IMPACT OF COMMUNITY SPORTS PROGRAMS ON YOUTH MENTAL HEALTH IN VHEMBE DISTRICT, LIMPOPO PROVINCE

BY

VHOFANELWA RAMALAMULA

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Suprvisor: Dr Manganye BS

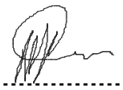
Co-supervisor: Dr Mulibana PK

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DECLARATION

I, Vhofanelwa Ramalamula, hereby declare that the work contained in this dissertation, “Impact of community sports programs on youth mental health in Vhembe District, Limpopo Province”, in Master of Public Health submitted to the University of Venda has not been submitted previously for any degree at this or another university. It is original in design and in execution, and all reference material contained therein has been duly acknowledged.

Signature: Date: 17-07-2025

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ABSTRACT

Community sports programs have been shown to bring better outcomes across the lifespans of youth regarding physical, mental, social, and emotional health. They also built social relationships, developed coping mechanisms, and promoted mental resilience, highlighting the collective benefits of sports engagement for youth's mental health. This study aimed to determine the impact of community sports programs on youth mental health in Vhembe District. The study used a quantitative research strategy and a descriptive cross-sectional design. The target population of this study included all youth between the ages of 15-34 who participated in community sports programs. A simple random sampling method was used to select respondents. The validity and reliability of the instrument were strengthened by adopting a standardized assessment tool from the International Olympic Committee of Sport Mental Health. The researcher requested permission to collect data from the royal council, coaches, and team managers. The data were collected using a self-administered questionnaire with close-ended questions from 150 respondents. Collected data was analyzed using the Statistical Package for the Social Sciences (SPSS) V. 29.0. The collected data were analyzed using descriptive statistics such as Frequency, multinominal logistic regression, Wilcoxon Signed-Rank and Correlations. The level of significance was set at $P<0.05$. The researcher ensured that research ethics were considered, including informed consent, permission, confidentiality, beneficence, and privacy. Results, conclusions, and recommendations were based on the findings, community sports participation is strongly associated with improved mental well-being and social interactions, yet gaps remain in skill development and teamwork enhancement. While sports programs offer mental health support, additional interventions are needed to translate this support into observable improvements. The study's findings have practical implications for program design and policy formulation, emphasizing the need for integrated mental health support within community sports initiatives.

Keywords: Community Sports Programs, Mental Health, Youth.

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LIST OF ABBREVIATION AND ACRONYMS

ACEs - Adverse Childhood Experiences
JSTOR - Journal Storage
LM - Local Municipality
NGO - Non-Governmental Organizations
SASCOC - South African Sports Confederation and Olympic Committee
SDG - Sustainable Development Goals
SPSS - Statistical Package for the Social Sciences
UN - United Nations
WHO - World Health Organization

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CHAPTER ONE
INTRODUCTION AND BACKGROUND OF THE STUDY

1.1. Introduction

Community sports programs play a significant role in promoting youth's mental health and well-being in various regions, including the Vhembe District in the Limpopo Province of South Africa. These programs offer a range of benefits that positively impact on the mental health of young individuals, contributing to their overall development and quality of life (Dimitri, Joshi, Jones, 2020). Community sports programs are organized physical activities typically rooted within local regions to promote individual and communal mental well-being. They provide an additional opportunity for the practical activation of the healthy lifestyle taught in creating chances pathway programs and are another means to develop and engage youth. The World Health Organization (WHO) recognizes the importance of sports and physical activities within its comprehensive mental health action plan (2013-2030). Sports programs are highlighted as a key component of promoting mental well-being and preventing mental health conditions (Fusar-Poli, Correll, Arango, Berk, Patel, Ioannidis, 2021). The WHO emphasizes that mental health is influenced by a complex interplay of individual, social, and structural factors.

In North America, studies in the United States and Canada have shown that participation in sports leads to lower levels of depression and anxiety among youth, offering an outlet for stress and a means to develop resilience and coping skills (Murphy, Patte, Sullivan, Leatherdale, 2021). Additionally, Canadian programs like KidSport and Jumpstart, designed to remove financial barriers, have effectively promoted psychological well-being and emotional regulation among youth (KidSport and Jumpstart, 2021). Participation in community sports is associated with improved youth mental health. This is primarily thought to reflect a range of neurophysiological effects of sports, development of competence, self-esteem, and increased social integration benefits (Vella, Swann, Batterham, Boydell, Eckermann, Ferguson, Fogarty, AHurley, Liddle, Lonsdale, Miller, 2020). Further to the potentially protective factors that engagement with sport may bring, these environments are situated as a valuable space for intervention, where the mental health of youth can be supported. This is particularly relevant given the high rates of participation seen around the world, with youth in Australia spending approximately seven hours a week participating in sport (Pascoe, Bailey, Craike, Carter, Patten, Stepto, Parker, 2020).

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1.2. Background of the study

Community sports programs are vital in promoting mental health, especially among youth. These programs provide a structured and supportive environment that encourages social interaction, physical activity, and a sense of community belonging, all key factors in mental well-being. Around the globe, sports programs are perceived as practical means of encouraging youth development and providing opportunities to enhance youth mental experiences (Holt, Deal, Pankow, 2020). Youth development incorporates sports to create structured environments where young people can engage in regular sports activities. These activities are known to boost endorphin levels, reduce stress, and improve overall mood. Additionally, the social aspect of sports fosters a sense of belonging, helping to combat feelings of isolation and loneliness (Mahindru, Patil, Agrawal, 2023).

The United Nations proposed the Sustainable Development Goals, whose overall objective is to create a better world and a better life for all by 2030. Community sports programs are instrumental in promoting physical activity and healthy lifestyles among individuals of all ages (UN DESA, 2015). Regular participation in sports activities helps in reducing the risk of non-communicable diseases such as heart disease, stroke, and diabetes, as well as improving the mental health of participants. By encouraging community members to engage in sports, these programs contribute to achieving SDG 3 - Ensure Healthy Lives and Promote Well-being for All at all Ages. The SDGs, adopted in 2015 at the United Nations General Assembly, explicitly acknowledge the role of sports; community sports activities are seen as essential for physical and mental health (Fernandez, 2020).

In Europe, community sports programs have been seen to bring positive changes in the youth who were smoking drugs, and authorities are recommending that each location must have an established team to keep the youth out of the streets and focus on positive things (Van der Veken, Lauwerier & Willems, 2020). Community sports programs provided by the Department of Sports in developed countries encompass a diverse range of initiatives aimed at promoting physical activity, and fostering social inclusion, and enhancing youth mental health. These programs often include organized leagues for various sports (soccer, basketball, and baseball) catering youth (Sport England, 2021). Studies conducted by the Australian Sports Commission (2021), European Commission (2022), and Sport England (2023) reported that developed countries often have well-equipped sports facilities, including stadiums, arenas, sports complexes, and community centers. These facilities are

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maintained to high standards and provide ample space for various sports activities, training sessions, and competitions. Adequate sports equipment is readily available with a focus on quality and safety standards.

Literature shows that one in every seven youths in Sub-Saharan Africa reported that youth who participate in community sports programs appeared to have better psychosocial health, such as lower anxiety, depression, and social problems, compared to those who participated in non-team sports (Khan, Ahmed, Hidajat, & Edwards, 2022). Sport for Social Change Network (2019) reported that community sports programs in sub-Saharan Africa, supported by the department of sports, play a crucial role in promoting youth mental health. These programs often target vulnerable populations, including youth from low-income families. They encompass a range of activities such as sports leagues, tournaments, coaching clinics, and educational workshops. In urban areas and some well-developed regions, there are sports facilities, equipment and supporting stuff that can be used for sports programs. However, in rural areas, access to quality facilities, equipment, and staff may be limited, with makeshift or rudimentary playing fields being more common (Bergsgard, Borodulin, Fahlen, Høyer-Kruse, and Iversen, 2020). Without proper sporting venues, equipment, and trained personnel, rural youth face barriers to participate in organized sports and accessing sports programs (Tandon, Kroshus, Olsen, Garrett, Qu, McCleery, 2021).

