

# Importance of Sports in Mental Health

Rakesh Sangwan<sup>1\*</sup> Dr. Jaswant<sup>2</sup>

<sup>1</sup> Research Scholar

<sup>2</sup> Associate Professor, Physical Education, OPJS University, Churu, Rajasthan

**Abstract – The objective of this theory is to assess the mental side effects experienced among the understudies of the Faculty of Sports Sciences and to recognize the effect of actual exercise on the understudies' mental prosperity. The examination test comprises of 222 intentional understudies (n=75 female and n=147 male) who are selected the 2017-2018 scholastic year at the Faculty of Sports Sciences of Adnan Menderes University. To depict the actual movement pace of understudies, the International Physical Activity Questionnaire (IPAQ) was utilized, and the Condition Pain Check List (SCL-90-R) was utilized to portray the understudies' mental manifestations. For the measurable investigation of the information assembled for this report, the SPSS 22.0 bundle program was utilized. As per the measurable examination information, fanatical habitual inclinations (70.3 percent, n=156), dubious musings (63.1 percent, n=140), social affectability (51.8 percent, n=115) and hostility to dissatisfaction (51.4 percent, n=114) were the most well-known mental propensities found among understudies. There was additionally a solid negative relationship between the understudies' actual movement levels and general indication midpoints and mental side effects, for example, over the top urgent manifestations, stress, uneasiness, hostility and dissatisfaction at the degree of 0.01 ( $p>0.05$ ). Manifestations, for example, fanatical habitual indications, distrustful emotions, relational affectability and antagonism toward outrage was noticed, as per the discoveries of the current examination, and the normal general side effect was high among understudies of the Faculty of Sports Sciences and mental indications, for example, over the top enthusiastic manifestations, discouragement, tension, aggression toward outrage, phobic reaction diminished as the actual response diminished. Among female understudies, mental manifestations other than psychotics were regularly Participation in exercises for intervention, care, music treatment, wellness and actual action just as applied exercises in the study hall will prompt the decrease of mental problems with these indications among understudies.**

**Keywords: Physical Activity, Psychological Symptom, University Student**

-----X-----

## INTRODUCTION

Fundamentally by actual exercise, helpful results from sports are refined; however auxiliary impacts bring wellbeing points of interest, for example, psychosocial and self-awareness and less admission of liquor. Awful results are regularly clear, for example, the chance of disillusionment, mishaps, dietary problems, and burnout. The situation of game in culture has gotten progressively critical throughout the long term, for the competitor as well as for general wellbeing, in light of the fact that actual exercise is progressively completed in an organized manner. We plan to clarify the physiological and psychosocial wellbeing impacts of game in this article, which get from both actual exercise and sports inclusion as such. This story examination sums up contemplates and depicts proof from the Swedish specialists relating to wellbeing. It is tended to that, while organized wellness and arrangement improve, our regular day to day existences are getting less actually included. The general utilization

of calories is rising, causing an energy excess, thus we are seeing an expanding measure of individuals who are overweight, a huge supporter of medical problems. Actual action and wellness have basic helpful outcomes, including burdensome issues and dread or stress-related infections, in staying away from or mitigating mental confusion. All in all, as explicit abilities, social conditions, and natural and mental development are mulled over, sports will create. Information shows a portion reaction connection so that being included is equal to being latent or inactive, even to a moderate degree.

Game is a twofold edged weapon in regard to wellbeing outcomes. Great results are generally acquired by actual exercise, which is the essential segment of most exercises. Many side aftereffects of game can bring wellbeing points of interest, for example, youthful and older psychosocial improvement, individual advancement, later on beginning, and less liquor admission. In the end, individuals who play sports have a more significant

level of actual action sometime down the road and through game; it is conceivable to pick up information about eating regimen, wellness, and wellbeing. Shockingly, there are still records of physical and mental viciousness of game. In first class level games, where there is a sensitive line between ideal achievement and helpless prosperity, negative elements are more conspicuous. A somewhat unexpected outcome of game participation is that, in specific circumstances, people who submit to booked planning go through less actual movement comparative with other people who exercise under a fixed schedule. A decrease in unconstrained actual action in the above classification could be one reason. The situation of game in culture has gotten progressively critical throughout the long term, for the competitor as well as for general wellbeing, on the grounds that actual exercise is progressively completed in a planned manner.

