



A STUDY OF POSITIVE MENTAL HEALTH: DIFFERENCES BETWEEN CHESS PLAYERS AND NON CHESS PLAYERS

Nilkanth Ashokrao Shravan¹, Dr. Dinkar Uttamrao Hambarde²

Research Scholar , Swami Ramanand Teerth Marathwada University, Nanded¹

DPE, Lt. Baburao Patil, Mahavidyalya Hingoli²

Abstract: The present study determines the mental health of Chess Players and Non Chess Players. The, Mental health was measured by the using General Health Questionnaire (GHQ -12) . The General Health Questionnaire (GHQ) is a measure of current mental health and since its development by Goldberg in the 1970s it has been extensively used in different settings and different cultures. The 12-item GHQ-12 comprises six 'positive' and six 'negative' items . The sample consisted of 50 Chess Players and 50 non Chess Players from Nanded at the end of 2015-2016 academic year in their study. The findings of the study revealed that Chess Players was found to have got more Capable of making Decision , Been able to enjoy and Been feeling reasonably happy as compare to Non- Chess Players . The findings of the study revealed that Chess Players was found to have got more Capable of making Decision as compare to Non- Chess Players and The findings of the study revealed that Chess Players was found to have got more Been feeling reasonably happy as compare to Non- Chess Players

INTRODUCTION

Chess is a board game played between two players and good mental health affect the performance of the Players . Positive mental health refers to the presence of positive emotions and good functioning (in both individual and social environments). Work being done by Corey Keyes at Emory has shown that individuals with high positive mental health are less likely to develop depression and chronic disease (<https://ipmh.duke.edu/news/importance-positive-mental-health>). practice positive self-talk to think through situations before acting and to prevent negative thoughts. avoid stressful social relationships, such as interacting with people who make you feel bad about yourself or uncomfortable. plan pleasant events for yourself and keeping those plans (<https://www.canada.ca/en/public-health/services/promoting-positive-mental-health.html>). Good mental health contributes to strong relationships and better health at home and school. It can also help to prevent the onset of other mental health issues like anxiety and depression (<https://www.fraserhealth.ca/health-topics-a-to-z/school-health/mental-wellness-for-children/positive-mental-health-for-children#.YcQUDzNBzIU>).

Wikipedia Dictionary (2010) explains mental health as 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 demands of everyday life. Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity defines the Constitution of the World Health Organization. The continuous thinking process, exhausting work hours, striving for earning high goals etc are contribute to the poor mental health of the Chess players .Other potential sources of poor mental health for sports person may include sudden change in their style of living , lack of proper guidance , thought of success /failure in sports

Methods

The sample consisted of 50 Chess Players and 50 non-Chess Players from different colleges of Nanded at the end of 2015-2016 academic year in their study. Those The, Mental health was measured by the using General Health Questionnaire (GHQ -12) . The General Health Questionnaire (GHQ) is a measure of current mental health and since its development by Goldberg in the 1970s it has been extensively used in different settings and different cultures. The 12-item GHQ-12 comprises six ' positive ' and six 'negative' items . only positive items considered for this present study. T-test was used to compare the positive mental health between these two groups.

Results and discussion

The results and discussion have been presented in concise and comprehensive manner that is easy to comprehend starting with personal characteristics of Players.



TABLE – 1
MEAN SCORES, STANDARD DEVIATION AND T-RATIO OF BEEN ABLE TO CONCENTRATE POSITIVE MENTAL HEALTH IN CHESS PLAYERS AND NON CHESS PLAYERS.

Demission	Players	Number	Mean	S.Ds.	T-ratio
Been able to concentrate	Chess Players	50	3.60	0.62	1.56NS
	Non- Chess Players	50	4.19	0.77	

Table 1 illustrate the Mean scores, standard deviation and t-ratio of six dimension of positive mental health in Chess Players and Non Chess Players. With regards to Been able to concentrate in Chess Players and Non Chess Players they have obtained mean values were 3.60 and 4.19 respectively, whereas they obtained standard deviation 0.62 and 0.77 respectively. The result reveals that no significant difference was found on been able to concentrate between Chess Players and Non Chess Players.