In South Africa, community sports programs are vital for addressing various mental health challenges. These programs provide a platform for youth development by promoting mental health, teamwork, and discipline. The South African government, along with various NGOs, actively supports these programs, recognizing their potential to positively impact youth (Libon, Alganion, Hilario, 2023.). The Department of Sport and Recreation in South Africa (2016) plays a pivotal role in promoting community sports programs across the nation, key programs include the National School Sports Program which integrates physical education into the school curriculum, and the Community Sport and Recreation Program which provide resources and infrastructure to local communities. These initiatives aim to foster mass participation in sports and physical activities, focusing on youth and previously disadvantaged communities (Burnett, 2020). However, challenges remain, particularly in rural areas with limited access to facilities and information. To address this, there is a concerted effort to enhance outreach and engagement strategies, ensuring that the message of the importance of community sports programs reaches

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all youth across the nation (Van Zyl, 2022.). Therefore, the current study intends to investigate the impact of community sports programs on youth mental health in the Vhembe district of Limpopo province.

1.3. Problem Statement

Youth mental health issues are a growing concern globally, with increasing rates of anxiety, depression, and other psychological challenges among youth (Kalin, 2021). In South Africa, these concerns are particularly pronounced, with significant portions of the youth population experiencing mental health difficulties due to socio-economic, cultural, and environmental factors (Stapleton, Abad, Barabino, Burnett, Iyer, Lekhanont, Li, Liu, Navas, Obinwanne, Qureshi, 2023). The Vhembe District, located in the Limpopo Province, is grappling with significant challenges related to youth mental health. Youth in this area are increasingly facing a myriad of stressors, including academic pressures, social dynamics, economic instability, and limited access to mental health resources (Salas-Wright, Maldonado-Molina, Brown, Bates, Rodríguez, García, Schwartz, 2021). These factors contribute to a rise in mental health issues such as anxiety, depression, and behavioral problems among youth.

Community sports programs have been proposed as a potential solution to improve youth mental health, offering physical activity, social engagement, and a sense of community (Dowell, Waters, Usher, Farrell, Donovan, Modecki, Zimmer-Gembeck, Castle, Hinchey, 2021). Studies indicated that participation in sports can lead to enhanced mental well-being, reduced symptoms of anxiety and depression, and improved self-esteem and resilience (Belcher, Zink, Azad, Campbell, Chakravartti, Herting, 2021). However, the impact of these programs can also be complex, with potential adverse outcomes such as increased stress, pressure to perform, and the risk of exclusion for some participants.

Despite the recognized benefits of sports participation, the researcher has a concern that there are limited studies specifically examining the impact of community sports programs on the mental health of youth in the Vhembe District. This gap in knowledge highlights the need for a comprehensive investigation into how these programs influence mental health outcomes in this unique context. Understanding both the positive and negative impacts is crucial for designing and implementing effective interventions that can support the mental well-being of young people.

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1.4. Rationale of the study

Previous studies extensively documented the positive impacts of community sports programs on youth mental health globally but often lacked a focused examination of specific regional contexts, particularly the Vhembe District. These studies generally emphasized broad outcomes, such as reduced anxiety and depression, improved self-esteem, and enhanced social integration. However, a notable gap existed in understanding how these mental health benefits manifested uniquely within the socio-cultural and economic landscape of the Vhembe District. Additionally, there was a lack of longitudinal studies in this context that assessed the long-term mental health outcomes of youth participation in community sports programs. Most studies provided only short-term evaluations, failing to consider how sustained engagement in sports influenced mental health over several years. Understanding these long-term effects was crucial for developing policies and programs to ensure enduring mental health benefits for youth.

This study aimed to fill these gaps by focusing on the Vhembe District, examining how community sports programs could be culturally tailored to maximize mental health benefits, and conducting a longitudinal analysis to assess the sustained impact of these programs. By doing so, it sought to provide deeper insights and practical recommendations for optimizing community sports initiatives to support youth mental health within this specific regional context.

1.5. Study Purpose and Objectives

1.5.1. Study purpose

The aim of the study was to determine the Impact of community sports programs on youth mental health in Vhembe District, Limpopo Province.

1.5.2. Objectives

Specifically, this study was designed to:

- Analyze the specific elements of community sports programs that contribute to positive and negative impacts on youth mental health in Vhembe District.
- Assess the effectiveness of existing community sports programs in promoting mental well-being among youth in Vhembe District.
- Determine the association between community sports participation and mental health outcomes among youth in Vhembe District.

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1.6. Significance of the study

This insight gained from this study might serve as a baseline for future intervention research studies. The findings from this study might address specific gaps in the existing literature by focusing on a unique regional context and providing detailed insights into the cultural and socio-economic factors affecting youth mental health in the Vhembe District. By examining the long-term effects of community sports programs on youth mental health, the study might contribute to a more comprehensive understanding of the sustained impact of such interventions, which are often lacking in other research studies. The study findings can inform local and national policymakers about the importance and effectiveness of community sports programs in promoting mental health. This can lead to the development of better-targeted policies and increased funding for these programs. By promoting inclusive and participatory community sports programs, the study can help enhance social cohesion and reduce social disparities, contributing to a more united and supportive community environment. The primary significance lies in the direct mental health benefits for the youth. By providing evidence-based recommendations for optimizing sports programs, the study can help reduce the prevalence of mental health issues such as depression, anxiety, and stress among the youth in the Vhembe District.

1.7. Definition of concepts

Mental Health

Mental health is broadly defined as a state of well-being where a person realizes their abilities, can cope with the everyday stresses of life, can work in a productive manner, and is able to contribute to their community (Wang, 2022). In this study, mental health can be understood as a state that involves both the absence of mental illness/difficulties but also the presence of mental health.

Community Sports Programs

Community sports programs mean a program or portion of a program of an institution of higher education or of a public or nonpublic school that is organized for intramural or inter-school recreational purposes with activities that include basketball, baseball, football, track, or any other competitive sports (Stoldt, Dittmore, Ross, Branvold, 2020). In this study, community sports programs are programs organized for youth for recreational purposes and promotion of healthy lifestyles.

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Youth

Youth is a period of transition from the dependence of childhood to adulthood's independence (Robinson, Schmitz, 2021). In this study youth means males and females between the age of 15-34, participating in community sport programs.

1.8 Summary

This chapter introduces the concept of community sports programs and their recognized global benefits on youth mental health. It highlights how such programs are particularly relevant in the Vhembe District, where youth face mental health challenges due to socio-economic stressors. The chapter defines the problem, states the research rationale, outlines objectives, and explains the significance and key terms of the study. Chapter Two will present a literature review, summarizing global, regional, and local findings on the link between community sports and youth mental health, including both positive and negative impacts.

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CHAPTER TWO
LITERATURE REVIEW

2.1. Introduction.

A literature review is a systematic examination and evaluation of existing research, publications, and scholarly work on a specific topic or area of study. It serves to identify gaps, synthesize knowledge, highlight trends, and establish a foundation for further research. Through a literature review, researchers critically analyze previous studies to provide context, validate the relevance of the study, and justify the objectives. In this study, the literature review followed a structured process to ensure comprehensive coverage and relevance. This study employed a narrative literature review approach, which is suitable for providing a comprehensive overview and critical analysis of the topic. The narrative approach allowed the integration of findings from diverse studies, identification of knowledge gaps, and formulation of new insights to guide the research focus on community sports programs in the Vhembe District.

