CHAPTER I

INTRODUCTION

I. POSTURAL DEFECTS AND FAMILY BACKGROUND:
   A CONCEPTUAL ANALYSIS

II. AIMS AND OBJECTIVES

III. NEED AND IMPORTANCE OF THE STUDY
INTRODUCTION

The erect posture is a unique characteristic of a man which distinguishes him from the rest of the animals. For such unmatching peculiarity of human posture it has correctly been said, “without man’s posture, no man; without man, no culture; without culture, a world not worth living in”.¹

I. POSTURAL DEFECTS AND FAMILY BACKGROUND:

A CONCEPTUAL ANALYSIS :-

Posture :-

Posture is a general term that is defined as a position or attitude of the body, the relative arrangement of body parts for a specific activity, or a characteristic manner of bearing one’s body.²

Posture is an index of personality. “It expresses mental as well as physical status, and he who stands erect with a well poised, controlled

and therefore a graceful body will feel that he is a master of himself and a leader of men.⁴ The way we speak, sit, walk, sleep, stand, lie, etc., determines our posture. Similarly, the way we carry things on arms, on back, hang on the shoulder or on head also constitutes our posture.

**Evolution of Erect Posture** :-

The present erect or upright posture of man is a product of perhaps 350 million years of evolution. In the evolutionary process, the paired fins of certain tetrapods developed into limbs and provided for locomotion. In the course of time, possibly 150 million years ago, the first mammals came into existence. By 70 million years ago, quadruped primates about the size of rats were in existence. Over the millennia certain changes in body form adapted them to assume a vertical position. Gradually some 30 million years ago, the forests began to recede forcing man’s predecessors to become ground dwellers. Among the higher primates, bipedalism appears to a rise whenever it improves the organism’s chances of survival. Over the process legs lengthened and straightened. The foot lost most of its

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grasping abilities and became specialized for bipedalism. The upper extremities free from the burden of supporting the body evolved into instruments of great delicacy of movement. The pelvis, by which the lower extremities are attached to the vertebral column, has remained essentially that of a quadruped. Even the vertebral column has not completely adapted itself to the demands of upright posture.⁴

There are innumerable concepts of human posture and innumerable interpretations of its significance. Posture may claim to be “all things to all people”. To the physical anthropologist, posture may be a racial characteristic; to the orthopaedic surgeon, it may be an indication of the soundness of the skeletal framework and muscular system; to an artist, it may be an expression of the personality and emotions; to the actor, it serves as a tool for expressing mood or character, to the physician, biologist, fashion-model, employer, dancer, therapist, psychologist - to each of these, posture has a different significance. Each sees posture within the framework of his or her own profession and interest.⁵


Types of Posture:

Postures can be “inactive” or “active”. Inactive postures are adopted for resting, sleeping or training general relaxation. In inactive postures, the essential muscular activity required to maintain life is reduced to a minimum. Active postures require an integrated action of many muscles to maintain these. Active postures may be either “static” or “dynamic”. A static posture is maintained by the interaction of group of muscles which work more or less statically to stabilize the joints, and in opposition to gravity or other forces whereas, a dynamic posture is required to form an efficient basis for movement, and the pattern of posture is constantly modified and adjusted to meet the changing circumstances which arise as a result of movement.  

An efficient posture requires strong muscles, nervous control for neuro-muscular co-ordination, a stable psychological background, good hygienic conditions and an opportunity for plenty of natural free movement.

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An intact nervous system co-ordinates various postural reflexes, muscles, eyes, ears and joint structures which are essential for assuming and maintaining an efficient good posture.

**Good and Bad Posture :-**

It is only in good posture that the body functions best. Ease and grace of body movements are promoted by correct posture which in turn contributes to health by promoting good body-mechanics. An efficient posture in standing and sitting is to be esteemed as much for its social and psychological value as for its direct hygienic value.

