

# A comparative study of neurotic problems among sports and non-sports students

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## ABSTRACT

The present investigation was undertaken to study the neuroticism problem of sports and non-sports students. For this research work, a sample of 115 sports (55 males and 60 females) and 94 non-sports students (45 males and 49 females) belonging to various schools located at district Haridwar (Uttarakhand) were selected with the help of incidental sampling techniques. Neuroticism scale Questionnaire developed by Scheier and Cattell (1961) has been used to make this study. S.D. Kapoor's Socio-economic status scale questionnaire (SESSQ-Urban) was used to determine the socio-economic status of the respondents. Finding indicated that sports and non-sports students did not differ significantly in terms of neuroticism.

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**Key words :** Neuroticism problems, Socio-economic status

Individuals who "go to pieces" easily when confronted with a difficult or trying situation and exhibit a variety of mental and physical symptoms that persist for several weeks or months are known as "psychoneurotic." Typical mental symptoms are anxiety, feelings of inner tension, restlessness, ideas of inadequacy, inability to concentrate, loss of memory, absurd fears, and obsessions. Physical symptoms, which are essentially repercussions of internal emotional disturbances, include headaches, upset stomach, excessive fatigue, and loss of sensory and motor functions. Psychoneuroses are relatively mild personality disorders that distress and inconvenience the patient but do not disrupt his social adjustments or interfere with his everyday activities to the point of necessitating supervision or compulsory commitment to a mental hospital. His personality remains intact and his grasp of reality is not distorted. Psychoneurotics know what they are doing, have a fair understanding of their difficulties, can distinguish right from wrong, and are legally responsible for their actions. Their behaviour, though frequently annoying, is rarely offensive or a source of danger to others. Their work output may or may not be impaired.

When under great emotional stress, normal individuals frequently exhibit typical psychoneurotic symptoms but with two important modifications, namely, their reactions are appropriate to the stimulating situation and are of short duration. On the other hand, the reactions of the

psychoneurotic are out of all proportion to the actual situation and may persist for months. A normal person who experiences a severe emotional shock may be speechless or paralyzed for a few minutes. He may faint, feel weak, or complain of irregular heart action or nausea. Soon, however, he regains control of himself and his symptoms disappear. Following similar or milder emotional shock, a psychoneurotic may suffer for months from loss of voice, paralysis, general exhaustion, cardiac instability, or gastric upset. Faced with failure, a normal individual may be beset with temporary anxiety and feelings of inferiority, but a psychoneurotic may retain this attitude in exaggerated form all his life. Many normal individuals have a fear of germs and take reasonable precaution to avoid infection, but, unlike certain psychoneurotics, they do not wash their hands a hundred times a day, wear gloves when handling money, or sterilize their cooking utensils before each meal.

Also known as "neuroses," the *psychoneuroses* are minor mental disorders characterized by inner struggles and discordant social relationships. Two essential features of psychoneuroses are that they are precipitated by emotional stresses, conflicts, and frustrations and that they are most effectively treated by psychological techniques. They are not produced by physical disorders and do not respond to routine medical attention. Although often incapacitating and disturbing to the person and his associates, the symptoms of the psychoneurotic are such

that compulsory hospitalization or segregation is unnecessary. A few patients voluntarily seek hospital treatment, but the majority lives at home and usually continue with their customary business and social activities.

Psychoneurotic symptoms are extremely varied. Some of the more frequent psychological complaints are anxiety, depressed spirits, inability to concentrate or make decisions, memory disturbances, heightened irritability, morbid doubts, obsessions, irrational fears, insomnia, compulsions and inability to enjoy social relations. Physical symptoms, which are essentially bodily concomitants of strong emotions and conflicts, include loss of voluntary control over certain motor or sensory functions, shortness of breath, persistent tension, fatigue, headaches, gastrointestinal disturbances, palpitation, cardiac irregularities, temperature imbalances, and multiple aches and pains.

The varieties of personality types found among the psychoneurotic are probably as numerous as those present in the general population. As a group, however, psychoneurotic individuals exhibit several characteristic traits. They are generally dissatisfied, unhappy individuals who are lacking in self-confidence. Because of their feelings of inadequacy, they hesitate to take chances, recoil from competition, and find it difficult to make decisions and execute plans effectively. For the same reason, they are sensitive to criticism, shun responsibilities, and are inclined to blame others for their mistakes. They are emotionally immature, dependent, and selfish. Although uninterested in the welfare and feeling of others, they want to be well thought of by everybody and expect special considerations. They crave affection, but there is a marked contradiction between their wish for affection and their capacity for feeling or giving it. This discrepancy often results in sexual maladjustment. They are prone to guilt feelings and mental conflicts and find less enjoyment in life than most persons.

The present study is undertaken on the basis of above mentioned studies. This study intends to assess the intensity of neurotic problems among sports and non-sports students.

## METHODOLOGY

### Sample:

A sample of 115 sports students (55 males and 60 females) and the 94 non-sports students (45 males and 49 females) were selected belonging to various schools located at district Haridwar (Uttarakhand). This sample was selected with the help of incidental sampling techniques.

