EVALUATION OF THE POSITIVE MENTAL HEALTH LEVELS OF THE STUDENTS OF THE FACULTY OF SPORTS SCIENCES

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Abstract

Objective. This research was carried out to determine the positive mental health levels of the students of the faculty of sports sciences.

Methods. This research is descriptive cross-sectional. The population of the study was composed of students of a faculty of sports sciences and 98 students who agreed to participate in the study without going through the sample selection method were included in the sample. Sociodemographic information form and Positive Mental Health Scale were used to collect the data. SPSS 21 package program was used to analyze the data. In evaluating the demographic data of the research, chi-square test was used to evaluate the number and percentage distributions, socio-demographic characteristics and positive mental health.

Results. When the socio-demographic characteristics of the participants were examined, the average age was 22.43 ± 1.41 and the majority were in the 22-24 age range (61%). 61.2% of the students are girls, 29.6% of them are high school graduates and 39.8% of them are university graduates. The longest period of 60.2% of the students lived in the metropolitan area. The proportion of those who perceive their health well, 49.9% and 54.1% perceives the income situation as sufficient. When the students' positive mental health scale sub-dimensions were evaluated as their mean scores; personal satisfaction 12.90 ± 1.46, prosocial attitude 8.76 ± 2.06, self-control 9.63 ± 2.86, 8.24 ± 2.21, problem solving 16.74 ± 3.41 and interpersonal relationship Skill subscale mean score was calculated as 15.36 ± 2.48. The positive mental health scale mean score is 73.36 ± 11.23. Men (p <0.05), mother high school (p <0.05), father university graduates (p <0.05), those who live in the metropolitan for a long time (p <0.05), those who perceive their health as good (p < 0.05) and those who perceive their income as sufficient (p> 0.05) were found to have good positive mental health scale scores.

Conclusion. In line with the results obtained from the study; in terms of positive mental health; girls, mother education level primary school / secondary school and father education level primary school / middle school and high school, those who live in rural areas for a long time, those who perceive their health in middle and bad are in the risk group.

Key words. Sports, Students, Positive Mental Health.

Introduction

World Health Organization defines mental well-being as a condition which does not only include the absence of a mental illness, but also the presence of the capability for one to realize his / her abilities, coping with stress, working productively and making a contribution to the society. On the other hand conservative psychiatric approach which consists of some disadvantages and deficiencies in terms of mental health promotion. is rather based on the absence of a mental illness. However for the presence of complete mental health, additional psychological characteristics strengthening mental health are also needed (Ulusoy 2018). The approach integrating these two components is defined as "the dual model of mental health". Positive mental health approach based on positive psychology, positive, social and psychological well-being concepts is a theoretical approach which became more significant in the last twenty years (Puhua et al. 2020). In this article the definition, historical development, related concepts, purposes and related studies are discussed. Different views in positive psychology, positive well-being, the definition of mental health and the evolution of these notions through time were discussed first, followed by the presentation of studies related to the subject and the evaluation of the importance of the approach (Lukat et al. 2016).

The purpose of positive psychology is to

recognize and develop people. It focuses not on weaknesses and pathology, but on the positive characteristics of man. Positive psychology is reassessment of what is right and what is to be improved in a person. At this point, Seligman pointed out in 2011 that "happiness cannot be reduced to smile and a concept for science must be measurable" (Brailovskaia et al. 2018). The basis of preventive mental health services is to identify risk factors related to diseases and to take initiatives for them. With an effective community mental health service in this direction, it can be said that risk factors that may affect individuals in terms of mental disorders can be identified, controlled and individuals can be protected from psychiatric disorders (Tamminen et al. 2019).

Methods

This research is descriptive cross-sectional. The population of the study was composed of students of a faculty of sports sciences and 98 students who agreed to participate in the study without going through the sample selection method were included in the sample.

Data Collection Techniques and Tools

Sociodemographic information form and Positive Mental Health Scale were used to collect the data. The data were collected by the researchers by face-to-face interview method in the classroom.

Personal Information Form

Personal Information Form consists of age, gender, education level of mother and father, place of residence, perception of health, perceived income level.

