

# Mental health among male and female sport players: A comparative study

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## ABSTRACT

The present investigation was undertaken to study the mental health of male and female sport players. For this research work, a sample of 110 public school's sport players (45 Males and 65 females) belonging to various schools located at district Haridwar (Uttarakhand) were selected with the help of incidental sampling techniques. Mental Health Questionnaire developed by Langner (1962) has been used to make this study. Finding indicated that male and female sport players did not differ significantly in terms of mental health.

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Many people, when they hear the term Mental health, think of mental illness. But mental health is far more than an absence of a mental illness; mental health is something all of us want for ourselves.

Mental health is determined by:

- How you feel about yourself?
- How you feel about others?
- How you meet the demands of everyday life?

One way of describing mental health is to describe characteristics of a mentally healthy person. There are many different degrees of mental health and no one characteristic is indicative of good mental health; nor can the lack of any one characteristic signify a mental illness. In fact, nobody has all the traits of good mental health all the time.

Health is, undoubtedly, an indispensable quality in human being. It has been described as soil from which the finest flowers grow. Therefore, neglecting one's health for other virtues in life is said to be the greatest of follies. Person's concern for health has not always been so attractive as it seems to be in the present era. Indeed, with growth of science, technology, and materialistic predominance, hazards, especially 'mental health', has become the essence of time. Most of the medical scientists and psychologists have been dealing with disease or illness rather than health, therefore, the phenomenon of 'health' was being forgotten, but it is a matter of happiness that during the last two decades medical as well as behavioural scientists mainly psychologist and

psychiatrist realized the importance of 'mental health'.

Mental health covers an elusive and diffuse field and the term itself encompasses a multiplicity of meaning. The concept of mental health has been vaguely defined by psychologists and psychiatrists. According to Menniger (1945), "The definition of mental health is such a quality by which we, with pleasure and maximum effectivity in between the world as well as with the human being, could do the adjustment. Also that is a co-natured, a brilliant intellectual, socially having the balanced behaviour and capability of maintaining a pleasant way of life". Hadfield's (1950) view, "Three complements; the full expression, the harmonization and the capabilities to the aimed direction for goal achievement", is the definition of mental health. Banrad (1952) attempted to differentiate the positive health from non-health and negative health. To her "Positive health consists in ways of living that are beyond the frontiers of more social existence implied by negative health, and this category (positive health) applies when there is evidence that the individual fully utilizes a capacity or is working in that direction." Further Maslow (1954) indicates that a study of people who have fulfilled their potentialities to the greatest degree will lead us to the formulation of a "positive psychology" and will rid us of negative approaches. He was very critical of Freud and other personality theorists who tried to understand the nature of personality by studying only neurotics and severely disturbed individuals. Maslow (1954) suggested to study the best, the healthiest, and the most mature side

of human nature. Allport (1955) developed a theory which concerned entirely with the healthy personality. Indeed, he was the first personality theorist who stressed to study mature and normal adults instead of neurotics. He indicated that healthy persons were not controlled by unconscious conflicts while neurotic adults possessed these conflicts. Fromm (1955) characterized mental health by the ability to love and to create, by the emergence from incestuous ties to clay and soil, by a sense of identity based on one's experience of self as the subject and agent of one's powers, by the grasp of reality inside and outside of ourselves; that is, by the development of objectivity and reason.

Rumke (1955) is of the opinion that "The understanding of the disturbances of the sick man hardly contributes to the understanding of the normal man." Thus, a proper definition of mental health may not be given as more absence of mental disease. Positive connotation of mental health must be kept in mind to understand the human personality. Due to emphasis on the healthy aspect of human personality 'growth psychology' or 'health psychology' developed which attempts to expand, enlarge, and enrich the human personality. Several psychiatrists and behavioural scientists have presented their views about the nature of psychological health in various ways.

From the foregoing description of underlying factors in mental health, it may be seen that mental health involves continuous process of adjustment through optimum use of one's potentials rather than a static condition. For those who are ill, it is a matter of getting well, for those who are "getting along", it is a matter of improvement and for those who are robust, it is a matter of maintaining and continuing achievement. Buhler (1959) indicated four basic biological tendencies of life, such as, need of satisfaction, upholding of the internal order, adaptation, and productivity. For an individual to achieve healthy functioning, these four basic tendencies have to be balanced and integrated. She believes that an analogy between biological frame of reference and the psychological conceptualization is not only valid but also preferable, since only through correlation of biology and psychology will be achieved a fuller understanding of the constitution of health and normality.

Smith (1959) has criticized the criteria for mental health suggested by Maslow (1954) and Jahoda (1958). He writes "Neither the strategy of direct assault (Maslow) nor that of multiple criteria (Jahoda) turns out to give us much assistance on the problem, although the empirical relationship brought to light by research that follows either strategy may aid us in the volitional decision as to where to draw boundaries" As Ionesco (1960) says "you seem

very sure of yourself. Who can say where the normal stops and the abnormal begins?" However, attempts have been made to define mental health, and to some extent satisfactory conclusions are also drawn from the researches. Before the second half of the twentieth century, mental health was considered as the absence of mental disease. But it is interesting to note that the concept of mental disease has not its adequate definition. In such a situation, definition on one vague concept in terms of the absence of another ambiguous concept may not provide a precise and satisfactory meaning of the concept. Therefore, since the second half of the twentieth century mental illness and mental health have been characterized as sharply disparate and it was suggested that the absence of ill-health may constitute a necessary but not satisfactory definition of mental health. As a consequence, mental health has been considered in its more positive connotation, not as the absence of mental illness. Frankl (1965) presented the self-transcendent person model of healthy personality. His system entitled "Logotherapy" means the meaning of human existence and the human need for meaning, as well as with specific therapeutic techniques for finding meaning in life. He suggests that three factors, namely, spirituality, freedom, and responsibility are indispensable for healthy human existence.