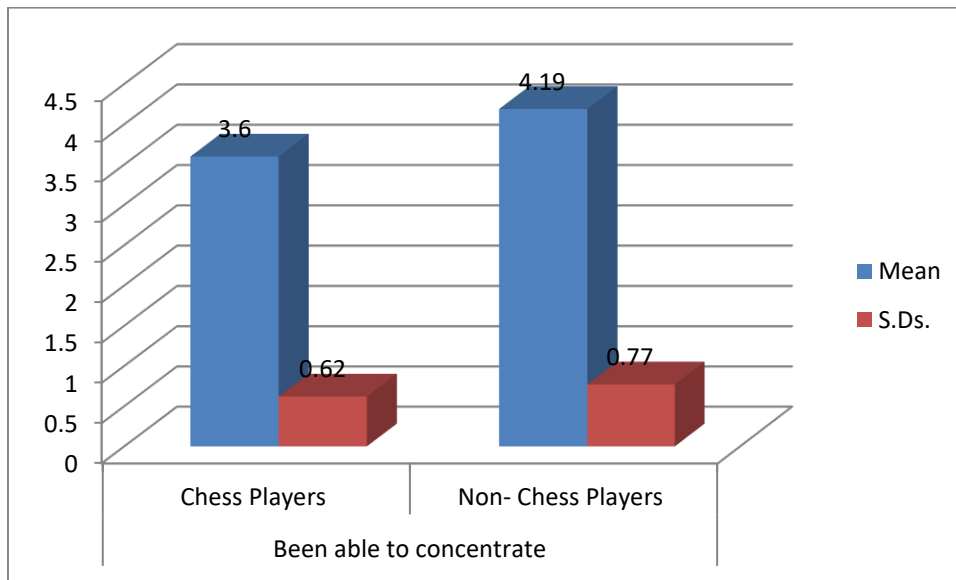


TABLE – 2
MEAN SCORES, STANDARD DEVIATION AND T-RATIO OF PLYING A USEFUL PART POSITIVE MENTAL HEALTH IN CHESS PLAYERS AND NON CHESS PLAYERS.

Demission	Players	Number	Mean	S.Ds.	T-ratio
Plying A Useful Part	Chess Players	50	3.80	0.68	1.32 NS
	Non- Chess Players	50	3.58	0.50	

In addition , while comparing , Plying A Useful Part in Chess Players and Non Chess Players they have obtained mean values were 3.80 and 3.58 respectively, whereas they obtained standard deviation 0.68 and 0.50 respectively. The result reveals that no significant difference was found on Plying A Useful Part between Chess Players and Non Chess Players.

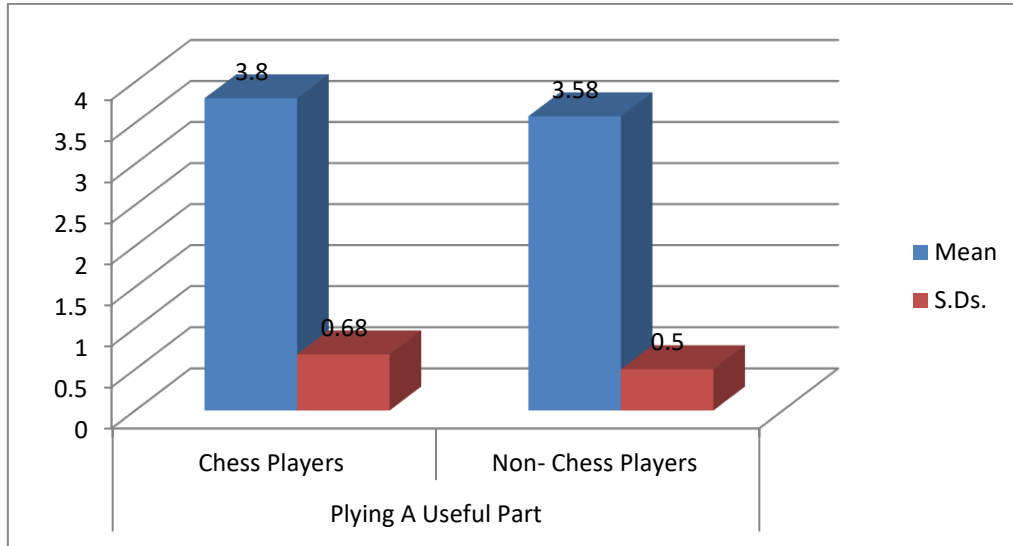


TABLE – 3

MEAN SCORES, STANDARD DEVIATION AND T-RATIO OF CAPABLE OF MAKING DECISION POSITIVE MENTAL HEALTH IN CHESS PLAYERS AND NON CHESS PLAYERS.

Demission	Players	Number	Mean	S.Ds.	T-ratio
Capable of making Decision	Chess Players	50	3.83	0.84	3.23 *
	Non-Chess Players	50	2.90	0.62	

Furthmore , the Capable of making Decision in Chess Players and Non Chess Players they have obtained mean values were 3.83 and 2.90 respectively, whereas they obtained standard deviation 0.84 and 0.62 respectively. The result reveals that significant difference was found on Capable of making Decision between Chess Players and Non Chess Players. The findings of the study revealed that Chess Players was found to have got more Capable of making Decision as compare to Non- Chess Players .

