

SAFE FALL-SAFE SCHOOLS

Annex 4. Observation Test Level I: Backwards Fall

Analysis of the motor response of pupils to an unintentional **backwards fall** (ushiro ukemi)

Center Name: _____ Student code: _____

Level:

Course:

Group:

Note: the organization of schools into levels, courses and groups varies by country. These fields are to be modified in a way that fits each country, so that students can be identified anonymously.

Age: _____

Gender: Male

Female

Height in cm: _____

Weight in kg: _____

Physical activity:

None

Recreative

Competitive

Sport or Physical Activity: _____

Pre-test:

Post-test:

Date: ____/____/____

Name of observer: _____



Photographic description of the Observation Test Level I: Backwards Fall

Criterion	Description	YES (1)	NO (0)
Head	Flex the neck and bring the chin to the chest, keeping the head away from the ground.		
Hands	Bring hands behind the head to protect it.		
Trunk	Roll onto the back.		
Hip	Maintains hip block.		
Knees	Maintains flexion of the knees.		

Observations: _____

This study has been approved by the Research Ethics Committee of the General Directorate of Quality, Research, Development and Innovation, of the Ministry of Health of the Regional Government of Andalusia. Spain (CI: 0021-N-18)