There are several definitions of the term mental health and mental illness. In earlier days, absence of illness was considered as health. However, psychiatrists and psychologists have been dissatisfied with this way of looking at health-physical or mental. It is now recognized by World Health Organization (WHO) that health is a positive concept. This has been brought out clearly by Preliminary Reports of White House Conference as early as in 1930. In the Preliminary Reports of White House (U.S. Government), mental health is defined "as the adjustment of individuals to themselves and the world at large with a maximum of effectiveness, satisfactions, cheerfulness and socially considerate behaviour and the ability of facing and accepting the realities of life. The highest degree of mental health might therefore be described as that which permits an individual to realize the greatest success which his capabilities will permit, with a maximum of satisfaction to himself and the social order with a minimum friction and tension. This implies a stage of such well being that the individual is not conscious of unsatisfactory or objectionable behaviour and maintains himself intellectually and emotionally in any environment and under any circumstances"

Mental health is not a separate entity but rather a latent hypothetical construct manifested in behaviour of an individual under various circumstances. By virtue of

complexity of behaviour which is an indicator of mental health, it can be inferred that mental health is a conglomeration of a number of variables. They have given a list of twenty one such variables which can be classified into two broad categories, *viz.*, those dealing with the adjustment towards various facets of life; adjustment being determined by the desirability of behaviour shown by the individual and those go a step further and make the individual active or creative interacting with the environment.

A group of social scientists have regarded mental health as a social phenomenon. Unlike medical and psychological emphasis on intrapsychic functioning, the social approach focuses primarily on overt behaviour. The placing of an individual on health-ill health continuum of psychiatrists and the medical classification of patients to a typology of disease are bases primarily on the interpretation of symptoms and interference about day-to-day interpersonal functioning. The psychologist likewise relies on the interpretation of behaviour as indicating the relative strength of various personality dimensions and their organizations. But one order of assessment of mental health according to social criteria is provided by measures of performance in social roles. These consist of estimate of the extent to which individual follows and responds to the community's normative prescriptions and expectations of appropriate behaviour in roles related to occupation and work, social participation and family relations. Since social prescriptions and expectations most directly enter into definition of the abnormal and deviant, (Carstairs and Kapur, 1976) and "In larger context, mental health is thus viewed in its most relative terms and with the least concern for psychodynamic processes." The preamble of the World Health Organization's chapter defines health as "a state of complete physical; mental, and social well-being, not merely the absence of disease or infirmity" (Monopolis *et al.*, 1977). The dictionary of "Behavioural Sciences" also defined mental health as a state of reality, good adjustment, feeling of well being and actualization of one's potentialities and capacities.

Evaluating the major models of the healthy personality, Schultz (1977) has drawn the following conclusions: There is no single prescription for or description of psychological health on which all psychologists or personality theorists would agree. Perhaps the only point on which most of the theorists agree fully is that psychologically healthy persons are in conscious control of their lives. In one form or another theorists also seem to agree that psychologically healthy persons know who and what they are. Another generally agreed upon characteristic of psychological health is a firm

anchoring in the present. These similarities are not unanimous, some theorists have not made themselves clear on all these points.

Scant Indian literature on the definition and criteria of mental health has been published. Even the epidemiological studies concerning psychiatric morbidity provide only operational definitions for identifying index cases but no efforts to define what mental health is. These studies have reported the prevalent rate of mental illness in their subject but have not mentioned the mental health status of the remaining subjects. Thus, in India also no concrete efforts have been made to define mental health a part from a few passing references like: "The concept of ideal social functioning is equivalent of 'positive mental health' mental health is the other name of quality of life" (Wing, 1979). Mental health professionals however agree that positive mental health is not merely absence of mental illness but something different (Nagraja, 1983).

The present study is undertaken on the basis of above mentioned studies. This study intends to assess the intensity of mental health among male and female sport players.

## METHODOLOGY

### Sample:

A sample of from 110 Public school's sport players (45 males and 65 females) belonging to various schools located at district Haridwar (Uttarakhand). This sample was selected with the help of incidental sampling techniques.

### Test material used:

Langner's mental health questionnaire: This scale was constructed and standardized by Langner (1962). This questionnaire was used to measure the psychophysiological strain of the subjects.

### Collection of data:

These tests were administered individually or in group depending on the convenience of the subjects. The subjects were assured that their answers will be kept confidential and will be used for research work only.

### Analysis of data:

The data were analyzed by applying t-test on mental health questionnaire.

### Hypothesis:

Male and female sport players differed from each other on mental health questionnaire.

## OBSERVATIONS AND DISCUSSION

Table 1 gives the picture of male and female sport players. Mean, Standard deviation, and t-value were calculated on mental health questionnaire. Mean (male=3.30, female=3.13), Standard Deviation (male=1.04, female=1.41) and t-value (0.77) was not significant.

**Table 1: Comparison between male and female sport players in public school on mental health**

Sport players	Mental health			t-value	P
	N	Mean	S.D.		
Male	45	3.30	1.04	0.77	NS
Female	65	3.13	1.41		

To analyze the data regarding male and female sport players, no significant difference was found between was found male and female players on mental health at 0.01 level.

The results may be explained by the fact that there was no significant difference between male and female sport players on mental health. Mukhopadhyay (1996) results revealed that the two groups of subjects (male and female players) did not differ with respect to their physical health and mental health status.

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