In this article, from a physiological and mental perspective, we clarify the medical advantages of activity, connected both to actual action and to game's additional qualities as such. Brief portrayals of various terms applicable to actual action and wellbeing are at first given. This is then joined by: (1) a compact outline of how, from a clinical viewpoint, actual exercise and wellness sway our body; (2) an investigation on the wellbeing results of actual movement and wellness; and (3) the specific effects of game on the various parts of wellbeing. From an age-related perspective, we chose to address the issue, isolating kids/young people, youngsters, and the old, just as partitioning for sex in each age gathering.

### Actual Wellbeing Consequences

Both transient (during and soon after) and enduring are the results of actual action and exercise. The remaining outcomes after quite a while of day by day actual exercise have expansive wellbeing repercussions and are recorded beneath. For instance, actual exercise/preparing may quickly improve the movement of certain muscle compounds yet can be lost nearly as effectively when dormant. A few upgrades continue for quite a long time or years, even in the wake of preparing stops, for example, expanded number and size of muscle filaments and veins. Subsequently, appropriate wellbeing includes actual movement to be accomplished for both movement and life span. A combination of both vigorous and muscle building movement is the greater part of the actual exercise/preparing done, and it could be difficult to separate between their wellbeing results.

Markers of future, illness event (number), and predominance (how regularly) are utilized to characterize medical affliction. The portion reaction communication, the effect size (the danger decrease that is found in considers), and the endorsed structure and portion of actual exercise are respected while talking about the connection

between actual exercise and getting sick with such infections. The general advantages of day by day actual exercise raise the probability of numerous infections (US Public Resources Agency, 2009). For people progressing from completely stationary to sensibly dynamic carries on with, the greatest wellness benefits are with wellbeing results seen before recognizable actual execution changes. Many examination tests have truly accumulated information just on vigorous actual exercise. Opposition preparing, however, still shows positive outcomes on prosperity (mental and physical) and sickness anticipation.

Since past weight decrease, oxygen consuming actual exercise has been found to profit weight the board, decline the probability of metabolic condition, standardize blood lipids, and help with results connected to malignant growth/disease, in spite of the fact that impacts on ongoing torment are not as self-evident.

In contrast with vigorous exercise, muscle-reinforcing actual action has been found to lessen the frequency of muscle decay and osteoporosis in the old. The two people, among the matured, react well to quality exercise. Actual preparing additionally prevents heftiness from expanding intellectual capacity if the movement of neurodegenerative issues is balanced by energetic action and diminishes the probability of metabolic disorder that neutralizes malignancy/disease related results, improves uneasiness and shortcoming in joint sicknesses and raises bone thickness. The danger of falling ascents particularly with age which is somewhat credited to decreased muscle quality which weakened adaptability and equilibrium. Along these lines, not suddenly, an unmistakable relationship with actual proficiency, diminished danger of falling, and expanded personal satisfaction is seen in more established people. Crumbling of muscle power, yet not bulk, raises the likelihood of sudden passing yet can be balanced by practice since the force change in the old is described by a portion reaction relationship. Suggestions state focused energy quality exercise (6-8 reiterations at 80% of greatest 1-redundancy) as the best. As an enhancement to oxygen consuming actual exercise, muscle building actual practice for improved wellbeing is suggested. Vibration exercise might be an option in contrast to expanding quality preparing for more seasoned individuals.

