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Study of mental health among sportspersons

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Abstract

The present study was an attempt to find out the difference in mental health among sportspersons participated at district and state level championships. Eighty sportspersons (40 district level + 40 state level) players were taken as a sample on the basis of random sampling method. Mental Health Battery by Arun Kumar Singh and Alpana Sen Gupta was used to collect the data. Mean, SD and 't' test was used to analyse the data. It was found that sportspersons participated at state level championships have better mental health than sportspersons participated at district level championship.

Keywords: Mental health, sportspersons

Introduction

Health is a positive concept, as more than 190 signatory member states of World Health Organisation have endorsed. The WHO definition of health implies that mental health cannot be achieved merely by preventing or treating disorders. It must address the broader issues affecting the mental well-being of all sections of society. Mental Health refers to a broad array of activities directly or indirectly related to the mental well-being component included in the WHO's definition of health: "A state of complete physical, mental and social well-being, and not merely the absence of disease". It is related to the promotion of well-being, the prevention of mental disorders, and the treatment and rehabilitation of people affected by mental disorders.

Mental health is a vital component of the total health of an individual because our entire thought process takes place in mind, ideas originate in mind and all kinds of directions are issued from mind which guide, shape and regulate communication, conduct and behavior and determine personal and social functioning as well as adjustment (Bhargava and Raina, 2007)^[3]. Allport (1955)^[1] deals with healthy personality prescribes the study of normal and mature adults instead of neurotics. He indicates that healthy persons were not controlled by unconscious conflicts while neurotic adults possessed these conflicts.

Cautioning us against confusing mental health with mental illness, Kumar (1992)^[10] says that mental health serves as an index to show the extent to which the person has been able to meet her/his environmental demands- social, emotional and physical. However, when s/he finds herself trapped in a situation s/he dose not have matching strategies to deal with effectively, s/he gets her/himself mentally strained. This mental strain is generally reflected in symptoms like anxiety, tension, restlessness or hopelessness among others. If it is felt for too long and too extensively by the person, these symptoms may take a definite form (or get 'syndromised'), representing a given illness. Mental health, according to Kumar, is a study of pre-illness mental condition of the person concerned.

The concept of mental health is as old as Human beings. In recent years clinical psychologists as well as educationists have started giving proper attention to the study of mental health, however, in India, relatively very few work has been conducted. Mental health as defined by Kornhauser (1965)^[9] connotes those behaviors, perceptions and feelings that determine a person's overall level of personal effectiveness, success, happiness and retention of goals that are neither too high nor too low to permit realistic successful maintenance of belief in one's self as a worthy, effective human-being (Lakshminarayanan & Prabhakaran, 1993)^[11].

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So a mentally healthy person is firm in his intentions and is least disturbed by strains and stresses of day-to-day life. Thus the concept of mental health takes a 'Gestalt' view of the individual. It incorporates the concepts of personality characteristics and behavior all in one. It may also be understood as the behavioral characteristic of the person. A mentally healthy person shows a homogeneous organization of desirable attitudes, healthy values and righteous self-concept and a scientific perception of the world as a whole. Several psychologists like Erickson (1936)^[4], Hurlock (1972)^[6] have expressed their view in similar tone. A mentally sound or healthy person should also be understood as a dynamic and conscientious person who is found to be reasonably rational in the choice of means for the realization of his or her pious ends. It also presents a humanistic approach towards the understanding and assessment of the self, positive feeling, attitudes towards self and others.

Ramji and Besharat (2010)^[13] found a simple negative correlation between hardiness and psychological distress, but the correlation was not statistically significant. Hardiness is supposed to increase levels of sport achievement and psychological well-being through feelings of commitment, control, challenge, and coping skills. Hughes and Leavey (2012)^[5] pointed out that the intense mental and physical demands placed on elite athletes are a unique aspect of a sporting career, and these may increase their susceptibility to certain mental health problems and risk-taking behaviours. Kenari (2014)^[8] measured using the General Health Questionnaire GHQ-28 has performed. University students participated in this study of 260 patients who were randomly selected to represent the school. Statistical methods are used for the analysis and comparison of two sample t-test. The results show that the significant differences of symptoms of physical, anxiety, sleep disorder, social dysfunction and depression in the two groups were observed between athletes and non-athletes. The college student mental health and physical education than other students in four scales were much more favorable situation. Singh and Tiwari (2015)^[15] shown that there was a significant difference between Sports persons and non-Sports persons in term of mental health score arranged by mental health inventory questionnaire (df=398, $t=6.736$, $P<0.05$). The higher mean score of Sports persons ($M=144.95$) on mental health variable than the non Sports persons ($M=136.85$) indicates that Sports persons report higher mental health indexed in shape of life e.g. positive self evaluation perception of reality integration of personality autonomy group oriented attitude environmental competence overall than their non-Sports persons counterparts.

