

## Determination of Mental Health Status of Sporting Individuals

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### Abstract

**Introduction and objectives:** This research was conducted to determine the mental health status of individuals who participate in sport.

**Methods:** Research is planned in a descriptive relational type. The study was conducted with face-to-face interviews with 143 people who participate in sport. In gathering the data; the information form prepared by the researchers questioning the socio-demographic information of the individuals and the General Health Questionnaire were used. The sample of the research has been formed by sports over 18 years of age who have been educated. In determining the sample of the research, the universal sampling method was used. The number and percentage distributions of the demographic data were used in the evaluation of the study and the chi square test was used to evaluate the relationship between the socio demographic characteristics and the general health.

**Results:** When the socio-demographic characteristics of the sports were examined, the mean age was  $31.12 \pm 3.24$ , 48.3% were female, 51.7% were male, 51.6% were married 48.4% were single, 49%, 68 were high school graduates, 47.61% were chronic illnesses and 50.37% had daily sports for 1-5 hours. When the mood states of the athletes were evaluated according to the GSA-12 score, 41.4% were low (<2 points), 36.36% were middle (2-3 points) and 21.39% were high) were found. When the socio-demographic characteristics of the sports and general health questionnaire score were examined, it was found that the mental health of the men was better and the difference was statistically significant ( $\chi^2=3.147$ ,  $p<0.05$ ).

**Conclusions:** When the results obtained from the study are evaluated, women, marriages, high school graduates, those with chronic illnesses and those with 1-5 hours of daily sports are at risk for mental health.

**Keywords:** Sports; Mental health; General health

### Introduction

Sports and physical activities provide people in both physiological and psychological health development in a positive direction. Participation in physical activity is associated with positive effect, self-esteem, physical and psychosocial well-being. Stable life is the most important risk factor for cardiovascular diseases and causes of death in adults. Depressive symptoms are manifested by many health problems including decreased functional status, work efficiency inhibition, osteoporosis, diabetes and cardiovascular [1].

Depressive symptoms are manifested by many health problems including decreased functional status, work efficiency inhibition, osteoporosis, diabetes and cardiovascular disease Physical activity is suggested as a potential protective agent that reduces the prevalence of mental health problems and suicidal behavior [2]. It is known that physical activity and exercise have a positive effect on mood and anxiety, and there is a positive relationship between physical activity and general well-being, mood and anxiety [3]. In a study examining the relationship between sport and depression and anxiety, regular sports were found to be useful for this anxiety and depression [4].

Stephens summarizes the epidemiological studies of the relationship between sport and subjective well-being and concludes that there is a clear relationship between sport and subjective well-being. Individuals are reported to have more healing in their emotions when they are doing sports, focusing on personal goals. Regular physical activity is recommended to improve quality of life for all ill or healthy individuals. Exercise is considered an effective method in the prevention and treatment of psychiatric disorders such as anxiety and depression even when there is no psychiatric problem [5].

A state of emotional and psychological well-being in which an individual is able to use his or her cognitive and emotional capabilities, function in society, and meet the ordinary demand of everyday life. A positive state of mind engendering a sense of well-being that enables a person to function effectively within society. Individuals who have good mental health are well-adjusted to society, are able to relate well to others, and basically feel satisfied with themselves and their role in society [6]. Psychological well-being includes whether people are aware of their life's purpose, potential, and the quality of their relationship with other people [7]. It reflects the positive perception of the self, the development of safe and positive relationships with other people, the shaping of the environment to meet individual needs and desires, the ability to act autonomously and independently, the purpose

and meaning of life, the awareness of capacity and the development of this capacity [8]. Individuals with high levels of psychological well-being are known to have the highest levels of physical, emotional, cognitive, and mental well-being [9]. It is seen that the physical activities performed at sufficient level have positive effects on physical and mental health. Studies report that mental conditions of individuals who do not have psychiatric problems and exercise regularly are better than those who do not exercise [10]. However, it is important to examine the relationship between physical activity and mental state improvement in healthy and regular sportsmen. This study was carried out in order to determine the mental health status of the athletes.

### Research questions

- How are the mental health conditions of the athletes?
- Do socio-demographic characteristics affect the mental health status of athletes?

### Method

#### Design and simple of study

The research is planned in a descriptive manner. In determining the sample of the research, the universal sampling method was used. Because the prevalence is unknown, the frequency of occurrence is 50%, the sample is calculated as 143 individuals with a standard deviation of 5% and 95% confidence interval. The survey was conducted with face-to-face interviews with 143 athletes aged 18 years and over. In gathering the data; information form prepared by researchers questioning socio-demographic information of individuals and "General Health Questionnaire" evaluating the mental status of individuals were used.

#### Collection of data

The data of this study were collected by face-to-face interview technique from adult active sporting individuals.

#### Socio demographic questionnaire

In the Personal Information Form, demographic questions such as age, gender, educational status, marital status, chronic illness and daily sporting period were included.