### Impacts on Mental Health

Mental illness is a far reaching pandemic that impacts a huge number of individuals universally. All proportions of mental problem incorporate migraine, strain, weariness, shortcoming, and tension. A progression of numerous psychological well-being conditions and signs with differing levels of seriousness is "medical affliction". Studies additionally connected expected wellbeing impacts

from day by day actual exercise with certain treatments, for example, medication, to upgrade psychological well-being. Most recent discoveries demonstrate that actual action and exercise utilized as a fundamental or auxiliary methods for handling have significant helpful outcomes in forestalling or easing gloom manifestations and in individuals with neurological issues have an upper effect. Schooling and wellness increment the nature of living and adapt to misery and lift confidence and social abilities. Learning and exercise frequently diminishes distress in patients determined to have an uneasiness or stress-related turmoil, builds mindfulness in language learning, and inventive idea.

Higher perfusion and expanded cerebrum volume, expanded hippocampus volume, and the calming impacts of actual movement, diminishing mind aggravation in neurological issues are a portion of the conceivable physiological explanations behind upgraded mental prosperity with actual action and exercise. Actual exercise can likewise intervene protection from stress-instigated discouragement through skeletal m In examination, other exercise-initiated enhancers of mental prosperity are improved creation of development hormones, endorphins, and flagging particles.

#### **The effect of game on the government assistance of grown-ups and the older**

Grown-ups who try not to play in sports drop their actual wellness and have wellbeing outcomes similar to other people who have not played games or gotten genuinely included. Absence of promise to wellness exercises is a critical hindrance to meeting wellbeing targets and rules for general actual movement in grown-ups and older people. Albeit numerous financial factors are connected to promise to wellness, it is significant that coaches and medical care experts know about impacts that can be regulated, for example, level of intercession (not to high), length (n to high), period (n

Numerous variables depend on safe maturing, for example, the nonappearance of disease, great physical and mental prosperity, and social duty (particularly by group activities or network exercises). Expanded age dismalness can be somewhat identified with diminished actual action. Consequently, it is firmly connected with more advantageous maturing to remain or get included further down the road. There is less cooperation in preparing and rivalry with expanded age, and around 20% of grown-ups in Sweden are taking an interest in sports clubs, at any rate somewhat, and the dominant part extent of grown-ups who exercise do as such all alone. The accompanying parts clarify the effect on youngsters and youngsters past what is

1. Somatization: It is strain related with different functions of the body. Somatization requires a few substantial grumblings, which

persevere for a long time and repeat, not owing to any actual incapacity. This causes signs, for example, swooning, loss of focus, chest inconvenience, agoraphobia, loss of craving, stomach torment, exhaustion, windedness, hot and cold flushes, shivering and deadness (Alver et al., 2010).

2. Fanatical habitual problem: This involves monotonous considerations and activities that disturb the individual and are unplanned, dystonic to the inner self and may not be ousted through conscious mediation (Alver et al., 2010).
3. Relational affectability: Hypersensitivity includes signs, for example, accepting that others cause negative sentiments with respect to themselves, feeling mediocre compared to other people, and dread of frustration (Alver et al., 2010).
4. Despondency: This involves signs and perspectives, for example, misery, cynicism, inconvenience, sadness, forlornness, despondency, dread, hesitance, self-negative contemplations, self-destructive tendency, absence of certainty and hesitation (Alver et al., 2010).
5. Nervousness issue: A troubling feeling that tends to not accomplish its objective when it appears to be an incredible need or inclination (Alver et al., 2010).
6. Antagonism of ire: This involves signs, for example, peevisishness and quake, anger, instability, inclination to damage, beat and harm others (Alver et al., 2010).
7. Phobic nervousness: This involves signs and activities, for example, agoraphobia (dread of open spots), endeavoring to get away from things or functions that are dreaded, dread of groups, getting restless while alone (Alver et al., 2010).
8. The inclination to have exceptional contemplations, for example, not accepting, incredulity, envy, denouncing others (Alver et al., 2010). Dubious musings
9. Psychoticism: It involves irritating and recognizing schizophrenic fancies from the social gathering. This involves signs, for example, imagining that every other person ought to manage their own feelings, feeling alone in the group and expecting that their violations ought to be rebuffed (Alver et al., 2010).