Good posture is characterized by best mechanical efficiency, the least interference with organic function and the greatest freedom from strain. Good posture is even related to economics. Since good posture has aesthetic appeal, it is considered as a desirable social asset and one makes better impression and can thereby, impress more people in business and professional life.\(^7\)

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Dr. Edward Stieglitz in his book, "Living Through the Older Years" has pointed out that aging is part of living. We may retard aging or accelerate it, but we can not arrest it. Many people become biologically older than their chronological age just because of neglecting some simple rules of living. One of the most important rules often neglected is regarding maintenance of good posture.\(^8\)

The human body is just like a machine. Like any machine, human machine also functions efficiently when all of its parts are maintained in proper alignment.

Human kind’s biologic heritage has left them vulnerable in the area of posture and body mechanics. The evolutionary process which ultimately led to the assumption of biped position had resulted in several adverse effects on the skeletal, muscular, digestive and circulatory systems as they underwent the necessary anatomical adaptations. Some major adjustments were made in the evolutionary process to off-set these negative

\(^8\)Encyclopaedia of Sport Sciences and Medicine, “Posture” (London : Mac Millan and Company, 1971) : 1161.
effects. However, incomplete evolutionary adaptations to the biped position has left humans with postural problems which have been accentuated by their mode of living\textsuperscript{9}; and poor posture thus was the ultimate result.

A bad or poor posture is a faulty relationship of various parts of the body which produces increased strain on supporting structures and in which there is less efficient balance of body over its base of support.

A bad or poor posture may be caused by:

(1) injury, e.g. fracture, dislocation, an untreated sprain etc.,

(2) diseases, like osteomalacia, rickets, tuberculosis of bone etc.,

(3) habit, which may be formed due to an injury, disease or habitual standing on one leg,

(4) muscular or nervous weakness, may be caused by undernutrition or fatigue,

(5) mental attitude, e.g. depression, inferiority complex etc.,

(6) heredity, or

(7) improper clothing, e.g. too tight or too loose clothes or shoes etc.

Poor or bad posture has got its physical, physiological, social and psychological ill effects. "Bad posture with its poor body mechanics is accompanied by lack of muscle-tone, lowered threshold to fatigue, and lessened available mechanical energy. Especially, in older people exaggeration of normal curves tends to become set-in-rigid patterns and interfere with normal physiology".  

Poor posture causes a cramped position of heart, lungs and abdominal organs. Circulation of the blood is impeded and the organs farthest from the heart fail to receive adequate oxygen. Understretching of muscles in bad posture causes nervous and muscular fatigue. Bad posture is responsible for undue strain on joints and ligaments, which after a time results in pain. Just as lack of alignment in an automobile causes friction, similarly, poor posture causes fatigue, wear and tear in humans.  

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Children with habitual poor posture had more disease, fatigue, underweight, self consciousness, fidgeting, hearing defects, restless, timidity and asthma. Functional postural defects are committant symptoms of illness and poor health.\textsuperscript{12}

The maintenance of an erect posture is a distinct problem to the humans since the skeleton is fundamentally unstable in this position. The two legged human body presents a continuous problem in maintaining balance because the feet are a very small base of support for a multisegmented towering super structure.\textsuperscript{13}

The general outlook of boy in bad, and good posture is shown in photo. 1.


Postural Defects:

A period is termed a fact that we are creatures with an ability to answer the telephone than the other side. We write, we on one side and the other. Our school bag result more in the constant use of one arm, we hang games and sports heart and lungs.

Many gainful one sided in the activities including those of eating, sitting.

our bodily architecture.

The modern city life also requires little muscular strength and co-ordination. Therefore, the people living in cities often find difficulty in efficient maintaining and handling of their bodies.

Photo. 1. Showing Bad (A) and Good (B) Posture.

There are various types of postural defects ranging from mild to severe in degree. Some of the defects affect the spine and others the lower extremities. Postural defects of the spine and trunk include: Forward head,
Postural Defects:-

Any deviation of a normal posture lasting for a length of period is termed as a postural defect. It is also a well known fact that we are creatures with asymmetrical brains and asymmetrical habits. We write, we answer the telephone, we drive our vehicles and we sleep on one side more than the other. As children we carry our school books on one arm, we hang our school bag on one shoulder. Similarly, our athletic games and sports result more in the asymmetrical development of our muscles, heart and lungs. Many gainful occupations whether sedentary or those of the day labourer are one sided in their effect on the human frame.