The review focused on understanding the relationship between community sports programs and youth mental health, with a particular interest in the Vhembe District context. Academic databases such as PubMed, Scopus, Google Scholar, and JSTOR were used. Keywords and phrases included “community sports programs,” “youth mental health,” “regional context,” “longitudinal studies,” “Vhembe District,” and “socio-cultural impacts.” Studies were included if they were published in peer-reviewed journals, focused on youth mental health, or examined community sports in comparable regional contexts. Studies were excluded if they lacked empirical data, were not focused on youth, or did not address mental health outcomes. Titles, abstracts, and full texts were screened to identify studies that matched the inclusion criteria. Duplicates and irrelevant studies were removed. Key information, such as study objectives, methodologies, findings, and limitations, was extracted and organized thematically. Themes such as mental health outcomes, cultural relevance of sports programs, and long-term impacts were identified and critically analyzed. Gaps in existing research, particularly in the Vhembe District, were highlighted.

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2.2. Positive Impact of community sports programs on youth mental health.

Numerous studies highlight the benefits of community sports programs on mental health. Social support fostered through team interactions can help reduce feelings of isolation and loneliness (Eime et al., 2013). Engaging in sports has been associated with stress reduction through physical activity, which triggers the release of endorphins and lowers cortisol levels (Peluso & Andrade, 2005). Participation in structured sports activities can enhance self-esteem by providing opportunities for skill development and achievement (Bailey, 2006). Regular participation in sports is associated with improved mental health outcomes. Eather et al., (2023) found that both community and elite sports participation lead to higher self-esteem and reduced depression and anxiety levels. Research by Eime et al., (2013) further supports that adolescent engagement in school sports is linked to lower stress and better self-reported mental health in early adulthood. The effectiveness of training methods varies depending on mental health status. Structured physical activity programs have been shown to reduce depressive symptoms in at-risk youth (Smith et al., 2018), while targeted coaching interventions improve resilience in struggling adolescents (Vella et al., 2019).

Participation in sports programs often gives youth a sense of purpose and belonging, which are critical for mental well-being. Programs emphasizing teamwork and collective goals can also improve people skills, fostering better communication and conflict resolution abilities (Nichols, 2010). Moreover, exposure to positive role models, such as coaches and peers, can encourage the adoption of healthy behaviors and attitudes, further promoting mental health. Similar findings were revealed by Atherley, (2006) in rural Australia study, where it was found that sports in rural communities contribute immensely towards social cohesiveness. It was not surprising that Britain adopted policies that encouraged community sports participation, as this was perceived to improve social inclusion and community regeneration (Jarvie, 2003). Studies also show that these programs can improve academic performance and career aspirations by teaching discipline, time management, and leadership skills (Holt et al., 2017).

2.3. Negative Impact of community sports programs on youth mental health.

While community sports programs have many benefits, they can also have drawbacks. The pressure to perform or compete can lead to anxiety and diminished enjoyment (Scanlan et al., 1991). Overtraining, often resulting from poorly managed schedules, may negatively impact both physical and mental health (Budgett, 1998).

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Accessibility issues, including financial constraints and limited resources, can exclude certain youth from participating, potentially exacerbating social inequalities (Spaaij, 2011). Poorly structured programs or untrained leadership can diminish the potential benefits and even create harmful environments (Coakley, 2011). Inadequate sports facilities are a major risk factor for poor mental health. Poor infrastructure contributes to stress, decreased participation, and reduced mental well-being (Perez, 2024; O'Farrell, Wilson, & Shiel, 2023). Kourgiantakis et al., (2023) emphasized the importance of well-maintained sports environments in supporting youth mental health. However, Grasdalsmoen, Clarsen, and Sivertsen (2022) suggest that the type of sport and social dynamics also significantly impact outcomes.

Certain fitness assessment methods contribute to stress and demotivation. Crocker, Tamminen, and Bennett (2017) highlighted the negative impact of high-pressure assessments such as the Beep Test, which led to increased anxiety among students. Xanthopoulos et al., (2020) further emphasized that performance pressures in sports contribute to mental health challenges. Conversely, studies by Ho et al., (2017) and Chiang et al., (2024) found that improved cardiovascular fitness is associated with reduced anxiety and depression. Some studies, such as those by Koivula, Hassmén, and Fallby (2002), highlight potential negative effects, including increased anxiety and burnout due to high training volumes and competitive pressure. For some participants, unrealistic expectations from parents, coaches, or peers can result in burnout and mental exhaustion. A study indicates that unequal attention to participants based on skill levels can foster feelings of inadequacy among less experienced players, further exacerbating mental health challenges (Lattie, Stiles-Shields, & Graham, 2022). Research highlights that programs focused overly on competition rather than personal development may alienate participants and undermine their self-esteem (Smoll & Smith, 2006).

Crocker, Tamminen, & Bennett, (2017) analysed the negative impact of the Beep Test, a common fitness assessment in Australian schools. Many students reported feelings of trauma and anxiety associated with the test, leading to a lasting aversion to physical activity. Xanthopoulos, Benton, Lewis, Case, & Master, (2020) discussed how the pressures of athletic performance, including rigorous fitness assessments, can contribute to mental health challenges in young athletes. This article emphasizes that performance pressures, including those from fitness assessments, can lead to anxiety and stress in student-athletes, affecting their overall mental well-being. Osgood (2022) discussed the mental health challenges faced by youth athletes,

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noting that the pressures from fitness assessments and performance expectations can contribute to issues such as anxiety and depression.

2.4. Effectiveness of community sports programs.

The success of community sports programs in achieving positive mental health outcomes often depends on their structure and leadership. Studies emphasize the importance of having trained facilitators who can create inclusive, supportive, and purposeful environments (Côté & Gilbert, 2009). Participant engagement, driven by enjoyment and a sense of belonging, is crucial for sustained involvement (Ryan & Deci, 2000). Programs that regularly measure outcomes and adjust their practices based on feedback tend to be more effective in meeting their objectives (Fraser-Thomas et al., 2005). Effective programs also integrate cultural and community-specific elements to ensure relevance and sustainability. Incorporating local traditions and practices into sports activities can strengthen community buy-in and enhance participant engagement (McGee, S., 2009). Program mentorship components can provide additional layers of support and guidance for participants, particularly those from disadvantaged backgrounds. Evidence suggests that programs employing gender-sensitive approaches can better address male and female participants' unique needs and challenges, ensuring more equitable benefits (Newton, 2016).

Easterlin, Chung, Leng, and Dudovitz (2019) provide evidence that sports programs lead to significant mental health improvements, reinforcing the observed shift in ratings from lower to higher well-being categories. A systematic review published in BMC Public Health (Eather, Wade, Pankowiak, & Eime, 2023) found that individuals engaged in sports reported better psychological well-being and reduced depression and anxiety, supporting the notion that participation in community sports programs fosters improved mental health. Research from the Journal of Adolescent Health (Doré et al., 2019) demonstrates that both recreational and performance-based sports in childhood and adolescence correlate with better mental health outcomes in later years, which resonates with the observed improvements among participants in this study.

2.5. Association between participation and mental health outcome.

Evidence from correlation and longitudinal studies suggests a strong link between sports participation and improved mental health outcomes. Participation has been associated with lower levels of depression and anxiety and higher levels of resilience among youth (Lubans, Smith, Morgan, Beauchamp, Miller, Lonsdale, Parker & Dally,

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2016). Intervention studies demonstrate that targeted programs designed to address specific mental health challenges can yield measurable improvements (Schuch, Vancampfort, Richards, Rosenbaum, Ward, & Stubbs, 2016). Findings often vary based on demographic factors such as age, gender, and socioeconomic background (Eime, Young, Harvey, Charity, Payne, 2013).