Studies completed on college understudies recommend that downturn in college understudies is the most destructive mental condition. One of the most discussed issues in the field of emotional well-being lately is misery, which is portrayed as a condition including indications, for example, distress, despair, wavering, negativity, uselessness, insufficiency, weakness, decreased development, latency, hindering physiological capacities (Özdel et. al., 2002). The advantageous physical and psychological well-being aftereffects of actual exercise are perceived (Lin et. al., 2008). For this reason, actual exercise should be viewed as a strategy for college understudies to keep away from burdensome issues and to ensure their psychological prosperity. Actual action is portrayed as body developments that happen with skeletal muscle compression and increment the consumption of energy over the basal level (McArdle et. al., 2001). Actual exercise upgrades boundaries in digestion, metabolic and brain research, brings down certain persistent ailments and early demise, and helps safeguard the respectability in organs, muscles and joints (Heyward, 2006). Ordinary actual exercise, for example, diminishing pressure and uneasiness, controlling rest, conveying solace and developing confidence, is considered to have mental prosperity benefits (Adams et al., 2003). For this reason, the objective of the current examination is to characterize understudies with mental manifestations, for example, somatization, fanatical impulsive issue, relational weakness, gloom, nervousness, hostility to disappointment, phobic uneasiness, neurotic reasoning and psychoticism, and to consider the connection between understudies' actual action and mental side effects. In this way, the vital target of the current postulation is to uncover the estimation of actual exercise among understudies of the Faculty of Sport Sciences as far as psychological well-being security..

## METHOD

### Members

The examination test comprises of 222 intentional understudies (n=75 female and n=147 male) who are selected the 2017-2018 scholastic year at the Faculty of Sports Sciences of **Adnan Menderes University**.

### Programming to Gather Data

To depict the actual movement pace of understudies, the International Physical Activity Questionnaire (IPAQ) was utilized, and the Condition Pain Check List (SCL-90-R) was utilized to portray the understudies' mental manifestations.

### Worldwide Questionnaire on Physical Activity

The International Physical Activity Questionnaire (IPAQ) was set up in 1998 by the World Health

Organization's short-and long haul International Consensus Committee. IPAQ was created to distinguish principles of grown-up actual movement and conditions of idleness. Craig et. al. (2003), who did an audit to evaluate IPAQ's legitimacy and unwavering quality, expressed that the survey's legitimacy boundary was 0.33 for the long structure and 0.30 for the short structure. Öztürk (2005) completed legitimacy and dependability trial of the poll in Turkey, which expressed that the short and long sorts of the survey ought to give repeatable and identical outcomes ( $r=0.66$ ) and that the survey legitimacy measure was  $r=0.30$  for the short structure and  $r=0.29$  for the long structure. It is conceivable to gauge MET (metabolic same) estimations of people from information gathered from IPAQ. For estimating MET values, recurrence, length and power factors are utilized. Period alludes to the length of time (in hours or minutes) the movement is done per time and force alludes to the measure of MET consumed every hour during the action. Recurrence alludes to the quantity of days seven days the movement is led. The MET is a count of the ingestion pace of oxygen per unit kilogram. A MET alludes to the volume of oxygen assimilated (roughly 3.5 ml/kg/min) very still (Craig et al., 2003). To gauge the MET min/week esteems, the accompanying recipe is utilized: MET/week: Activity recurrence X Activity period X Activity quality (Karaca and Turnagöl 2007).