Therefore, all our asymmetrical daily habits including those of eating, sitting, leaning or standing badly influence and cause derangement of our bodily architecture.

The modern city life also requires little muscular strength and co-ordination. Therefore, the people living in cities often find difficulty in efficient maintaining and handling of their bodies.

There are various types of postural defects ranging from mild to severe in degree. Some of the defects affect the spine and others the lower extremities. Postural defects of the spine and trunk include: Forward head,
Round upper back (Thoracic kyphosis), Round shoulders, Hollow back (Lumbar lordosis), Flat back, Over carriage, and Scoliosis etc. Postural defects of the lower extremity are knock knee, bow leg and flat foot etc. Quite often combination of two or more defects are found among the children. Sometimes, the presence of one postural defect can lead to the development of another defect at a higher or lower level to counter balance the already existing one.

Though every body part is exposed to defect, the most common physical impairments among civilized people exist in the feet, legs, shoulder girdle, upper and lower back areas with many diverse types and incidences of conditions. The most challenging aspect of the situation has been that the percentage of the incidence of weak and flat feet, knock knee, lordosis, kyphosis and scoliosis increased rapidly. \textsuperscript{14,15,16,17}


\textsuperscript{15} J.D. Morton, “Corrective Placement of Feet”, \textit{Your Health} 14 (October, 1965) : 331.


\textsuperscript{17} J. E. Goldthwait, et al., \textit{Body Mechanics in Health and Diseases} (Philadelphia: J.B. Lippin Cott Company, 1941), p. 274.
The spine plays a central role in the maintenance of erect posture. All mammals except man have a single dorsal curve in their spines. The spinal column in man is not a straight rod. The human spine contains four mild natural curves from front to back when viewed from the side i.e., cervical, dorsal, lumbar and sacral. These curves enable the head to balance more easily in the upright position. Exaggeration of these curves produces what is commonly termed as “poor posture”.

The most common spinal deviations are kyphosis - hunched back curvature, lordosis - exaggerated forward curvature in the lower part of the back, and scoliosis - lateral curvature of the back.

Pronated feet with valgus ankles and some increase of outward tibial torsion result in stress on the anterior and posterior tibial muscles with shortening of their antagonists i.e., the peronei that can very seriously limit the success of runners and jumpers and are prone to weakened knee conditions.

For the present study five postural defects selected for the investigation are defined as below:
**Kyphosis**

Kyphosis is an exaggeration or increase in amount of normal convexity of the thoracic region of the spine.\(^{18}\) (see photo. - 2).

**Lordosis**

Lordosis is an exaggeration of the normal lumbar curve accompanied by a forward tilt of the pelvis.\(^{19}\) (see photo. - 3).

**Scoliosis**

It is lateral curvature of spine. The shoulder on one side will be lower than the other. The hip of the opposite side will be higher, the arms hang loosely at the sides, the angle between arm and body is greater on one side than on the other.\(^{20}\) (see photo. - 4).

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\(^{19}\)Rasch and Burke, *Kinesiology and Applied Anatomy*, p.385.

Knock knee

Knock knee is position that tends to shift the weight towards the medial border of the foot and bring about a foot position of pronation.²¹ (see photo. - 5).

Flat foot

Foot is called flat foot when collapse of internal longitudinal and transverse arches of the foot combine with eversion.²² (see photo. - 6).

Postural Defects and Childhood :-

It becomes alarming when we learn that children are also increasingly affected with such disorders. It has now been observed that poor posture and faulty body mechanics are almost universal findings among the children. The childhood is the golden age of the life and boys and girls of today are the men and women of tomorrow. It is, therefore, rightly expressed that the future of a nation greatly depends upon the health status of its children.


Photo 2. Showing a boy having kyphosis.
Photo. 3. Showing a boy having lordosis.
Photo. 4. Showing a boy having scoliosis.
Photo. 5. Showing a boy having knock knee.
In one of the recent studies conducted in Britain it has been reported that almost 42% of the total population is suffering from back pain, a condition more alarming in Indian times heavier school bags than their British counterparts.