After reviewing the literature in this field (Jahoda, 1959; Maslow & Mittleman, 1951; Rogers, 1961; Whittaker, 1970)^[7, 12, 14, 16], following six popular indices of mental health were finally selected for inclusion in the present battery:

- Emotional Stability
- Over-all Adjustment
- Autonomy
- Security-Insecurity
- Self-concept
- Intelligence

A brief description of each of these indices are as under:

1. Emotional Stability

It refers to experiencing subjective stable feelings which have positive or negative values for the individual.

2. Adjustment

It refers to individual's achieving an overall harmonious

balance between the demands of various aspects of environment, such as home, health, social, emotional and school on the one hand and cognition on the other.

3. Autonomy

It refers to a stage of independence and self-determination in thinking.

4. Security-Insecurity

It refers to a high (or low) sense of safety, confidence, freedom from fear, apprehension or anxiety particularly with respect to fulfilling the person's present or future needs.

5. Self-Concept

It refers to the sum total of the person's attitudes and knowledge towards himself and evaluation of his achievements.

6. Intelligence

It refers to general mental ability which helps the person in thinking rationally, and in behaving purposefully in his environment.

Hence, mental health is concerned with the harmonious development of personality. Mental health and education are closely related with each other. For any type of education, sound mental health is the first condition. If children are not in sound mental health, they can't concentrate in learning and retain the knowledge received in the classroom learning is dependent on sound information and skill that will give them better control over their environment. Recent research studies have proved that learning is not the activity of single function but is bound up with total personality of the learner. Mental health is as essential to the learning process as intelligence. It is an important component of learner's personality. It has direct bearing on his development process. The individual, who is adaptable to the changing conditions of his environment receptive and no rigid in his behavior, can be said mentally healthy. A mentally healthy sportsperson is socially awakened. He participated in sports activities, social activities and his personality functions properly under strain and stress of emotional disturbance. He does not indulge in antisocial activities. His goal of life is in accordance with social norms. He fulfills his objectives in harmony with other colleagues. He can improve his behavior on the basis of his self-examination. The purpose of this paper is to assist coaches/physical education teachers in identifying sportspersons who may be having difficulty and to help coaches learn to respond appropriately and effectively with those sportspersons. It should be considered as a very important part of a larger cooperative effort involving other sport and healthcare professionals. Therefore, a humble attempt has been done by the investigator to know the mental health of sportspersons.

Statement of problem

Study of mental health among sportspersons

Objective

1. To compare the mental health of sportspersons participated in district and state level championships.

Hypothesis

2. There is no difference in mental health of sportspersons participated in district and state level championships.

Sample

A sample of 40 (40 state level & 40 state level) sportspersons of District Rohtak, those who have taken part in the district and state level championship have been selected through random sampling method.

Tool used

For the present study the Mental Health Battery by Arun Kumar Singh and Alpana Sen Gupta (2000) is used to collect the data.

Table 1: Mean, Standard Deviation and ‘t’-value of different components of mental health among sportspersons participated at district and state level championships

Sr. No.	Components of Mental Health	Group	N	Mean Scores	S.D's	t-value
1.	Emotional Stability	District level	40	8.31	2.02	2.871**
		State level	40	10.34	2.43	
2.	Overall Adjustment	District level	40	24.43	4.32	2.852**
		State level	40	27.51	5.14	
3.	Autonomy	District level	40	10.41	1.93	2.241*
		State level	40	11.22	1.53	
4.	Security and insecurity	District level	40	7.91	2.13	3.342**
		State level	40	10.79	3.47	
5.	Self Concept	District level	40	7.51	1.81	2.132*
		State level	40	9.53	2.73	
6.	Intelligence	District level	40	12.37	3.19	3.341**
		State level	40	15.39	3.66	
7.	Total Mental health	District level	40	70.94	15.40	4.197**
		State level	40	84.67	18.96	

**Significant at 0.01 level; * Significant at 0.05 level

Table Value at 0.01 level 2.58

0.05 level 1.96

Table 1 shows that ‘t’ value (2.871) of ‘emotional stability’ component of mental health of sportspersons participated at district and state level championships is significant at 0.01 level. It means that there is a significant difference in ‘emotional stability’ component of mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better than sportspersons participated at district level championship in the ‘emotional stability’ component of mental health.