Positive Mental Health Scale

It was developed by Lluch to describe the conceptual model of positive mental health and to evaluate positive mental health. The four-point Likert scale consists of thirty-nine items and six sub-dimensions. The range of points to be taken from the scale is 39-156. The scale does not have a cut-off score, but a low score indicates a positive mood. The internal consistency coefficient of the original scale was 0.89 and the test-retest reliability coefficient was 0.92. In the first validity study of the PRSS, the internal discrimination index of all items in the scale was found to be greater than 0.25 and the six-factor structure defined by explanatory factor analysis explained 46.8% of the variance in the scale. The factor load of each item was greater than 0.40 and all factors were found to have a significant correlation with the whole scale. In the Turkish version of the scale, the validity and reliability studies of the scale included the validity and reliability of 79.5% of the scale items. The validity and reliability of the scale were 0.80 and above. It was found to be acceptable. The test-retest reliability coefficient and the Cronbach alpha reliability coefficient values of the scale total and sub-dimensions were over 0.70. In addition, PRSÖ was found to be a good fit (internal construct validity) and reliable (PSI = 0.94) scale according to the goodness of fit statistics and reliability values of Rasch model (Teke and Arabacı 2018).

Collecting data

The data of this study were collected from students by face-to-face interview technique in the classroom.

Ethical and Legal Aspects of the Research

The research started after obtaining ethical approval and institutional permission. Verbal permissions of individuals were obtained before starting the research. The purpose of the research, the duration and duration of the research will be briefly explained in a language they will understand, and the principle of "Informed Consent", the principle of "Autonomy", stating that the students can withdraw from the research whenever they want, the principle of "Protection of Confidentiality and Privacy" has been fulfilled by saying that the individual information will be protected after being shared with the researcher. Before the forms to be used in the research were given, necessary explanations were made orally, and care was taken to create a quiet environment with little stimulus during application.

Evaluation of the Data

The data of the study were evaluated by using SPSS for Windows 15.0 (Statistical Package for Social Science) statistical package program. After collecting the data, the option researchers selected by each individual for each item included in the scales were entered into the SPSS program and the total scores of the individuals were calculated. SPSS 21 package program was used to analyze the data. In evaluating the demographic data of the research, chi-square test was used to evaluate the number and percentage distributions, socio-demographic characteristics and positive mental health. Results were evaluated at 95% confidence interval and p <0.05 significance level.

Results

When the sociodemographic characteristics of the participants are examined, the average age is 22.43 ± 1.41 and the majority is in the range of 22-24 years (61%). 61.2% of the students are girls, 29.6% of them are high school graduates and 39.8% of them are university graduates. The longest period of 60.2% of the students lived in the metropolitan area. The percentage of those who perceive their health well, 49.9% and 54.1% perceive the income situation as sufficient.

When the students' positive mental health scale sub-dimensions score averages are evaluated; personal satisfaction 12.90 ± 1.46, prosocial attitude 8.76 ± 2.06, self-control 9.63 ± 2.86, 8.24 ± 2.21, problem solving 16.74 ± 3.41 and interpersonal relationship Skill subscale mean score was calculated as 15.36 ± 2.48. The positive mental health scale mean score is 73.36 ± 11.23 (Table 1).

Table 1. Distribution of Students' Positive Mental Health Scale Sub-dimensions and Total Score Averages

Positive Mental Health Scale Sub-dimensions	Mean±SD
Personal satisfaction	12,90±1,46
Prosocial attitude	8,76±2,06
Self-control	9,63±2,86
Problem solving	8,24±2,21
Interpersonal Relationship Skill	16,74±3,41
Scale Total Score	73,36±11,23

When the socio-demographic characteristics of the students and their positive mental health scale mean scores were compared, the boys were girls (p <0.05), those whose mothers were high school graduates (p <0.05), those whose fathers were university graduates (p <0) , 05), positive mental health of those who live in the metropolitan for a long time, those who live in the city (p <0.05), those who perceive their health as good, those who perceive their health as bad (p <0.05) and those who perceive their income status as sufficient (p> 0.05) are inadequate. mean scores were higher (Table 2).