The advancement of advanced country life has been closely related to the present state of back pain. The “World Health Organization” has observed the severity of problems created by the rapid growth of densely populated predominantly urban areas.

Photo. 6. Showing a boy having flat foot.

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23 Ramesh Chandra Agarwal, ed. Dalit Bhasha (Gwalior: National Printing Press, 24 Nov., 1997), 4

In one of the recent studies conducted in Britain it has been reported that almost half of the children surveyed below the age of 14 years suffered from one or the other type of back pain. The heavy school bags result in deforming the spine of the young children and make them vulnerable to suffer from back pain for the rest of their lives. These findings can be more alarming in Indian context since, our children have to carry two to three times heavier bags on their back or the shoulder than that of their British counterparts.  

The age pyramid of India’s population shows that 42% of the total population is below the age of 15 years as compared with other advanced country like U.K. The density of population is also high relating to the present state of Indian economic development.

The “World Health Organization” has observed the severity of problems created by the rapid growth of densely populated predominantly

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low income settlements in Third World Cities. Almost half of today’s third world population lives in conditions of extreme poverty that the Governments can no longer cope with the need for basic housing and services, and that the resulting living conditions put millions of infants and children at risk of easily preventable diseases.  

Healthy children and healthy families are essential for human and national development. For the well being of the children, it has been recognised that ill health and poor nutrition are violations of the child’s most basic right to survive and to develop normally in mind and body.

Determinants of future success involve the position of a child in the family i.e., birth order and family status. According to Holinghead, the future success of a child depends upon the position of the family in the society. The Indian society is heterogeneous and is made up of several strata. Each and every people over here has various socio-economic status and hence, have different patterns of likes and dislikes and behaviour patterns

which determine the personality of an individual. A set of personality influential factors for pupil’s achievements are generally categorized as being associated with home, health, social-emotional adjustment, socio-economic status, birth order and family size of students because most of the adolescents are confronted with numerous problems related to these fields.  

It is easier to teach the children about proper use of their bodies which should be mechanically efficient and good in looking. The proper health habits, correct body growth, physical alertness and fundamental body movements can all be easily inculcated and developed in them at this stage of life.

The research studies in U.S.A. have shown that most of the physical disorders of the late life were due to the faulty habits and improper use of the body during childhood.

The fundamental object of a child’s education must be normal development, good health and adjustment to his environment. The health aspect of a child should not be overlooked to his good scoring in studies.

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Therefore, the modern trend in schools is not to over burden a child with studies when the child’s body will not bear the strain. It is worth mentioning the most repeated statement, “what shall it profit a child if he gains the whole curriculum and lose his health?”.

“As the twig is bent, the tree is inclined”. These words of Alexander Pope can not be related more to any thing else but to the physical defects of the children. “The body of a person of sixteen to twenty years and older is not so amenable to correction as it was ten or fifteen years earlier”.

The examinations in elementary schools reveal the fact that the majority of elementary school children need correction for their existing postural defects. It is also felt that the gross neglect of the physical health of the elementary school children lead in them to the development of the structural deformities later in the college and university career, which can be repaired only with great difficulty, and in many cases, not at all.

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Therefore, any physical health defect including poor posture and weak feet should be detected through periodical examination in the children when they are still in elementary schools. Even the slight deviation from the normal should be detected as early as possible, and corrected without delay by suitable measures, so that an individual does not progress into complicated structural deformities.

The School Health Committee appointed by the Government of India have recommended that the maximum emphasis in regard to their health care should be given to the primary school children between 6-11 years. Similarly, the Estimates Committee of the Parliament, in their forty fourth report during 1958-59, had also felt the need for a comprehensive programme for improving the standard of health of school children. The Committee had further paid a great emphasis on this proposal because if the health of the school children deteriorates, the future of the country is at stake.\textsuperscript{30}

Etiological Factors:

There are a number of physical, social, health and economic variables which contribute to the wholesome development of a child in the course of life. These variables are subjected to influence by socio-economic, health and physical conditions to which the child is exposed and pattern of inter-relationship of these variables may vary across different socio-economic barriers.