Variables	Low (<2 point)	Medium (2-3 point)	High (4 and upper)	P value
	n(%)	n(%)	n(%)	
<b>Gender</b>				
Female	23 (15.87)	30(20.7)	17(11.73)	$\chi^2=3.147$
Male	37 (25.53)	22(15.18)	14(9.66)	p=0.01*
<b>Marital status</b>				
Married	20(13.8)	35(24.15)	19(13.11)	$\chi^2=7.208$
Single	40(27.6)	17(11.73)	12(8.28)	p=0.03*
<b>Educational level</b>				
High school	16(11.04)	40(27.6)	16(11.04)	$\chi^2=5.243$

### General health questionnaire (GHQ-12)

The validity and reliability study of the scale was conducted by Kılıç [11] In the GHQ, the items are scored in triple Likert type. 0 and 1 answers 0, 2 and 3 answers are scored 1 point. Those who score fewer points in the scale are low, those who score between 2 and 3 are medium, and those who score 4 or more are grouped with high scores.

The high scores on this scale indicate that the incidence of mental problems (anxiety and depression) increases. In this study, the cut-off point is two points. The alpha score obtained in this study was 0.79.

### Results

When the socio-demographic characteristics of the athletes were examined, the mean age was  $31.12 \pm 3.24$ , 48.3% were female, 51.7% were male, 51.6% were married 48.4% were single, 49.68% of high school graduates, 47.61% of them had chronic illnesses and 50.37% of them had daily sports for 1-5 hours.

When the mental health states of the athletes were evaluated according to the GHQ-12 score, 41.4% were low (<2 points), 36.36% were middle (2-3 points) and 21.39% were high points (Table 1)

GHQ-Total	n	Percentage (%)
Low (<2 point)	60	41.4
Medium (2-3 point)	52	36.36
High (4 and upper point)	31	21.39

**Table 1:** Distribution of mental health status according to GHQ-12 score.

When the socio-demographic characteristics of the athletes and general health questionnaire points were examined, it was found that the mental health of the men was better and the difference was statistically significant ( $\chi^2=3.147$ , p<0.05). The difference in mental health status of single mothers was found to be statistically significant ( $\chi^2=7.208$ , p<0.05).

According to college graduates' high school graduates ( $\chi^2=5.243$ , p<0.05), those with no chronic disease ( $\chi^2=4.017$ , p<0.05)  $\chi^2=0.279$ , p<0.05) were found to be statistically significant (Table 2).

University	44(30.36)	12(8.28)	15 (10.35)	p=0.001*
<b>Chronic Illness</b>				
Yes	9(6.21)	42(28.98)	18(12.42)	$\chi^2=4.017$
No	51(35.19)	10 (6.9)	13(8.97)	p=0.002*
<b>Daily sports making time (Hour)</b>				
1-5 hour	16(11.04)	40(27.6)	17(11.73)	$\chi^2=0.279$
6 hour and upper	44(30.36)	12(8.28)	14(9.66)	p=0.02*
*p<0.05 ** A corrected chi-square analysis was done for Yates because the observed number is less than 25.				

**Table 2:** Participants' socio demographic characteristics and general health questionnaire distribution.

## Discussion

When the results obtained from the study are evaluated, women, marriages, high school graduates, those with chronic illnesses and those with 1-5 hours of daily sports are at risk in terms of having mental health problems. In mastering the mind, the sportsman or woman has the greater ability to perform at their personal best and achieve far greater success. Sports are a great source of health and well-being; it requires the power of mind and body. Health and well-being are a basic part of the jigsaw that makes up our quality of life [6]. Exercise has also been found to be related to positive affect and personal good feeling [12]. The findings of studies found that sports activities positively affect emotions. Even a ten-minute walk has a positive effect on optimism, happiness, personal approach to problems, and physical well-being [13]. The resultant consensus statement concluded that exercise is (i) positively linked with mental health and well-being, (ii) reduces stress and state anxiety, and (iii) has emotional benefits for all ages and in both genders [5,14,15]. Chronic exercise had a slightly better effect on anxiety than acute exercise. The effect of exercise was largest in pre-post test within-groups designs, aerobic exercise was better than anaerobic exercise, and high intensity exercise of 21-30 min duration had a better effect than low intensity exercise shorter than 20 min or longer than 30 min. The effect size was largest when anxiety was measured 20 min post-exercise. Effect sizes were largest in studies using matched controls and lowest in studies using random assignment. Effect sizes were largest in participants aged between 31 and 45 [16]. Exercise improves mental health and well-being, reduces depression and anxiety and enhances cognitive functioning. Although exercise seems to improve the quality of life of those living with mental health problems, its value is seldom recognized by mainstream mental health services. The evidence suggests that exercise may be a neglected intervention in mental health care.

## Conclusion

In this study, the average age of the athletes was  $31.12 \pm 3.24$ , 48.3% were female, 51.7% were male, 51.6% were married 48.4% were single and 49.68% high school graduates, 47.61% had chronic illnesses and 50.37% had daily sports for 1-5 hours. When the results obtained from the study are evaluated, women, marriages, high school graduates, those with chronic illnesses and those who have 1-5 hours of daily sports are at risk group for mental health.

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