Emerging research highlights the potential for sports programs to mitigate the impact of adverse childhood experiences (ACEs) by providing stable, supportive environments. A study published by Easterlin et al., (2019) found that among individuals with ACEs, those who participated in team sports during adolescence exhibited better mental health outcomes in adulthood, including reduced rates of depression and anxiety. A study highlighted in Frontiers in Psychology identified sports participation as a key resilience factor for young people with multiple ACEs. The research emphasized the importance of understanding the psychological mechanisms that underpin these improvements in well-being and resilience (Bremer, Feletti, Monasterio, and Schweitzer, 2019). American Psychiatric Association reports that involvement in team sports during adolescence is associated with better adult mental health among those who have experienced ACEs, suggesting that sports can play a role in building resilience after trauma (Norris, and Norris, 2021). These programs can function as protective factors, fostering resilience and promoting coping mechanisms in youth exposed to trauma (Hoeven, Bogaerts, and Janković, 2024). A recent meta-analysis suggests that programs emphasizing psychosocial skill development alongside physical activity yield the most substantial mental health benefits (Vella et al., 2019).

2.6. Conclusion.

Community sports programs in the Vhembe District hold significant promises for enhancing youth mental health. Positive outcomes such as stress reduction, improved self-esteem, and emotional regulation are well-documented, though challenges such as accessibility and the potential for negative experiences remain. Programs should prioritize inclusive practices, effective leadership, and regular evaluations to maximize benefits. Future research should explore long-term impacts, the role of cultural context, and strategies to address barriers to participation. Additionally, incorporating robust monitoring and evaluation frameworks can help identify the best practices and areas for improvement. By addressing these gaps, stakeholders can better leverage community sports programs to promote mental health in youth populations.

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CHAPTER THREE
RESEARCH METHODOLOGY

3.1. Introduction

Research methodology is the path through which the research is conducted (Gupta, & Gupta, 2022). This section provided a comprehensive explanation, focusing on key concepts such as population characteristics, various sampling methods, distinct types of instrumentation used for data collection, and the strategies employed for analysis, all tailored towards effectively fulfilling the research objectives. The study's specific geographical location (setting) was clearly delineated, along with a thorough examination of the ethical considerations associated with the study.

3.2. Study design

A quantitative research approach was used in this study to quantify the impact of community sports programs on the mental health of youth in the Vhembe district, Limpopo Province in South Africa. Quantitative research is an inquiry into a social problem, explaining phenomena by gathering numerical data that were analyzed using mathematically based methods (Creswell, 2016). A quantitative approach allowed for the collection and analysis of data from many respondents. This approach enabled the measurement of specific mental health outcomes, comparing distinct groups (e.g., respondents vs. non-respondents), and identifying statistically significant effects of the sports programs.

This study used a descriptive cross-sectional quantitative research design. This design is used to gather information about a population’s characteristics, behaviors, beliefs, or opinions at a particular moment, using numerical data and statistical techniques to summarize and analyze the findings (Silva, 2017). The researcher, with careful consideration, opted to employ the descriptive cross-sectional research method. This methodological choice was made based on its capability to facilitate a thorough investigation into the intricate dynamics of the correlation between sports participation and various mental health indicators. By utilizing this method, the researcher was able to delve deep into the intricate details surrounding mental health issues prevalent among young individuals actively involved in sports.

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3.3. Study setting

The study was conducted in the Vhembe District of Limpopo Province. Vhembe District is in the northern part of Limpopo Province and shares borders with Capricorn and Mopani districts in the eastern and western directions. The Vhembe District had a total population of 1,402,779, with most of the people in this district speaking Tshivenda. It had more female than male residents. There were few sports facilities, and the sporting codes available included netball, football, volleyball, basketball, cricket, rugby, and softball. There was also an improvement in the level of education, with an increase in the number of youths obtaining matric or higher education. The study was conducted in selected villages within the Thulamela Municipality, Vhembe District, South Africa. Thulamela had a diverse youth population, providing a rich context to examine how different community sports programs influenced various groups, including those from different socio-economic backgrounds. Given the broad geographical coverage of the Thulamela Municipality, it was practical and feasible to focus on specific villages to ensure a thorough and detailed investigation.

The researcher purposively selects Makwarela, Sibasa, Tshifudi, Lwamondo, and Thohoyandou. These villages exhibit differing economic and socio-economic conditions within the Vhembe District. Including them allowed the study to investigate how factors such as economic disparities and resource limitations influence the effectiveness of community sports programs in fostering mental health benefits.. Focusing on these specific locations allowed for a more in-depth examination of the impact of community sports programs on youth mental health. It also ensured that the data collected was representative of the targeted demographic within a manageable area.

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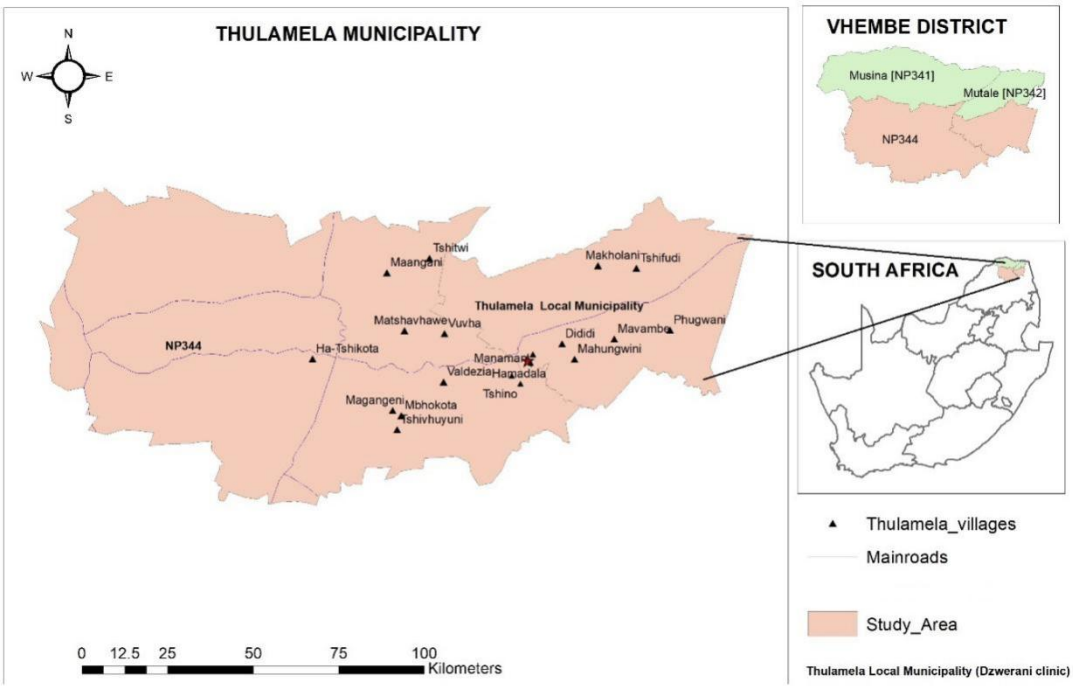


Figure1. Map showing Thulamela Local Municipality Areas

3.4. Study population

The target population of this study was the youth from the Vhembe District, and the accessible population consisted of youth between 15 and 34 years old who fell under the selected local municipality (Thulamela LM). See Table 3.1 below for details.

Table 3.2: Distribution of youth in Thulamela local municipality (Community sports programs report 2023)

Thulamela local municipality	Total population (n)
Makwarela	150
Sibasa	140
Tshifudi	112
Lwamondo	108
Thohoyandou	200
Total	710

3.5. Sampling

The study adopted simple random sampling techniques. A simple random sample is a randomly selected subset of a population. In this sampling method, each population member had an equal chance of being selected (Turner, 2020). In this study, the

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researcher obtained a complete list of youth aged 15-24 from community records, schools, or local organizations in each village, assigned a unique number to everyone on the list, used a random number generator to select the desired number of respondents, and then contacted the selected individuals to invite them to participate in the study. If a selected individual declined or was unavailable, an additional random number was generated to select a replacement from the remaining population.

