



STUDY OF MENTAL HEALTH AMONG URBAN AND RURAL SCHOOL GOING PLAYERS

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Abstract

The present study was design to study of mental health among urban and rural school going players. The study was carried out on a sample of 100 school going players. 50 urban school going players, 50 Rural school going players included 25 male and 25 female school going players respectively. The two way analysis of variance was used for compare the group of Inhabitation and gender. There is significant difference between urban and rural school going players with respect of mental health. There is no significant difference between male and female school going players with respect of mental health.

Key Word: *Mental Health and Players*

Introduction:

Mental health describes either a level of cognitive or emotional well-being or an absence of a mental disorder. From perspectives of the discipline of positive psychology or holism mental health may include an individual's ability to enjoy life and procure a balance between life activities and efforts to achieve psychological resilience. Mental health is an expression of emotions and signifies a successful adaptation to a range of demands.

The World Health Organization defines mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community". It was previously stated that there was no one "official" definition of mental health. Cultural differences, subjective assessments, and competing professional theories all affect how "mental health" is defined. There are different types of mental health problems, some of which are common, such as depression and anxiety disorders, and some not so common, such as schizophrenia and bipolar disorder. Most recently, the field of Global Mental Health has emerged, which has been defined as 'the area of study, research and practice that places a priority on improving mental health and achieving equity in mental health for all people worldwide'.



As children grow older, the school becomes the main setting for promoting mental health. The most successful school-based interventions target many risk factors and health outcomes and take a long-term, whole-school approach to mental health promotion, with benefits that last long into adulthood. By building coping and social skills, and by creating a positive, safe environment that fosters a sense of inclusion, identity and connectedness among students, interventions result in improved adjustment to school, enhanced competence, self-esteem, increased control and problem-solving skills, improved school achievement, and decreases in loneliness, learning problems, bullying and aggression, and depression and anxiety.

Engaging students, teachers, and parents through both curriculum and school policy is more effective at promoting mental health than short-term interventions that focus solely on specific topics related to self-esteem, self-concept and individual coping skills. For example, school-based interventions that prevent or reduce bullying behaviour at many levels while promoting mental health of all students are the most effective, with programmes that strive to modify bullying behaviour and address the needs of individual victims; involve parents and the community so that positive behaviour is reinforced outside the school environment; and develop school policies that foster safe, supportive environments within the school itself. However, implementing programmes to reduce bullying behaviour are more effective with younger children than with older children. Programmes that use age-appropriate curriculum to raise awareness of mental health issues engage children through group discussions, role playing skits, art activities, stories, and educational games in the classroom in order to teach children about how their behaviour can affect other people.

Objective of the study

1. To investigate the level of mental health among urban and rural school going players.
2. To investigate the level of mental health among male and female school going players.

Hypotheses

1. There will be significant difference between urban and rural school going players with respect of mental health.
2. There will be significant difference between male and female school going players with respect of mental health.

Sample

The random sampling method were adopting in selecting the sample of the study. The study was carried out on a sample of 100 school going players. 50 urban school going players, 50 Rural school going players included 25 male and 25 female school going players respectively.



The sample of the present study is shown as below. The subject selected in the sample wear in theage group of 10 to 15 who are living in urban and rural areas since minimum 5 years.

Design:

2x2x2 factorial design was used for research.

2 x 2 Factorial Design

Variables		Gender (B)	
		Male	Female
Inhabitation(A)	Urban	A1B1	A2B1
	Rural	A1B2	A2B2

Variable

A1= Urban school going players A2= Rural school going players B1= Male school going players B2= Female school going player

In the present study there were three variables included. Namely, mental health is the dependent variables. The independent variables are Inhabitation and gender these are independent variables have each two levels. First independent variable is Inhabitation have two levels i.e. Urban and rural. In the second independent variable gender has two level i.e. male and female school going players.

Tools use for data collections

Mental Health Inventory

This inventory developed by Dr. Jadish and Dr. A.K. Srivastava. The preliminary format of the MHI was tried out administered on a sample of 200 subjects belonging to various socio culture, age, and sex and education groups. On the basis of significance out of 72 items, 56 items including 32 ‘false-keyed and 24 ‘true keyed have been selected to constituted the final format ofthe inventory.

Mental health is defined as persons ability to make positive self-evaluation, to perceive the reality, to integrations the personality, autonomy, group oriented attitudes and environmental mastery.

Reliability:

The reliability of the inventory was determined by spilt half method using add even procedurethe reliability coefficients was .73 found.

Validity:

Construct validity of the inventory is determined by finding coefficients of correlation between scores on mental health inventory and general health questionnaire. It was fond to be .54. it is noteworthy here that high score on the general health questionnaire indicates poor mental health

besides the inventory was validated against 'personal adjustment scale. The two inventory scores yield positive correlation of .57 revealing moderate validity.

Scoring:

In the present scale four alternative responses have been given to each statements i.e. always, often, rarely and never. 4 score to always, 3 score to often, 2 score to rarely and 1 score to never mark responses as to be assigned for true keyed (positive) statements were as 1,2,3 and 4 scores for always, often, rarely and never respectively in case of false keyed (negative) statements.

Statistical analysis:

The total data sets obtained for Mental Health scale prepared scoring. For the each subjects initially data of age group were separately tabulated by employing frequency distribution and descriptive statistics. Find out the Inhabitation and gender wise differences using a 2x2 factorial analysis of variance technique and calculations were carried out with the help of calculated and SPSS software was used.

The statistical significance or non-significance will be decided on the basis of theoretical framework particularly with respect to Norms.

Table No. 4.1
Mean and SD for Mental Health on school going players.

Students	Mean	SD	N
Urban	106.74	17.03	50
Rural	119.98	22.13	50
Male	110.90	26.21	50
Female	113.36	23.84	50

Table indicated that the mean differences of school going players on mental health. The mean score for mental health obtained by urban school going players is (M = 106.74) and standard deviation is (SD = 17.03). The mean score for mental health obtained by rural school going players mean score is (M = 119.98) and standard deviation is (SD = 22.13).

The mean score for mental health obtained by male school going players is (M = 110.90) and standard deviation is (SD = 26.21). The mean score for mental health obtained by female school going players mean score is (M = 113.36) and standard deviation is (SD = 23.84).

Table No. 2 Summary of ANOVA

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Inhabitation	4382.44	1	4382.44	8.68	0.01
Gender	566.44	1	566.44	1.12	NS
Inhabitation * Gender	1239.04	1	1239.04	2.45	NS
Error	48429.12	96	504.47		
Corrected Total	54617.04	99			

Table No. 2 shows that the results of ANOVA for first independent variable Inhabitation on mental health. F ratio for independent variable Inhabitation on study habit is $F = 8.68$ ($df = 1$ and 96) which is significant at the 0.01 level of confidence. Hence there is significant difference between urban and rural school going players on mental health. The result revealed that there is significant difference between urban and rural school going players on mental health. F ratio and Mean are concluded the Hypothesis No. 1, "There will be significant difference between urban and rural school going players on mental health" is accepted.

Table shows that the second independent variable Gender on mental health. F ratio for independent variable Gender on study habit is $F = 1.12$ ($df = 1$ and 96) which is not significant at both the level of confidence. Hence there is no significant difference between male and female school going players on mental health. The result revealed that there is no significant difference between male and female school going players on mental health. F ratio and Mean are concluded the Hypothesis No. 2, "There will be significant difference between male and female school going players on mental health" is rejected.

Conclusion:

There is significant difference between urban and rural school going players with respect of mental health. There is no significant difference between male and female school going players with respect of mental health.

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