/commuting and PF in different age groups is unknown. The goal of this research was to conduct a systematic review of the evidence on the relationship between PF and active travel/commuting in both young and adult populations.

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