2.5.1. Sampling frame

Sample size

The researcher initially planned to recruit a total of 250 participants to participate in this study. The sample size calculation was done through the Raosoft sample size calculator, which is conveniently accessible on the Raosoft website. This tool is specifically tailored for calculating or generating the sample size required for research purposes. The calculation process took into consideration critical factors such as the margin of error, which was set at 5%, the confidence level at 95%, the population size estimated at 710, and the response distribution set at 50%. To factor in the possibility of non-response, an additional 10% (equivalent to 25 individuals) was appended to the sample size, resulting in a final count of 275 respondents. To ensure full-bodied representation across various age groups, a specific sampling frame was calculated for each group by dividing the sample size by the total population and then multiplying the outcome by the respective number of youths within that age bracket. Despite thorough planning, only 150 out of the 275 individuals within the sampling frame were able to provide their informed consent and agreed to participate in the study. Consequently, the achieved response rate stood at 55%, a statistic that was subsequently recognized and acknowledged as a limitation of the study (***see page 45***).

3.6.1. Inclusion criteria

All youth between the age of 15-34 from Thulamela Local Municipality participating in community sports programs.

3.6.2. Exclusion criteria

Individuals below 15 and above 34 were excluded to maintain focus on the target demographic. Youth who were injured or hospitalised and ill teenagers were also excluded.

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3.7. Data collection tool

The data were collected through self-administered, closed-ended questionnaires that were written in English but translated into Tshivenda to accommodate participants who did not understand English but could understand Tshivenda. The questionnaires were then translated back into English by a language expert to ensure that the original meaning was maintained. The researcher developed the questionnaire based on previously conducted studies (literature review). This section of the measuring instrument covered the objectives of the study. The questionnaire comprised three sections: demographic information, the examination of the relationship between sports participation and mental health indicators, and the effects of community sports participation on youth mental health.

3.7.1 Pre-test

The questionnaire pre-test procedure was conducted among 10% of the respondents from the study population who did not form part of the study, to ensure the precision of the questionnaire. The pre-test was conducted on some volunteer youth who did not form part of the study, in Siloam village similar to the target population in Thulamela Municipality. The results obtained assisted the researcher in adjusting the questionnaire and making corrections where necessary, based on the respondents' comments. The pre-test also helped the researcher become familiar with the data collection instrument and tools and allowed for corrections and improvements to the instrument.

3.7.2. Validity and reliability

In research, validity and reliability are crucial concepts that determine the accuracy and trustworthiness of the findings. Ensuring validity and reliability is essential to establish the credibility of the research and to ensure that the findings are generalizable to the population being studied. In this study, the researcher discussed the measures taken to ensure the validity and reliability of the research findings, including the research design, data collection methods and data analysis procedures.

3.7.2.1. Validity

Validity is defined as a measure of the truth or falseness of the data obtained by means of an analysis tool (Gidron, 2020). Content and face validity as a test of validity were used to ensure that the instrument captured the entire concept. To ensure content validity, the study supervisors checked the observation questionnaire.

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To ensure face validity, the supervisors checked the observation questionnaire for clarity, appropriateness, wordiness, and use of jargon.

3.7.2.2. Reliability

Reliability refers to the degree to which an instrument can be depended upon to yield consistent results if used repeatedly over time on the same person or if used by two researchers (Gidron, 2020). In this study, reliability was achieved by giving respondents the same questionnaire within a period of one week. This procedure was called the test-retest technique. Internal consistency reliability was used to assess the reliability of the data set. To measure internal consistency, the researcher conducted interviews with a subset of respondents and applied the Split-Half Reliability method to check consistency across different sections of the questionnaire.

3.7.3. Data collection process

Once permission to collect data in the respective sporting codes was granted, data collection commenced. Specific appointments were made with the respondents at least one week before data collection. Data collection took place at their respective camping sites. Before data collection, the information sheet (Appendix C) and consent form (Appendix D) were given to respondents so that they could read and sign them. Then, the data collection process began, with respondents gathered at their camping site, where the researcher distributed the questionnaire to 206 respondents, only 150 completed the questionnaires. The questionnaire was completed in 45 minutes. Respondents were recruited from the Vhembe District, focusing on young people aged 15-34 actively involved in community sports programs. Simple random sampling was used to select participants who met the study criteria. Recruitment strategies included collaborating with local schools, community centers, and sports clubs to identify potential respondents.

3.8. Data analysis

Data analysis was a process of making sense of the data collected in the research project. The large volumes of data were reduced into small, manageable quantities. The section on data analysis provided knowledge of the available statistical techniques and which techniques were best suited for the research project. Data was collected from the respondents using questionnaires, where each questionnaire was entered and coded into the Statistical Package for the Social Sciences (SPSS) version 29.0. The results were presented in tables, graphs, and diagrams. Descriptive statistics such as means, standard deviation, and frequencies were used

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to describe items on the questionnaire. Chi-square was applied to find an association between mental health and physical performance, with the level of significance set at $P<0.05$. Collected data were kept and managed in Microsoft Excel.

3.9. Ethical considerations

3.9.1. Approval to conduct the study

The researcher used the University of Venda protocol to obtain ethical clearance (FHS/24/PSYCH/13/2211). The study proposal was presented to the Department of Public Health and the Faculty of Health Sciences Higher Degree Committee for quality assurance. The proposal was submitted to the Executive Faculty Higher Degree Committee for approval. It was then submitted to the Research Ethics Committee of the University of Venda for assessment and the issuing of ethical clearance. The proposal was also submitted to the University Higher Degree Committee for approval. After attaining approval and ethical clearance from the University of Venda, the researcher consulted the community royal councils to seek permission to conduct the study. Further permission was obtained from the sports club managers and coaches of each team.

3.9.2. Informed Consent

Petrova, Dewing & Camilleri, (2016) states that informed consent is an ongoing communication process that takes place between a participant and a researcher to ensure participant comfort. It allows the participant to volunteer with no fear of harm or of feeling threatened. It was the researcher's duty to provide the participant with all necessary information before participating so that the participant chooses to participate with full comprehension of the study's dimensions. The researcher gave a written consent to each participant and explained the intent to them before the test. For minor participants (those who were less than 18 at the time of data collection years of age), parental informed consent was sent to the parents for them to give consent for their children to participate in the study. Participants were then required to complete an assent form in approval of their parents or legal guardian consent for participation in the study.

3.9.3. Volunteering to participate

Babbie & Mouton (2012) propose that involvement should be optional, that participants should not be forced to participate, and that they should not feel threatened by their own will to participate in the study. Drawing from this, all participants in this study were allowed to form part of the study out of their own will.

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Participants were informed of their right to withdraw participation if they no longer feel like being part of the study.

3.9.4. Confidentiality

Confidentiality refers to how the information the person reveals is managed (Babbie and Mouton, 2012). All information provided by the participants is kept safe and accessible only to the researcher and not to any other person. Confidentially, it was ensured by providing each participant with a code name to obscure the real name. Code names such as R1 or R2 (respondent 1 or 2) were used when discussing and analyzing data. The main list of participants' names and matching codes are locked in a safe place where only the researcher has access to it. Participants' personal information is not published anywhere in the research report.