The state of one’s health is influenced by hereditary factors, nutrition and environment. The total environment involves work place, school, home, community and recreational pursuits. A child spends only about one-third of the time in school and the rest at home and community. To optimize the child’s health, we must be concerned with factors that influence the total environment, not just one part of it. The total environment which influences one’s health is greatly affected by the socio-economic factors which have created many distinct classes in the society and due to this, some get the best things which are essential for good health and some get none, or are forced to compromise with the minimum.\footnote{P. Walton, \textit{Environment and Health} (New York : New York Academic Press, 1980), p. 436.}
There are a number of factors contributing to the development of postural defects i.e., over fatigue, malnutrition, lack of symmetry in muscular development because of lack of exercises, sitting in strained position, restraint of movements by clothes or shoes that do not fit, and sleeping in strained position caused by sagging mattresses or bed springs, or using pillows large enough to bend the neck forward etc. The poor eye sight or hearing is also an important factor of postural defects, since it makes a person lean forward or cock his head in an unnatural position to see or hear better.

**Heredity :-**

Postural defects may be hereditary also. The physical and mental traits of every human being are, to some extent, determined by the nature of his genes at the moment of conception.\(^{32}\)

The genetic make - up is unique, in that it can not be altered after conception. A number of diseases are now known to have genetic origin e.g., chromosomal anomalies, errors of metabolism, mental retardation and some types of diabetes etc. Certain postural defects like kyphosis, knock knee

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and flat foot are also presumed to have genetic basis. Therefore, the state of
postural defects and health are also dependent on the genetic constitution of
a man.

**Malnutrition** :-

One of the commonest factors of the postural defects is
malnutrition. The child’s muscles are weak. He needs better food, more rest
and greater muscular strength. Fatigue may underlie his poor posture.
Because of poor hygiene or recent illness, the pupil does not have sufficient
strength to carry the day’s programme without becoming over-tired.
This fatigue shows itself in his slumped position. The obese child is likely to
develop poor posture because of excessive weight the body framework has to
carry.\(^{33}\)

Bedi\(^{34}\) stated that millions of Indians do not get enough of food
or they get too much of some and too little of others. In about 30% of
families, it is deficient in calories and energy requirements. The diet is ill

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\(^{33}\) C.E. Turner, Harriett B. Randall and Sara Louise Smith, *School Health and Health Education* (St. Louis: The C.V. Mosby

balanced and deficient in vitamins, fats and proteins of high biological value. Certain protective foods like milk, fruits, eggs, meat etc., do not find a place in the diet of poor class people. The faulty diets are not peculiar to the poor classes only, but are met with among the well to do classes also, for prejudices, ignorance and habits, and often prevent them from the proper choice of health giving foods. Similarly, problems of over-nutrition like obesity, hyper-vitaminosis are often found among affluent communities, individuals or families.

**Environmental Factors :-**

It is an established fact that environment has a direct impact on the physical, mental and social well being of those living in it. The environmental factors range from housing, water supply, psychosocial stress and family structure through social and economic support systems to the organization of health and social welfare services in the community.

Therefore, the environmental factors also play a very important role on the posture of the children. Non-availability of correctly lighted, ventilated and spacious place for study at home or school may make the children stoop forward in an attempt to see better or to twist the body in order to avoid glare. Similarly, improper seating arrangement will also lead to a poor sitting posture.
Inadequate play facilities or equipments, attitude of the parents towards games, sports and other activities may also affect their overall body building and health.\textsuperscript{35}

The life-style or "the way people live" reflects a whole range of social values, attitudes and activities. It is composed of cultural and behavioural patterns and life-long personal habits that have developed through processes of socialization. Life-styles are learnt through social interaction with parents, peer groups, friends and siblings, and through school and mass media. Many life-style factors like adequate nutrition, enough sleep and sufficient physical activity etc., can actually promote health. In developing countries like India where traditional life-styles still persist, risks of illness and death are connected with lack of sanitation, poor nutrition, personal hygiene, elementary human habits, customs and cultural patterns.