### Test material used:

#### *Neuroticism scale questionnaire (NSQ):*

This scale was constructed and standardized by Scheier and Cattell (1961), which has been designed to measure the 4 dimensions (Tender Mindedness [I], Depression [F], Submissiveness [e] and Anxiety [An]) of neurotic patterns of individuals. The questionnaire consists of 40 items which are related to all the four dimensions, respectively. Each item has three response alternative scores, 0, 1 and 2 from lower to higher level of neuroticism and any simple item contributes to only one of the four components. The reliability of this test is .60 and .70, which is suitable for work involving discrimination between groups and is used consciously, for proving at least rough "leads" diagnosing the industrial case. Two types of validity *i.e.* concept and concrete were also reported.

#### *Socio-economic status scale questionnaire (SESSQ-Urban):*

The revised edition of Kapoor's (1979) socio-economic status was used to measure the socio-economic status of the subjects. The reliability and validity of this scale reported by the author 0.89 and 0.93, respectively.

### Collection of the 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 unhe pata nahi data were analyzed by applying Chi-square on socio-economic status scale Questionnaire (SESSQ-Urban) and t-test on Neuroticism Scale Questionnaire (NSQ) scale.

### Hypothesis:

Sport students and non-sport students differed from each other on neuroticism scale questionnaire.

## OBSERVATIONS AND DISCUSSION

After data collection, scoring tabulation and analysis work were done.

As shown in Table 1, sport students were compared with non-sport students on socio-economic scale.

Numbers between upper middle strata (upper strata) and lower middle strata (lower strata) produced a significant value of Chi-square at .01. Therefore, these two groups did not come from the same population. They differed in their socio-economic status.

**Table 1 : Comparison of socio-economic status of sport students and non-sport students**

Groups	Upper strata	Lower strata	Total
Sport students	35 (38.5)	80 (76.5)	115
Non-sport students	35 (31.5)	59 (62.5)	94
Total	70	139	209

$X^2=1.26$                        $f=1$                        $.01>NS$

**Table 2: Comparison between sport students and non-sport students on NSQ**

Components	Sports students			Non-sports students			t-value	P
	N	Mean	SD	N	Mean	SD		
Total scores	115	6.36	1.77	94	6.51	2.21	0.58	NS
Tender mindedness [I]	115	5.19	0.97	94	5.89	2.83	3.04	0.01
Depression [F]	115	6.23	2.48	94	5.61	2.83	1.72	NS
Submissiveness [E]	115	6.39	2.12	94	6.53	2.12	0.44	NS
Anxiety [An]	115	6.3	1.33	94	6.49	2.83	0.41	NS

Table 2 depicts the picture of sport students and non-sport students. Mean, Standard deviation, and t-value were calculated on neuroticism scale questionnaire and four factors of this scale, Factor I's Mean (sports students=5.19, non-sport students=5.89), Standard deviation (sports students = 0.97, non-sport students =2.83) and t-value (3.04) is significant difference at 0.01 level.

Factor F's Mean (sports students=6.23, non-sport students=5.61), Standard deviation (Sports students =2.48, Non-sport students=2.83) and t-value (1.72) is not significant. Factor E's Mean (sports students=6.39, non-sport students=6.53), Standard deviation (sports students =2.12, non-sport students =2.12) and t-value (0.44) is not significant. Factor An's Mean (sports students=6.3, Non-sport students=6.49), Standard deviation (Sports students =2.83, non-sport students= 1.33) and t-value (0.41) is not significant.

Total mean (sports students=6.36, non-sport students = 6.51), Standard deviation (sports students = 1.77, non-sport students = 2.21) and t-value (0.58) is not significant.

To analyze the data regarding sport students and non-sport students, it had not significant difference between sport students and non-sport students on neuroticism at 0.01 level.

Psychologists/psychiatrists have pointed out different views about the cause of anxiety. It will be appropriate to describe different views in short so that the results obtained may be explained in right perspectives.

According to Freud (1943), anxiety may arise when the individual loses customary reaction to external threats of pain and destruction with which it is not prepared to cope or when ego is overwhelmed by excessive stimulation that it is unable to bring under

control. According to Sullivan (1935), anxiety is a product of interpersonal relations, being transmitted originally from mother to the infant and later in life results from or imaginary threats to one's security. After reviewing different views about anxiety, a conclusion is drawn that anxiety shows persons inability to handle 'dangerous situation', real or imaginary that would devalue his self image or endanger his relationship with other people.

The results may be explained by the fact that there was no significant relationship between neuroticism and attitude toward socio-economic status. (Francis *et al.*, 1983). According to Lidhoo (1982) university teachers scored significantly higher on measures of extroversion and frustration than the students groups. There were no significant differences with regard to neuroticism. According to Bhattacharjee *et al.* (1983) no significant differences in neuroticism were found between the working and non-working women and nor work any differences found on the incomplete sentences measures of psychological conflicts. It was observed that males and females did not differ in their scores on neuroticism-stability or on job satisfaction. Subjects with high job satisfaction had exhibited less neuroticism than subjects low job satisfaction.

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