3.9.5. Avoidance of harm

Participants were assured that they would be compensated for any physical or emotional harm (Creswell, 2017). To prevent emotional harm, the researcher avoided causing any physical or emotional distress to participants by steering clear of sensitive or potentially upsetting topics. Respondents were informed about available support services, such as counseling, in case they experienced emotional distress. To avoid physical harm, the researcher ensured that data collection occurred in safe and accessible locations, with necessary health precautions implemented to protect respondents' physical well-being. Respondents were assured that their information will not be disclosed to anyone other than individuals directly involved in the study. Participation was entirely voluntary, and no one was forced to take part in the study. Respondents were free to withdraw from the study at any time. Additionally, the researcher clearly informed participants about the purpose of the research.

3.10. Delimitation

The research was delimited to investigate the impact of community sports programs on youth mental health in Vhembe district, Limpopo province.

3.11. Plan for dissemination and implementation of results

Research soft copies will be submitted to the exam department and then sent to the University of Venda's Library. The findings will also be presented during seminars and conferences. It is also envisaged that the findings will be published in a relevant journal to be accessible to many audiences.

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3.12. Summary

This chapter outlines the study's descriptive cross-sectional quantitative design. It details the research setting in the Vhembe District, sampling techniques (simple random), population (youth aged 15–34), and the use of standardized questionnaires for data collection. It also explains the validation and reliability measures, ethical protocols, and data analysis using SPSS. Chapter Four will present the results, including demographic profiles, sports participation rates, and statistical findings on the impact of sports on mental health.

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CHAPTER FOUR
PRESENTATION AND INTERPRETATION OF RESULTS

4.1. Introduction

This section presents data that was collected through questionnaires. The questionnaires were distributed to 206 respondents, only 150 were returned. Data collection for this study commenced on 30 November 2024 and concluded on 05 January 2025, spanning a period of approximately five weeks. The major aspects presented include demographic information, sporting programs within Vhembe district, distribution of sporting codes, factors influencing mental health, promotion of sports participation as well as the association of sports participation. To address the aim and objectives of this study and to provide a clear and better understanding of the study, the results are displayed through tables and graphs.

4.1. Demographic Characteristics of Participants

This section provides demographic information of all the study participants.

Table 4.1: Age Distribution

Age of the respondents	Frequency	Percent (%)
15-18	10	7
19-22	84	56
23-35	56	37
Total	150	100

Table 4.1 above shows that there was a total of 150 respondents. From all the respondents, 7% (n=10) were between the age of 15-18, while 56% (n=84) respondents were between 19-22 and 37% (n=56) respondents were between 23-35.

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Table 4.2: Gender distribution

Gender	Frequency (n)	Percent (%)
Male	98	65
Female	52	35
Total	150	100

Table 4.2 above shows that out of the 150 respondents, 65% (n=98) of them were males. 35% (n=52) of respondents were females.

Table 4.3: level of education

	Frequency (n)	Percent (%)
Primary School	2	1
High School	23	15
College / University	79	53
Graduate	46	31
Total	150	100

Table 4.3 above shows most respondents who responded to the study were college students 53% (n=79), 31% (n=46) respondents were graduates, 15% (n=23) and a few respondents were primary school learners 1% (n=2).

4.2. Types of Sports Programs and Participation

4.2.1 frequency table for the types of sports programs

The frequency table below shows the frequency and percentages for several types of sports programs in the questionnaire and the number of respondents participating in each sporting code.

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Table 4.4: Distribution of Sports Programs

Sporting programs	Frequency	Percent (%)
Soccer	61	41
Athletics	19	13
Volleyball	18	12
Netball	12	8
Basketball	14	9
Table tennis	11	7
Badminton	14	10
Total	150	100

The study findings in table 4.4 above, indicate that the most played sports within the study areas is soccer at 41% (n=61), followed by athletics at 19% (n=19), volleyball at 12% (n=18), basketball at 9% (n=14), badminton at 9% (n=14), table tennis at 8% (n=11) and netball at 8% (n=12).

4.2.2 Frequency table for how often they do participate in sports programs.

The frequency table below shows the frequency and the percentages for how often they participate in community sports programs in the questionnaire and the number of respondents participating on different number of days.

Table 4.5: Distribution of How Often Do You Participate

	Frequency (n)	Percent (%)
Daily	69	46
Weekly	47	31
Monthly	28	19
Rarely/ Never	6	4
Total	150	100

Table 4.5 above shows that 46% (n=69) of respondents engage in daily sports activities. About 31% (n=47) of respondents participated weekly, making this the second-largest group. 19% (n=28) report participating monthly. 4% (n=6) reported

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participating in sports activities rarely or never. This group is at risk of missing the mental and physical health benefits associated with regular sports participation.

4.3. The elements of community sports programs contribute to positive and negative impacts on mental health.

The following section gives the multinominal logistic regression analysis to determine the element of community sports programs that contribute to positive and negative impacts on mental health.

The elements of community sports programs contribute to positive and negative impacts on mental health.

Table 4.6 below shows the effects of numerous factors of community sports programs on youth mental health outcomes. The dependent variable, Mental Health Status, has three categories: Healthy, Struggling, and Unsettled.

Table 4.6: The elements of community sports programs that contribute to positive and negative impacts on mental health.

Mental Health Status	Factors	coefficients	significant
Health	Frequency of Participation	2.215	0.017
	Training Methods	0.395	0.755
	Training Evaluation	1.875	0.142
	Training Facility	-12.971	0.001
	Fitness Assessment Method	-15.449	0.001
	Instructors Capacity	0.224	0.732
	Program Duration	-0.399	0.695
	Safety Protocols	0.413	0,781
Struggling	Frequency of Participation	2.809	0.239

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	Training Methods	0,884	0.030
	Training Evaluation	1.702	0.198
	Training Facilities	-12.792	1.001
	Fitness Assessment Method	-15.578	0.001
	Instructors Capacity	0.166	0.815
	Program Duration	-0.623	0.573
	Safety Protocols	0.181	0.007
Unsettled	Frequency of Participation	2.046	0.390
	Training Methods	-0.307	0.812
	Training Evaluation	2.239	0.097
	Training Facility	-2.391	0.001
	Fitness Assessment Method	-5.680	0.001
	Instructors Capacity	0.373	0.588
	Program Duration	-0.303	0.771
	Safety Protocols	0.296	0.845

The study findings show that sporting codes have no significant impact across all mental health categories, as indicated by high p-values, p=0.999 for Healthy, p=0.231 for Struggling and p=0.433 for Unsettled. The large negative coefficients for Struggling (p=-25.516) and Unsettled (p=-27.201). The frequency of participation is associated with a healthier mental state (B = 2.215, p = 0.017). Not significant for Struggling (p = 0.239) and Unsettled (p = 0.390): Training Methods have a significant impact for Struggling mental status (B = 0.884, p = 0.030) but not for Healthy mental status (p = 0.755) or unsettled mental status (p = 0.812). Training evaluations show some potential influence on Unsettled youth (B = 2.239, p = 0.097), but not statistically significant. Training Facilities have a strong negative impact across all groups, with large negative coefficients and high significance ($p < 0.001$). Fitness Assessment Methods have a strong negative impact ($p < 0.001$) across all mental health statuses. The coefficients (Healthy = -15.449, Struggling = -15.578, Unsettled

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= -5.680) indicate that current fitness assessment methods may be a contributing stressor. The study findings reveal that Instructor's Capacity is not significant across any mental health status ($p > 0.5$). Program Duration has no significant impact across all mental health statuses ($p > 0.5$). The struggling group shows significance ($p = 0.007$), with a positive coefficient ($B = 0.181$) in Safety Protocols. The findings show no impact on Healthy ($p = 0.781$) or Unsettled ($p = 0.845$) groups.

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4.4. Effectiveness of community sports programs in promoting mental well-being

The table4.7 below shows the Wilcoxon Signed-Rank values comparing mental well-being before and after participating in community sports programs.

Table 4.7: Wilcoxon Signed-Rank values comparing mental well-being before and after participating in community sports programs.