The table further shows that ‘t’ value (2.852) of ‘overall adjustment’ component of mental health of sportspersons participated at district and state level championships is significant at 0.01 level. It means that there is a significant difference in ‘overall adjustment’ component of mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better than sportspersons participated at district level championship in the ‘overall adjustment’ component of mental health.

The next part of the table shows that ‘t’ value (2.241) of ‘autonomy’ component of mental health of sportspersons participated at district and state level championships is significant at 0.05 level. It means that there is a significant difference in ‘autonomy’ component of mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better than sportspersons participated at district level championship in the ‘autonomy’ component of mental health. The table further shows that ‘t’ value (3.342) of ‘security and insecurity’ component of mental health of sportspersons participated at district and state level championships is significant at 0.01 level. It means that there is a significant difference in ‘security and insecurity’ component of mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better mental health than sportspersons participated at district level championship.

Statistical Techniques

Mean, Standard deviation and ‘t’ Test were used to analyse the data,

Data Analysis

The present study was conducted with the aim of examining the mental health of sportspersons participated at district and state level championships. The data of 100 sportspersons was analysed by calculating ‘t’ test besides the descriptive statistics (mean and standard deviation).

The obtained results are given in tables below in tables 1

health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better than sportspersons participated at district level championship in the ‘security and insecurity’ component of mental health.

The next part of the table shows that ‘t’ value (2.132) of ‘self concept’ component of mental health of sportspersons participated at district and state level championships is significant at 0.05 level. It means that there is a significant difference in ‘self concept’ component of mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better than sportspersons participated at district level championship in the ‘self concept’ component of mental health.

The table further shows that ‘t’ value (3.341) of ‘intelligence’ component of mental health of sportspersons participated at district and state level championships is significant at 0.01 level. It means that there is a significant difference in ‘intelligence’ component of mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better than sportspersons participated at district level championship in the ‘intelligence’ component of mental health.

The last part of the table shows that ‘t’ value (4.197) of total mental health of sportspersons participated at district and state level championships is significant at 0.01 level. It means that there is a significant difference in total mental health among sportspersons participated at district and state level championships. Sportspersons participated at state level are better mental health than sportspersons participated at district level championship.

Hence, the null hypothesis framed earlier, “There is no difference in mental health of sportspersons participated in district and state level championships” is rejected.

Findings of the study

It was found that sportspersons participated at district level championships have better mental health than sportspersons participated at district level championship.

References

1. Allport G. *Becoming: Basic Considerations for a Psychology of Personality*. New Haven: Yale University Press, 1955.
2. Anand sp. *Indian Education Review*, NCERT, 1988; 23(1):41-47.
3. Bhargava M, Raina R. Conceptual Framework and Promotion of Mental health, Mehtal Health promotion: An Indian Perspective, in Mahesh Bhargava and Reeta Raina (Eds), *Prospects of Mental Health*, Agra: Bhargava Book House, 2007.
4. Erickson E. *Childhood and Society* (2nd ed.), New York: Norton, 1936.
5. Hughes L, Leavey G. Setting the bar: athletes and vulnerability to mental illness. *Br J Psychiatry*, 2012; 200(2):95-96.
6. Hurlock EB. *Child Development*. New York: McGraw-Hill, 1972.
7. jahoda G. development of the perception of social differences in children from 6 to 10. The British Psychological Society, 1959.
8. Kenari MA. Effect of Exercise on Mental Health in the Physical Dimension, Anxiety and Mental Disorder, Social Dysfunction and Depression. *Advances in Applied Sociology*. 2014; 4:63-68.
9. Kornhauser. Quoted in Singh, A.K. and Gupta, A.S. (1983). *Mental Health Battery*. Agra: Ankur Psychological Agency, 1965.
10. Kumar P. *Mental Health Checklist*. National Psychological Corporation, Agra, 1992.
11. Lakshminarayan TR, Prabhakaran P. Comparison of mental health among the different age groups of industrial employees. *Journal of Psychological Researches*. 1993; 30(3):30-34.
12. Maslow, Abraham, Mittelman B. *An Outline of Psychoanalysis*. New York: Modern Library, 1951.
13. Ramji S, Besharat MA. The impact of hardiness on sport achievement and mental health. *Procedia - Social and Behavioral Sciences*. 2010; 5:823-826.
14. Rogers CB. On becoming a person. Boston: Houghton Mifflin, Today's Teacher, all issues, 1961.
15. Singh G, Tiwari LM. A Comparative Study of Mental Health of Sportspersons and Non-Sportspersons of Punjab. *International Journal of Science and Research*, 2015; 5(4):2109-2111.
16. Whittaker JK. Developing a unified theory of residential treatment. *Mental Hygiene*. 1970; 54:166-169.