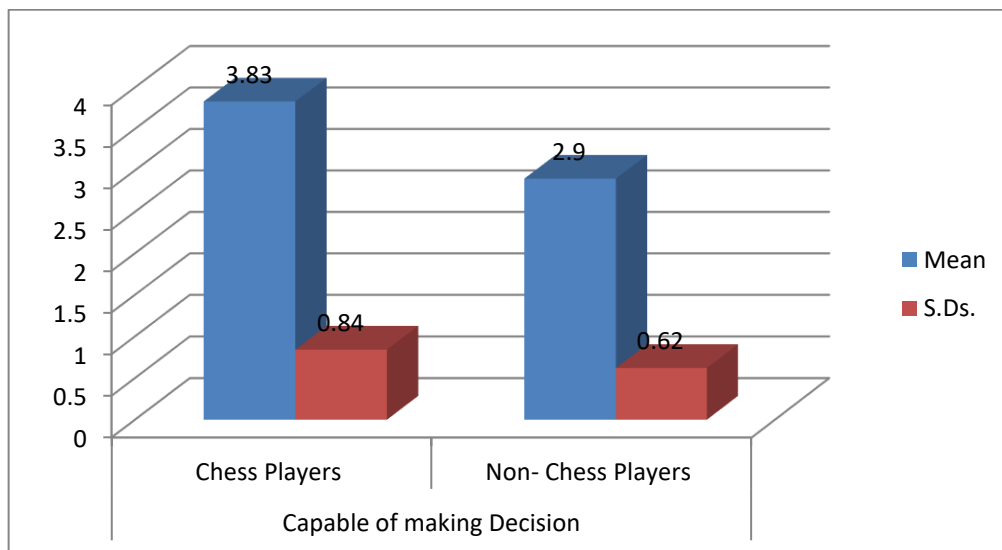




TABLE – 4

MEAN SCORES, STANDARD DEVIATION AND T-RATIO OF BEEN ABLE TO ENJOY POSITIVE MENTAL HEALTH IN CHESS PLAYERS AND NON CHESS PLAYERS.

Demission	Players	Number	Mean	S.Ds.	T-ratio
Been able to enjoy	Chess Players	50	4.50	0.76	2.87*
	Non- Chess Players	50	3.40	0.50	

With regards to Been able to enjoy in Chess Players and Non Chess Players they have obtained mean values were 4.50 and 3.40 respectively, whereas they obtained standard deviation 0.76 and 0.50 respectively. The result reveals that no significant difference was found on positive mental health with respect to Been able to enjoy between Chess Players and Non Chess Players. The findings of the study revealed that Chess Players was found to have got more Been able to enjoy as compare to Non- Chess Players

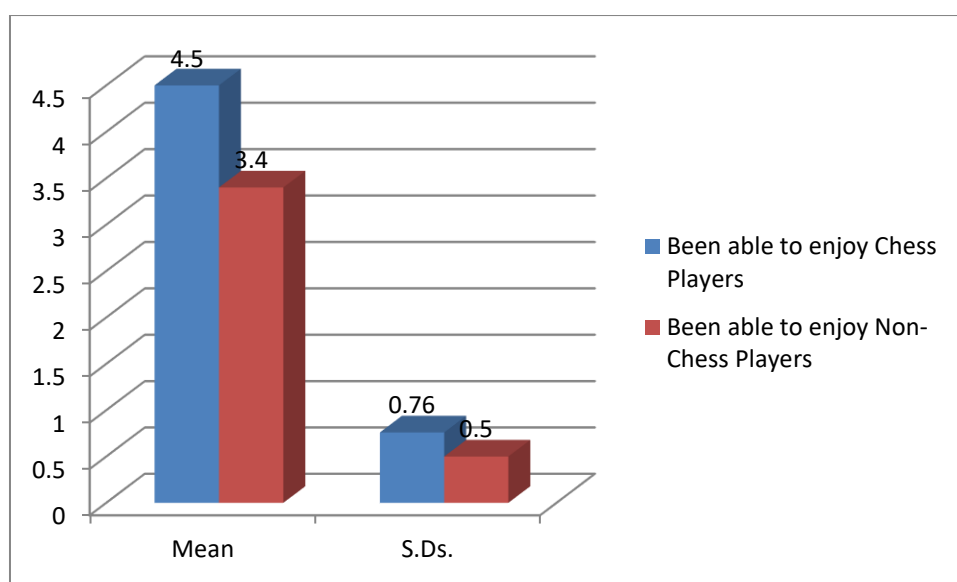


TABLE – 5

MEAN SCORES, STANDARD DEVIATION AND T-RATIO OF Been able to face up POSITIVE MENTAL HEALTH IN CHESS PLAYERS AND NON CHESS PLAYERS.