Stylish way of modern living also has got ill effects on the body and posture. Too tight or loose clothes can produce odd movements which could cause postural defects. Cushioned beddings also have a tendency to affect the spine-growth adversely. The stylish or fancy, narrow, tight or high heeled foot-wear may spoil the gait of a child.

Habits :-

Wrong methods of doing things may also play havoc with a child’s personality and overall development. Improper walking, talking, running or lifting weight etc., may adversely affect the body. For example, a child carrying a heavy bag on one shoulder may be compelled to walk limpingly or lean on one side, and with the passage of time, the child may develop a postural defect which would develop defective gait and also affect his vision.

Postural Defects and Family Background :-

The background of a family in which a child is brought up plays a very important role in his growth and development. The family background status expresses one’s family type and its composition, dwelling conditions, caste, religious beliefs, economic status, occupation and educational status of parents etc. And it is already a well known fact that the
social habits, customs and physical environment in which the individual lives can greatly contribute to the illness or the disease. The type of dwelling, lifestyle, hygienic habits, diet, or type of individual interaction all affect one’s proneness to disease or illness.\textsuperscript{36}

**Socio-economic Factors :-**

Socio-economic conditions have long been known to influence human health. For the majority of the world’s people, health status is determined primarily by their level of socio-economic development, education, nutrition, employment, housing, the political system of the country etc. There can also be no doubt that in many developing countries, it is the economic progress that has been the major factor in reducing morbidity, increasing life expectancy and improving the quality of life. The economic status, to some extent, also determines the family size, pattern of disease and deviant behaviour in the community.

Therefore, there is a strong association between the poverty and illness. It has been expressed that many categories of illness such as childhood diseases, tuberculosis and chronic illnesses are found disproportionately more often among the poor than in the middle class. The poor are hampered by their inadequate diet and undesirable working and living conditions.

The different social classes also appraise illness differently and accordingly act or do not act on the symptoms when they appear. Social class difference also influences the family structure and utilization of medical services. Quite often, economic crisis deplores the conditions for the care of their minor physical illness. The poor and middle class people do want to care for their illness, yet they delay it because of their economic crisis and other living priorities. Different cultures and classes have different degrees of tolerance to pain. In poor families, a person may have a back symptom for years and never consult a doctor.\textsuperscript{37}

Similarly, it has also been detected that the upper social classes have less mortality from communicable diseases, moreover, they enjoy longer

\textsuperscript{37} Ibid., pp.403-405.
span of life and better health than those of lower social classes. The high
mortality due to communicable diseases are found to be more common in
lower social classes which generally have larger family members but limited
resources for utilization of medical services.\textsuperscript{38}

\textbf{Education:-}

Education also plays a very important role in the health status
of the people. Education brings more awareness among the family members
towards prevention and treatment of various diseases and postural defects.
Education, to some extent, can also compensate for the poverty as far as the
prevention of various communicable and other diseases are concerned.

\textbf{Occupation:-}

Occupation may be regarded as the means of livelihood of the
parents. The nature of occupation has a great impact on the procreation of
children. Being not much familiar with health education, the parents remain

\textsuperscript{38}\textit{Mukherjee, Dr. B.N. Ghosh's: A Treatise on Preventive and Social Medicine}, p. 35.
uncared for the health and posture of their children. Parents running business and engaged as workers may hardly find time to care for the health of their children.

Caste and Religion :-

Caste and religious structure of any community play an important role in the maintenance of their children's health. A number of food restrictions have been imposed on the family members on the basis of religion and caste-hierarchy. Certain diseases like tuberculosis have been reported more often among the Muslims. Similarly, cancer is also said to be more common in the Christians.

Dwelling Conditions :-

Dwelling or housing conditions may also affect the health and posture of the children. A pukka house, for example, may be relatively more hygienic than a katcha house. A well-lighted and ventilated house has a less impact on diseases and vice-versa. Density of family members in the house also has relatively an immediate impact on diseases.
Family Type and Composition:

The type and composition of a family determine its pattern of expenditure on various items, and therefore influence the utilization of family’s total income by different members. The quality of food, clothing, education, recreation and medical care children may get in the family all depend upon its size as well as economic status. A joint family offers the collective care and responsibility to a sick child in the family particularly by the grand parents and other older members in the family. Therefore, the health and posture of the children are definitely influenced by the family type and its composition.