### Symptom SCL-90-R Anxiety Checklist

Leonard R. Derogatis et al. (1971, 1973, 1974, 1976, 1977), using the stock known as the Hopkins Symptom Check List (HSCL), made the Symptom Pain Checklist at the John Hopkins University Psychometrics Study Center. The SCL-90-R Symptom Pain Checklist is a guide that depicts the degrees of mental indications found by individuals and the spots in which they are conveyed. The five manifestation parts of HSCL were reached out to four extra perspectives: Anger-antagonism (HOS), Phobic reaction (PHOB), Suspicious reasoning (PAR), Psychotics (PSY). Somatization (SOM), Obsessive-enthusiastic (O-C), Emotional affectability (INT), Depression (DEP), Anxiety (ANX) and it turned into a stock of self-report set apart as 0-1-2-3-4 between 'Not under any condition' and 'Exceptionally' stages comprising of 9 sub-things in 10 classes of manifestations (9 sub and 1 extra scale) (Kılıç, 1987). The stock quality assurance examination was performed on a heterogeneous populace in the United States with 1,000 mental patients (Derogatis et al. , 1976). Somatization (SOM) 0.86, Obsessive-urgent (O-C) 0.86, Interpersonal mindfulness (INT) 0.86, Depression (DEP) 0.90, Fear (ANX) 0.85, Anger-aggression (HOS) 0.84, Phobic uneasiness (PHOB) 0.82, Suspicious reasoning (PAR) 0.80, Psychotics (PSY) 0.77 The inward structure dependability coefficients characterized by Derogatis et al. (1976) in the SCL-90-R unwavering quality examination are as per the following.

Gökler's (1978) Symptom Search List SCL-90-R was first found in Turkey. To evaluate if the instrument was intelligible enough, Birsöz (1980) applied it to inpatients and outpatients of Hacettepe University Hospitals Psychiatric Clinics with various conditions and expressed that the patients experienced little difficulty comprehension and alluding to the things and cooperated adequately with the device.

**Measurements and Interpretation of results**

The SPSS 22.0 unit programming dissected the information accumulated to survey the pace of actual movement and the mental impacts found in the understudies associated with the current examination. The Kolmogorov-Smirnov test assessed the ordinarieness of the dissemination of the outcomes. To liken two free factors, the Independent Sample T Test was utilized as the information showed typical conveyance. In the event that there was a direct relationship between the two factors and if the affiliation degree and way were checked with the connection coefficient ( r ) of Pearson.

**DISCOVERIES**

**Table 1. Spellbinding Statistics on Students**

Grade	Gender			
	Female		Male	
	N	%	N	%
1 <sup>st</sup> grade	22	29.3	50	34.0
2 <sup>nd</sup> grade	25	33.3	35	23.8
3 <sup>rd</sup> grade	13	17.3	26	17.7
4 <sup>th</sup> grade	15	20.0	36	24.5
Total	75	100	147	100

Table 1. shows expressive measurements on the sexual orientation and class levels of the understudies partaking in the exploration.

**Table 2. Mental Symptoms Observed Among Students**

Psychological Symptoms	Mental Status					
	No Problems		Mild		Existing	
	N	%	N	%	N	%
Somatization	43	19.4	77	34.7	102	45.9
Obsessive compulsive symptoms	20	9	46	20.7	156	70.3
Interpersonal sensitivity	39	17.6	68	30.6	115	51.8
Depression	46	20.7	77	34.7	99	44.6
Anxiety	71	32	70	31.5	81	36.5
Anger - hostility	66	29.7	42	18.9	114	51.4
Phobic reaction	120	54.1	65	29.3	37	16.7
Paranoid thoughts	34	15.3	48	21.6	140	63.1
Psychoticism	96	43.2	67	30.2	59	26.6
General symptom average	34	15.3	74	33.3	114	51.4

The recurrence circulations of the mental assertions saw among the understudies taking an interest in the examination are introduced in Table 2.

**Table 3. The Relationship between Students' Level of Physical Activity and the Psychological Symptoms**

	MET	SOM	O-C	INT	DEP	ANX	HOS	PHOB	PAR	PSY	GSA
MET	1.000										
SOM	-0.121	1.000									
O-C	-0.213**	0.600**	1.000								
INT	-0.888	0.587**	0.668**	1.000							
DEP	-0.225**	0.620**	0.714**	0.722**	1.000						
ANX	-0.245**	0.700**	0.687**	0.630**	0.738**	1.000					
HOS	-0.238**	0.551**	0.602**	0.607**	0.615**	0.688*	1.000				
PHOB	-0.149*	0.501**	0.529**	0.561**	0.587**	0.687**	0.551**	1.000			
PAR	-0.103	0.485**	0.580**	0.634**	0.605**	0.636**	0.547**	0.522**	1.000		
PSY	-0.097	0.566**	0.601**	0.663**	0.713**	0.731**	0.566**	0.678**	0.640**	1.000	
GSA	-0.202**	0.777**	0.829**	0.809**	0.805**	0.891**	0.767**	0.736**	0.741**	0.834	1.000