Table 1. Socio-demographic characteristics of individuals and Positive Mental Health Scale Score Means Distribution

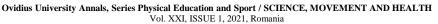| Variables	Positive Mental Health Scale	Test value P value
Gender		
Female	87,34±5,39	X^2:3,046
Male	59,38±6,73	P:0,02*
Anne Eğitim Durumu		
İlköğretim	79,16±3,27	X^2:1,098
Lise	67,56±5,82	P:0,02*
Baba Eğitim Durumu		
İlköğretim/Lise	83,56±4,78	X^2:0,456
Üniversite	63,16±6,45	P:0,04*
The longest-lived place		
City	91,34±56	X^2:7,078
Big city	55,38±4,67	P:0,03*
Perceived Health Status		
Good	57,05±7,49	X^2:1,923
Bad	89,67±3,25	P:0,02*
Perceived Income Status		
Good	68,66±4,66	X^2:2,804
Bad	78,06±3,04	P:0,04*

*p<0,05

Dıscussıon

The positive mental health scale score average of the students was found to be 73.36 ± 11.23. According to this result, it can be said that students have positive mental health. Studies evaluating positive mental health in young people have been reported to have good positive mental health, similar to our current study finding (Eriksson et al., 2019; Bojornsen et al., 2019).

A good state of mental health is a resource for everyday life and contributes to quality of life and well-being. In other words, functioning aspects

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of mental health is also about enhancing competencies of individuals and communities and enabling them to achieve self-determined goals. Moreover, positive mental health is related to resilience as well as empowerment. This wide WHO perspective is a fine vision, but it is far from an operationalised concept suitable for surveys among school-aged children. Therefore, we need to look into different conceptualisations of positive mental health (Boyce et al., 2009).

When the socio-demographic characteristics of the students and the positive mental health scale score averages are compared, the males of the girls, the primary school / high school graduates of those whose mothers are high school graduates, those who live in the metropolitan region for a long time, those who perceive their health as good, and those who perceive their health as bad, and income status are poor. It was observed that those who perceived as adequate were higher than the mean mental health score averages. In the study of Phua et al., Similar to our study finding, it was found that boys had better positive mental health than girls (Phua et al., 2020). In their study, Suominen and Due (2019) concluded that those who perceive their health well are positive mental health better than other individuals. This study finding was similar to our current study finding in this aspect.

References

Ulusoy DK, Pozitif Ruh Sağlığı ve Ruhsal İyilik Hali. *Turkiye Klinikleri Psychiatry-Special Topics*, 2018, *11*(4), 1-10.

Phua DY, Kee MZ & Meaney M J, Positive maternal mental health, parenting, and child development. *Biological Psychiatry*, 2020, *87*(4), 328-337.

Lukat J, Margraf J, Lutz R, van der Veld W M & Becker E S Psychometric properties of the positive mental health scale (PMH-scale). *BMC psychology*, 2016, *4*(1), 8.

Brailovskaia J, Teismann T & Margraf J, Cyberbullying, positive mental health and suicide ideation/behavior. *Psychiatry research*, 2018, *267*, 240-242.

Boyce WF, Davies D, Raman SR, Tynjälä J, Välimaa R, King M, Gallupe O & Kannas, L, Emotional health of Canadian and Finnish students with disabilities or chronic conditions. *International Journal of Rehabilitation Research,* 2009, *32,* 154–161.
DOI: https://doi.org/10.1097/MRR.0b013e32831e452e

Tamminen N, Kettunen T, Martelin T, Reinikainen, J & Solin P, Living alone and positive mental health: a systematic review. *Systematic reviews*, 2019, *8*(1), 134.

Teke C ve Arabaci LB, Pozitif Ruh Sağlığı Ölçeğinin Türkçe geçerlilik ve güvenilirliği. Anadolu Psikiyatri Dergisi, 2018, 19, 21-28. doi: 10.5455/apd.284116.

Eriksson C, Arnarsson Á M, Damsgaard M T, Löfstedt P, Potrebny T, Suominen S, Due, P. Towards enhancing research on adolescent positive mental health. *Nordisk välfärdsforskning/ Nordic Welfare Research*, 2019, *4*(02), 113-128.

Bjørnsen HN, Espnes GA, Eilertsen MEB, Ringdal, R & Moksne UK, The relationship between positive mental health literacy and mental well-being among adolescents: implications for school health services. *The Journal of School Nursing*, 2019, *35*(2), 107-116.