Demission	Players	Number	Mean	S.Ds.	T-ratio
Been able to face up	Chess Players	50	3.78	0.80	1.81NS
	Non- Chess Players	50	3.12	0.64	

With regards to Been able to face up in Chess Players and Non Chess Players they have obtained mean values were 3.78 and 3.12 respectively, whereas they obtained standard deviation 0.80 and 0.64 respectively. The result reveals that no significant difference was found on Been able to face up between Chess Players and Non Chess Players

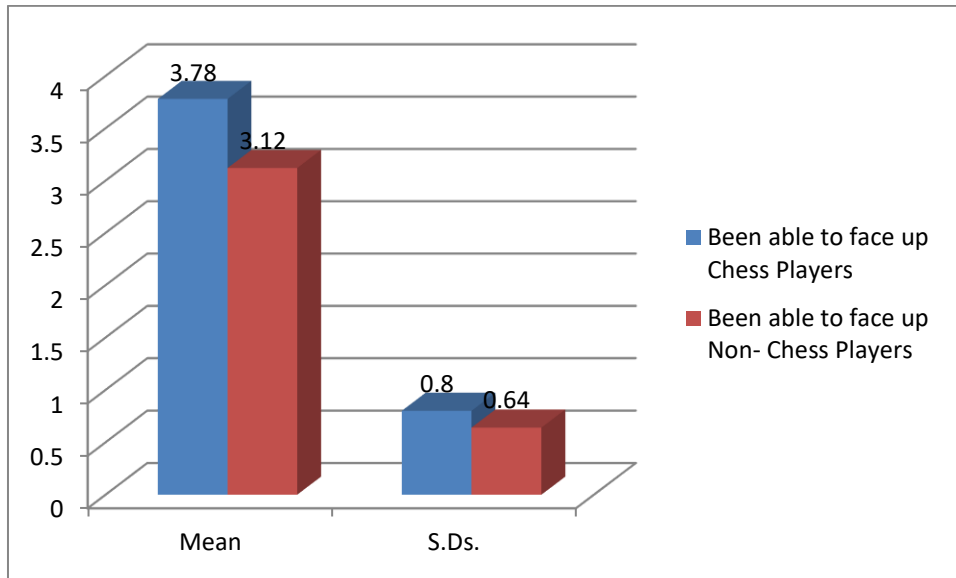
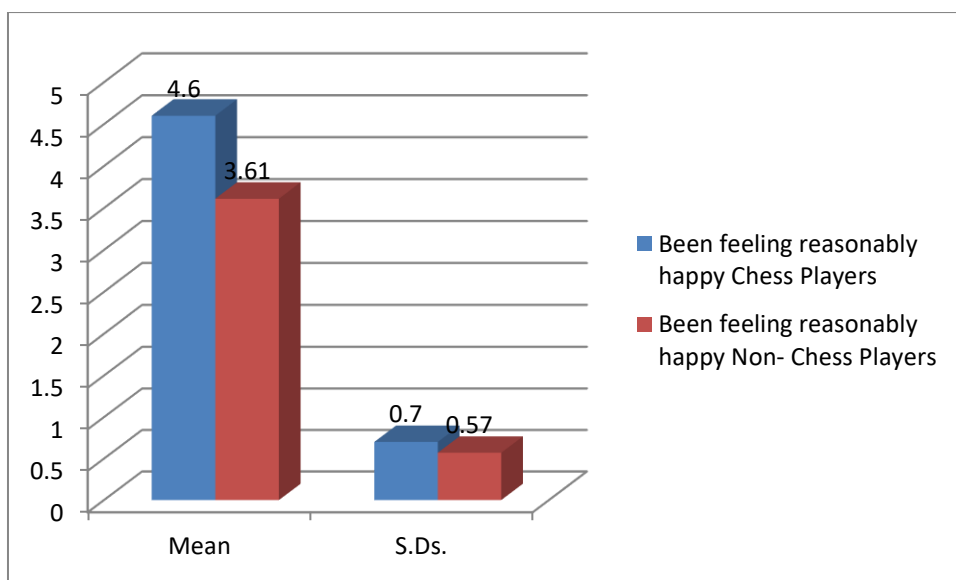


TABLE – 6
MEAN SCORES, STANDARD DEVIATION AND T-RATIO OF BEEN FEELING REASONABLY HAPPY POSITIVE MENTAL HEALTH IN CHESS PLAYERS AND NON CHESS PLAYERS.