	Metric	Value
Wilcoxon Signed-Rank Test	W-statistic	0.0
Descriptive Statistics	p-value	1.54×10^{-27}
	Median (Before)	3 (Fair)
	Median (During)	4 (Good)
	Mode (Before)	3 (Fair)
	Change in Distribution	Significant

Table 4.7 shows that W-Statistic = 0.0. The Wilcoxon W-statistic of 0.0 suggests that all post-program mental health scores are higher than pre-program scores, indicating a strong positive shift in mental well-being. The p-value = 1.54×10^{-27}, this extremely small p-value ($p < 0.001$) confirms that the improvement in mental health is statistically highly significant and not due to random chance. The Median Scores shows that Median = 3 (Fair) Before participation and Median = 4 (Good) During participation, the increase in median score shows a clear improvement in mental health status due to participation in community sports programs. Mode Scores Before participation = 3 (Fair) the mode confirms that most respondents initially had "Fair" mental health before joining the program. Change in Distribution has a significant shift in mental health distribution, further supporting the effectiveness of community sports programs.

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4.5. Association between sports programs' participation and mental health outcomes.

This section shows the correlation matrix determining the relationships between community sports program participation and several factors related to mental health and social development.

Table 4.8: Correlation analysis for the relationship between sports programs participation and mental health outcomes

	Social Interactions	Skills development activities	Teamwork	Mental well-being	Mental well-being support	Programs benefits	Prior Mental state status rating	During mental state status rating	Observed Improvements during sports participation	COMMUNITY SPOTS PROGRAM PARTICIPATION
Social Interactions	1									
Skills development activities	,365	1								
Teamwork	,262	,613	1							
Mental well-being	-,113	-,159	-,187	1						
Mental well-being support	-,427	-,586	-,614	,260	1					

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Programs benefits	,141	,174	901	-,085	,008	1				
Prior Mental state status rating	,004	-,022	-,058	,183	-,037	-,020	1			
During mental state status rating	,239	,061	,183	-,209	-,236	154	,108	1		
Observed Improvements during sports participation	,168	,104	,249	-,261	-,191	,076	-,138	,286	1	
COMMUNITY SPOTS PROGRAM PARTICIPATIO N	,972	-,044	-,071	,737	,762	-,813	-,025	-,586	,026	1

The correlation analysis in table 4.8 below highlights a strong positive association between community sports program participation and mental well-being ($r = 0.737$, $p = 0.003$). Additionally, participation in these programs is significantly linked to mental well-being support ($r = 0.762$, $p < 0.01$), indicating that community sports may provide an environment where participants feel supported in managing their mental health. However, a negative correlation between participation and self-rated mental state during the program ($r = -0.586$, $p < 0.01$). Community sports

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Participation is highly correlated with social interactions (r = 0.972, p = 0.018) the study findings show no significant correlation was found between sports participation and skill development (r = -0.044, p = 0.706) or teamwork (r = -0.071, p = 0.546). Table 4.8 also revealed a strong negative correlation between sports participation and perceived program benefits (r = -0.813, p = 0.136), though this relationship was not statistically significant. There is no significant correlation found between prior mental state and sports participation (r = -0.025, p = 0.832). Observed mental health improvements during participation showed no meaningful correlation (r = 0.026, p = 0.824).

4.6. Summary

This chapter presents and interprets data collected from 150 youth participants. Key findings include high participation in soccer, positive mental health shifts shown by Wilcoxon tests, and significant associations between participation frequency and mental well-being. However, some elements like instructor capacity and program duration showed no strong effect. Chapter Five will provide a discussion of the results in relation to existing literature, explore limitations, and offer recommendations for future practice and research.

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CHAPTER FIVE
DISCUSSION, LIMITATIONS, AND RECOMMENDATIONS

5.1 Introduction

This chapter presents a discussion of the key findings from the study on the impact of community sports participation on youth mental health in the Vhembe District. The discussion is structured around the study's objectives, including analyzing specific elements of community sports programs that contribute to mental health outcomes, assessing their effectiveness, and determining the association between participation and mental well-being. The findings are discussed in relation to relevant literature, implications for practice are explored, and study limitations are acknowledged.

5.2 Summary of Key Findings

The study sought to analyze the specific elements of community sports programs that contribute to both positive and negative impacts on youth mental health in Vhembe District. The findings indicate that participation in community sports significantly enhances social interactions and mental well-being. However, elements such as skill development and teamwork do not show a strong correlation with participation, suggesting that while these programs improve socialization, they may not effectively foster structured skill-building.

The study assessed the effectiveness of existing community sports programs in promoting mental well-being. The results show a strong positive correlation between sports participation and mental health support, emphasizing the role of these programs in providing psychological and emotional assistance. However, observed mental health improvements during participation were not significantly correlated, suggesting that while sports create a supportive environment, additional interventions may be required for tangible mental health improvements.

The study determined the association between community sports participation and mental health outcomes. A strong positive correlation was found between participation and mental well-being, indicating that engagement in sports significantly contributes to improved mental health. However, no committed relationship was observed between prior mental state and sports engagement, suggesting that pre-existing mental health conditions do not strongly influence participation levels.

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5.3. Discussion of the findings

Discussions of this study will be dealt with to address all the proposed objectives of the study. This study was designed to determine the Impact of community sports programs on youth mental health in Vhembe District, Limpopo Province.

The following specific objectives were designed to guide the study.

- Analyze the specific elements of community sports programs that contribute to positive and negative impacts on youth mental health in Vhembe District.
- Assess the effectiveness of existing community sports programs in promoting mental well-being among youth in Vhembe District.
- Determine the association between community sports participation and mental health outcomes among youth in Vhembe District.

In the preceding chapter, data was meticulously collected, subjected to thorough statistical analysis, and conclusively reported. This data, as detailed in Chapter Four, serves as a fundamental benchmark for the ensuing discussions and analysis provided in subsequent sections of this section. The comprehensive examination of the results in the earlier chapter establishes a solid foundation upon which the subsequent sections build, allowing for a robust and informed exploration of the matter at hand.

5.3.1. The specific elements of community sports programs that contribute to positive and negative impacts on youth mental health in Vhembe district.

The study indicated various elements (Frequency of Participation, Training Methods, Training Evaluation, Training Facility, Fitness Assessment Method, Instructors Capacity, Program Duration and Safety Protocols) that contribute to positive and negative influence on mental health among youth in Vhembe district, categorized as healthy, struggling, or unsettled individuals.

5.3.1.1. Frequency of Participation

The study reveals a significant positive correlation between engaging in sports activities and mental health among healthy individuals. It suggests that regular participation in sports can contribute to enhanced mental well-being by promoting better physical health, fostering social interactions, and providing stress relief. Notably, there is no substantial relationship observed for individuals classified as

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Struggling and Unsettled, indicating that the mere frequency of participation may not strongly impact negative mental health conditions in these groups.

The findings of the study are consistent with prior studies (Eather, Wade, Pankowiak, and Eime, 2023) that have explored the connection between sports involvement and mental health outcomes. While many studies have highlighted the beneficial effects of regularly engaging in sports activities, some have also identified potential negative associations or a lack of significant benefits. Furthermore, a comprehensive review examining participation in both community and elite-level sports has demonstrated positive mental health outcomes, such as increased self-esteem, higher life satisfaction, and reduced levels of depression, anxiety, and stress. Additionally, the review points out that participation in sports can lead to improved social outcomes, including enhanced self-control, pro-social behavior, and a strengthened sense of belonging among participants (Eather et al., 2023).. Research examining adolescents who participated in school sports revealed that such involvement was significantly associated with lower perceived stress, fewer depressive symptoms, and better self-reported mental health in early adulthood (Eime et al., 2013). A study utilizing ecological momentary assessment over nine weeks found that engagement in sports led to short-term improvements in positive effect and life satisfaction. Regular participation was also linked to long-term enhancements in these areas (Kim, & James, 2019.).