\* Significant at 0.05 level (2 way);

\*\* Significant at 0.01 level (2 way); MET: Metabolic same; SOM: Somatization; O-C: Obsessive-impulsive indications; INT: Interpersonal affectability; DEP: Depression; ANX: Anxiety; HOS: Anger-aggression; PHOB: Phobic response; PAR: Paranoid idea; PSY: Psychoticism; GSA: General side effect normal.

There is a solid negative relationship at 0.01 level between mental side effects saw by members, for example, over the top impulsive manifestations, discouragement , uneasiness, animosity to dissatisfaction and midpoints of general indications and their actual movement levels, as per the connection coefficients introduced in Table 3. Also, there is a solid negative affiliation with respect to understudies ' actual movement levels and phobic reaction at 0.05 levels. On the opposite side, the relationship between levels of actual movement and somatization, relational affectability, neurotic reasoning and psychotics isn't significant.

**CONCLUSION AND DISCUSSION**

Exercise is known to ease pressure, improve mental prosperity to upgrade individual fulfillment, and to be among the recuperation techniques in clinical restorative administrations, notwithstanding its practical and physiological focal points (Soyer et. al., 2017). Normal actual exercise is a significant action that permits individuals to feel well and brings down burdensome indications (Isik et. al., 2014). The current examination, which means to assess the mental manifestations among understudies of the Faculty of Sports Sciences and to decide the effect of actual exercise on the understudies ' emotional well-being security, finds that among a considerable lot of the members, mental challenges are noticed. Fanatical habitual indications in 70.3 percent (n=156), neurotic speculation in 63.1 percent (n=140), relational affectability in 51.8 percent (n=115) and outrage antagonism in 51.4 percent (n=115) were the most predominant mental manifestations found among the understudies who partook in the current examination. It was seen that all non-insane mental impacts were more noticeable in female understudies. At 0.01 stages, there was a solid

negative relationship between mental indications, for example, over the top urgent side effects, melancholy, tension, animosity to outrage, phobic reaction and general manifestation midpoints and levels of actual action of the members in the current investigation. At the point when actual exercise levels rise, understudies' burdensome issues and complete condition midpoints decrease. Related discoveries have discovered that day by day action keeps youngsters from genuine issues, for example, coronary illness, circulatory strain, stoutness and type 2 diabetes, and that youngsters and grown-ups have lower levels of sadness (Dehghan et al., 2005; Penedo and Dahn 2005; Paluska and Schwenk 2000; Prasad et al., 2009; Tyson et al., 2010). Physical and conduct issues have been appeared to decrease following an educational plan coordinated for overweight youngsters with wretchedness and nervousness problems, including thought, social development, wellness and dietary schooling (Melnik et al., 2009). Bowman et al. (2014) demonstrated that passionate turn of events and stress control prompted actual movement and exercise. In their investigation, they found that the probability of sorrow rose as the measure of actual movement declined. Azar et al. (2011) found an adverse connection between's actual exercise and the probability of melancholy. Sund et al. (2011) expressed that a critical indicator of burdensome manifestations was actual exercise. Suh et al. (2012) demonstrated that the decrease in burdensome manifestations was ascribed to actual exercise administrations and social help. Karadağ (2008) expressed that understudies engaged with sports had lower smoking, drinking, substance and medication use commonness, higher caliber of life scores, lower general mental side effects and misery scores, lower want to harm and harm in the examination of the connection between the level of actual movement, mental manifestations and personal satisfaction among understudies remaining in halfway houses, matured 13-16. As the term of time gave to sports expanded, burdensome manifestations diminished, personal satisfaction evaluations diminished, time went through with peers expanded, and the sentiment of accomplishment with peers with youngsters expanded. Genuine manifestations, for example, over the top enthusiastic side effects, dubious reasoning, relational weakness and outrage animosity are found among the understudies of the Faculty of Sports Sciences as per the discoveries of the current investigation and their overall indication midpoints are solid and fanatical urgent side effects, melancholy, tension, outrage hostility, phobic reaction and general manifestation normal For this reason, understudies with these manifestations should participate in intercession, yoga, music treatment, administrations for wellness and actual movement, just as applied homeroom classes. Pointers of actual exercise, for example, recurrence, length, structure, and quality, ought to be considered when arranging these administrations. Vigorous activities, muscle building activities and adjusting