Demission	Players	Number	Mean	S.Ds.	T-ratio
Been feeling reasonably happy	Chess Players	50	4.60	0.70	3.67*
	Non- Chess Players	50	3.61	0.57	

Finally, With regards to Been feeling reasonably happy in Chess Players and Non Chess Players they have obtained mean values were 4.60 and 3.61 respectively, whereas they obtained standard deviation 0.70 and 0.57 respectively. The result reveals that no significant difference was found on Been feeling reasonably happy between Chess Players and Non Chess Players. The findings of the study revealed that Chess Players was found to have got more Been feeling reasonably happy as compare to Non- Chess Players





LIMITATIONS

Results of this study are limited by a relatively small preliminary survey of self-reported mental health rather than a study of actual behavior, which would be very difficult to achieve. A limitation of this study is that it reflects the findings of some Players; the data was collected in one places hence, the results may not be generalized to other Players . To keep the student data-collection time within reasonable limits, information on mental health self-reported and no special psychometric instruments were used to measure it. Future research is warranted on estimating the level of mental health by psychometric instruments.

REFERENCES

- Bhui, K. (2002). Physical activity and stress. In S.A. Stansfeld,& M.G. Marmot (Eds), *Stress and the heart: Psychosocial pathways to coronary heart disease* (pp. 158–167).Williston, VT: BMJ Books.
- Chung, S.-C., Brooks, M.M., Rai, M., Balk, J.L., & Rai, S. (2012). Effect of Sahaja Yoga Meditation on Quality of Life, Anxiety, and Blood Pressure Control. *Journal of Alternative and Complementary Medicine*, 18 (6), 589-596. doi:10.1089/acm.2011.0038.
- Dunn, A.L., Trivedi, M.H., & O'Neal, H.A. (2001). Physical activity dose-response effects on outcomes of depression and anxiety. *Medicine & Science in Sports & Exercise*, 33(6 Suppl.), S587–S597; discussion 609–510.
- Economos, C., Hildebrandt, L., & Hyatt, R.(2008). College Freshman Stress and Weight Change: Differences by Gender. *American Journal of Health Behavior*,16-25.
- Goldberg, D., & Williams, P. (1988). *A user's guide to the General Health Questionnaire*. Windsor, UK: NFER-Nelson.
- Guthrie, E.A., Black, D., Shaw, C.M., Hamilton, J., Creed, F.H. &Tomenson, B. (1995). Embarking upon a medical career: psychological morbidity in first year medical Players. *Medical Education*, 29(5), 337-341.
- Nandi M, Hazra A, Sarkar S, Mondal R, Ghosal MK. (2012). Stress and its risk factors in medical Players: An observational study from a medical college in India. *Indian J Med Sci [serial online]* [cited 2015 Aug 30];66:1-12.
- Pilkington.K, Kirkwood.G, Rampes.H, and Richardson.J.(2004) "Yoga for depression: the research evidence," *Journal of Affective Disorders*, vol. 89, no. 1-3, pp. 13–24.
- Singh .V, Wisniewski.A, Britton.J, and Tattersfield.A.(1990)"Effect of yoga breathing exercises (pranayama) on airway reactivity in subjects with asthma," *Lancet*, vol. 335, no. 8702, pp. 1381– 1383.
- Sinku S.K, & Bachewar.D (2014) , Impact of stress on mental health among post graduate Players. *Entire research*Vol.6 issue 3.
- Sinku S.K, &Gill (2014) Mental health Status between Physical education and sedentary Players *Entire research* ,Vol.6 issue 3.
- Udupa K. N., Singh R. H., and Settiwar R. M.(1975) "A comparative study on the effect of some individual yogic practices in normal persons," *Indian Journal of Medical Research*, vol. 63, no. 8, pp. 1066–1071.
- Uebelacker.L.A, Epstein-Lubow.G, Gaudiano.B.A Tremont.G, Battle C. L., and Miller I. W.(2010) "Hatha yoga for depression: critical review of the evidence for efficacy, plausible mechanisms of action, and directions for future research," *Journal of Psychiatric Practice*, vol. 16, no. 1, pp. 22–33,.

E-sources

- http://amhocn.org/static/files/assets/8d6994c3/Mental_Health_Inventory.
- <http://www.apa.org/helpcenter/exercise-stress.aspx>
- <http://www.apa.org/news/press/releases/stress/2011/gender.pdf>