Therefore, any factor affecting health may cause postural defects in the children. Hence, the family background factors seem to be related to the causation of postural defects in the children. The malnourished child for example, who does not have the caloric intake to supply needed energy simply does not have the strength to hold himself up: poor posture and postural defects are therefore, the inevitable result.

The above description very well illustrates the interrelationship of family background and postural defects. Except heredity, almost all the factors causing postural defects either directly or indirectly, have a bearing on the family background. It is a well known fact that the
poverty is linked with malnourishment, underweight and illiteracy. There is also comparatively less awareness among uneducated and poor about the simple rules of living and therefore, in regard to the care of their body. So far, the scholar has not yet come across such a study in which the postural defects have been examined in relation to the family background in Indian children. Therefore, the scholar has undertaken this study with the aims and objectives mentioned later.
II AIMS AND OBJECTIVES

The present research work entitled, "A study of relationship between family background and postural defects in primary school boys" has been of immense need with its categorical aims and objectives. No research work can successfully be completed without laying down its aims and objectives.

The aims and objectives of the present research work include a study of various aspects and status of posturally defected boys. Their family background has specially been studied in the project. The following aims and objectives have been determined for study in the investigations:

(1) To locate and identify the posturally defected boys in the primary schools of Greater Gwalior, and analyse the extent and incidence of five common postural defects namely, kyphosis, lordosis, scoliosis, knock knee and flat foot in different family backgrounds.

(2) To assess the influence of family type, caste, religion, dwelling conditions, economic status, occupation and educational status of parents on various postural defects in primary school boys.
(3) To contribute to the body of knowledge from which the most common five postural defects can be known of Indian primary school boys of different family backgrounds.

(4) To offer suggestions to the parents of posturally defected boys for their better prevention and management on the basis of the present study.

(5) To determine the prevalence of five common postural defects among the Indian primary school boys so that the preventive and corrective measures can be suggested for formulating an effective physical education programme for Indian primary school boys.
III NEED AND IMPORTANCE OF THE STUDY

Children are the wealth of a nation. The boys and girls of today are the future citizens of a country. Their importance in the life of a community and society can not be over-estimated. In fact, present set up of small families makes it necessary that every child should be physically and mentally fit. The postural defects hamper the normal growth of the children. Their body-structure and functions are adversely affected. It has also been observed that those suffering from postural defects are usually unable to put up good performance at all levels. The postural defects can also result in the setting of early arthritic changes which can make them crippled for the rest of their lives. The detection of postural defects at an early age can help in their easier prevention and correction and, therefore, suitable remedial measures can be taken at an appropriate time.

A number of good literary research articles may be presented in seminars and symposia on the related problems of posture of mankind, yet no systematic and scientific study has, to my knowledge, been conducted on the postural defects of the school going boys in relation to their family background.
The present study, therefore, pointedly emphasises on the increasing incidence of postural defects among the new generation. Alongwith the inferior standards of food material, the pressure of population explosion may also be conceived as one of the etiological factors for the problem. Therefore, there is an acute need to discuss such types of problems at the open theatres for the awareness among the parents of posturally defected children.

After analysing the need of the present research problem, the results may be of immense importance for the personnel who are engaged in the scientific and proper reformation and rehabilitation of posturally defected children. The usefulness and utility of the concrete results will definitely be fruitful to the academicians, health professionals, policy makers, administrators and public in general to arouse an awareness regarding the severity of the problem.

This study is also useful in predicting the type of postural defects most common at an early age of the life, and would indicate the relationship of five common postural defects in relation to family background, if any. Therefore, necessary preventive and corrective methods can be employed from the beginning of the onset of these defects.
The study would also provide guidelines by way of a suggested corrective programme to eliminate postural defects of primary school boys. These results may also be applied later on the high school and college students.

This study may also help in stimulating the sociologists, physical and health personnel etc., to carry out similar studies in the primary as well as high school children in other parts of the country.