exercises ought to be given in any event 3 days per week, at least 30 minutes, to maintain a strategic distance from the burdensome side effects found among the understudies.

## REFERENCES

1. Adams, J. M., Miller, T. W., & Kraus, R. F. (2003). Exercise dependence: Diagnostic and therapeutic issues for patients in psychotherapy.
2. J Contemp Psychother, 33(2), pp. 93-107. <https://doi.org/10.1023/A:1022883104269>
3. Alver, B., Dilekmen, M., & Ada, Ş. (2016). Psychological symptoms of university students regarding their subjective perceptions. Turkish Psychological Counseling and Guidance Journal, 4(33), pp. 13-23.
4. Archer, T., Josefsson, T., & Lindwall, M. (2014). Effects of physical exercise on depressive symptoms and biomarkers in depression. CNS & Neurological Disorders-Drug Targets (Formerly Current Drug Targets-CNS & Neurological Disorders), 13(10), pp. 1640-1653.
5. Azar, D., Ball, K., Salmon, J., & Cleland, V. (2011). Individual, social, and physical environmental correlates of physical activity among young women at risk of depression. Journal of Physical Activity and Health, 8(1), pp. 133-140. <https://doi.org/10.1123/jpah.8.1.133>
6. Birsöz, S. (1980). A review of pre-disease life changes and psychological consequences. Hacettepe University Unpublished doctoral dissertation, Ankara.
7. Craig, C. L., Marshall, A. L., Sjoström, M., Bauman, A. E., Booth, M. L., Ainsworth, B. E., ... & Oja, P. (2003). International physical activity questionnaire: 12-country reliability and validity. Medicine and Science in Sports and Exercise, 35(8), pp. 1381-1395. <https://doi.org/10.1249/01.MSS.000007892.4.61453>.
8. FB Dehghan, M., Akhtar-Danesh, N., & Merchant, A. T. (2005). Childhood obesity, prevalence and prevention. Nutrition Journal, 4, pp. 24-32. <https://doi.org/10.1186/1475-2891-4-24>
9. Derogatis, L. R., Rickels, K., & Rock, A. F. (1976). The SCL-90 and the MMPI: A step in the validation of a new self-report scale. The British Journal of Psychiatry, 128(3),

pp. 280-289.  
<https://doi.org/10.1192/bjp.128.3.280>

10. Erkan, S., Özbay, Y., Çankaya, Z. C., & Terzi, Ş. (2012). University students' problem areas and psychological help-seeking willingness. *Education and Science*, 37(164), pp. 94-107.
11. Gökler, B. (1978). Assessment of neurotic female patients in terms of psychological symptoms of primary school children. Hacettepe University Department of Psychiatry, Unpublished speciality dissertation, Ankara.
12. Heyward, V. H. (2006). *Advanced Fitness Assessment and Exercise Prescription*. 5th ed. USA: Human Kinetics. Isik, O., Gumus, H., Okudan, B., & Yilmaz, M. (2014). Evaluation of the effects of the quality of life levels of university students upon their depression levels. *International Journal of Science Culture and Sport*, 2(5), pp. 836-843. <http://dx.doi.org/10.14486/IJSCS157>

---

**Corresponding Author**

**Rakesh Sangwan\***

Research Scholar