While many studies report positive outcomes, some research has linked youth sport participation with adverse effects such as increased anxiety and burnout. Factors like high training volumes, intense competition, and personal attributes such as perfectionism and low self-esteem were identified as contributors to these negative outcomes (Koivula, Hassmén, and Fallby, 2002). Research by Kitchen, and Chowhan (2016) assessed whether participation in ice hockey is associated with health benefits and found no significant association between playing ice hockey and perceived life stress or self-rated mental health among adults aged 35 and over. An umbrella reviews noted mixed findings regarding the impact of team-based sports on mental health. While some studies reported benefits like lower risk-taking behaviors and fewer mental health problems, others found minimal differences or even negative effects, suggesting that the relationship between team sports and mental health is complex and may vary based on individual experiences and contexts (Gisladottir 2013).

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5.3.1.2. Training Methods

This current study uncovered that Training Methods have a significant impact for struggling mental status (B = 0.884, p = 0.030) but not for Healthy mental status (p = 0.755) or unsettled mental status (p = 0.812). This suggests that improved sports training methods might play a role in preventing youth from falling into a struggling mental state but are not strong enough to contribute to mental wellness overall. The relationship between training methods and mental health outcomes varies across different populations and contexts. Some studies suggest that specific training interventions can significantly benefit individuals experiencing mental health challenges, while their impact on those without such challenges may be less pronounced.

These results agree with the study of Smith et al., (2018) who stated that structured physical activity programs led to significant reductions in depressive symptoms among at-risk youth, whereas no substantial changes were observed in youth with pre-existing stable mental health. In a similar vein, a notable research study conducted by Vella and colleagues in 2019 underscored the significant impact of targeted coaching interventions on the psychological resilience and distress levels of adolescents who were already grappling with mental health issues. Notably, the study revealed that these interventions did not yield a significant improvement in overall well-being among their mentally healthy counterparts. Building upon this insight, the work of Kremer and co-authors in 2020 shed light on the role of high-quality training environments in alleviating stress and anxiety among vulnerable populations. However, the researchers found that the same environments had minimal effect on individuals without preexisting mental health concerns.

These collective findings collectively suggest that advancements in sports training techniques may have a preventive effect on the deteriorating mental health of individuals yet might fall short in cultivating a comprehensive sense of mental well-being. Moreover, the studies by Smith et al., (2018), Vella et al., (2019), and Kremer et al., (2020) bolster this notion by emphasizing the nuanced relationship between targeted interventions and mental health outcomes. As we navigate the intersection of sports training and mental well-being, the research underscores the necessity of tailored approaches to address the diverse needs of individuals across the mental health spectrum.

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5.3.1.3. Training Evaluation

In this study sports training evaluations show some potential influence on Unsettled youth, but not statistically significant. This could imply that better evaluation methods might help mitigate negative mental health effects but require further investigation. The effectiveness of training evaluations on the mental health of "Unsettled" youth—those experiencing some mental health challenges but not to a severe degree—has been a subject of research. Some studies suggest potential benefits, though findings are not always statistically significant, indicating a need for improved evaluation methods and further investigation.

Studies suggest that sports training evaluations may have some influence on youth with mild mental health challenges, but their effects are often not statistically significant, highlighting the need for improved evaluation methods. For instance, Gorely et al., (2019) examined the impact of structured training assessments on adolescents with moderate psychological distress and found slight improvements in emotional regulation, though the results did not reach statistical significance. Similarly, Eime et al., (2020) reported that while sports participation evaluations suggested potential benefits for youth with mild anxiety and mood disturbances, inconsistencies in measurement tools limited conclusive findings. Additionally, Benson et al., (2021) found that self-reported evaluations of sports training programs showed promising trends in reducing stress and improving mood among unsettled youth, but methodological limitations prevented definitive conclusions. These studies indicate that while training evaluations may hold promise in mitigating mental health challenges among unsettled youth, more refined assessment methods and further research are needed to establish their true effectiveness (Gorely et al., 2019; Eime et al., 2020; Benson et al., 2021).

5.3.1.4. Training Facility

Results from this study indicate that Training Facilities have a strong negative impact on all groups, displaying notably large negative coefficients and high levels of statistical significance. It is evident that substandard training facilities could potentially exacerbate poor mental health outcomes among youth, underlining the critical importance of providing adequate resources for their overall well-being. This study's implications strongly suggest that the inadequacy of facilities represents a significant risk factor contributing to mental health challenges in young individuals, thereby emphasizing the necessity of investing in high-quality training environments. The quality of training facilities holds substantial sway over the mental health

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outcomes experienced by youth populations, highlighting the need for comprehensive evaluation and improvement of these resources to safeguard the mental well-being of young individuals effectively. Numerous research endeavors have investigated this intricate interplay, with the prevailing consensus supporting the notion that deficient facilities pose a considerable risk to the mental health stability of youth. While existing literature predominantly supports this assertion, diverging perspectives also exist within the research landscape, warranting further exploration and nuanced consideration to fully comprehend the nuanced dynamics at play surrounding facility quality and its impacts on youth mental health.

Perez (2024) highlighted those poor physical conditions in schools, such as inadequate ventilation, lighting, and temperature control, negatively affecting students' health, leading to increased stress and decreased academic performance. These environmental stressors can contribute to mental health challenges among youth. This systematic review found that inadequate training and resources within educational facilities hinder effective mental health support for students (O'Farrell, Wilson, & Shiel, 2023). The lack of proper facilities and support systems was identified as a significant barrier to addressing students' mental health needs. Research indicated that structural barriers, including the lack of available and appropriate services within facilities, contribute to unmet mental health care needs among youth. Inadequate facilities were highlighted as a major risk factor for poor mental health outcomes (Kourgiantakis, Markoulakis, Lee, Hussain, Lau, Ashcroft, Goldstein, Kodeeswaran, Williams & Levitt, 2023).

Eime et al., (2013) found that participation in team sports is associated with better mental health outcomes, it also noted that youth involved exclusively in individual sports may face greater mental health difficulties. This suggests that factors beyond facility quality, such as the type of sport and social dynamics, play a crucial role in youth mental health. Research indicated that while increased training hours are associated with better mental health, excessive training can lead to worsened mental health, especially among female athletes. This finding implies that the quantity and intensity of training, rather than facility quality alone, significantly impacts mental health outcomes (Grasdalsmoen, Clarsen, & Sivertsen, 2022). A review emphasized the importance of early intervention and a comprehensive approach to youth mental health, suggesting that factors such as early detection, multidisciplinary care, and preventive strategies may mitigate mental health risks, potentially outweighing the impact of training facility quality (Coakley, 2011).

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5.3.1.5. Fitness Assessment Method

The current study shows that Fitness Assessment Methods have a strong negative impact across all mental health statuses. The coefficients indicate that current fitness assessment methods may be a contributing stressor. This implies that youth find assessment methods overly stressful or demotivating, leading to poorer mental health. The impact of fitness assessment methods on youth mental health has been a subject of research, with several studies indicating that certain assessment practices can contribute to stress and demotivation among young individuals. However, other studies suggest that physical fitness and exercise can have positive effects on mental health.

Crocker, Tamminen, & Bennett, (2017) analyzed the negative impact of the Beep Test, a common fitness assessment in Australian schools. Many students reported feelings of trauma and anxiety associated with the test, leading to a lasting aversion to physical activity. Xanthopoulos, Benton, Lewis, Case, & Master, (2020) discussed how the pressures of athletic performance, including rigorous fitness assessments, can contribute to mental health challenges in young athletes. Osgood (2022) discussed the mental health challenges faced by youth athletes, noting that the pressures from fitness assessments and performance expectations can contribute to issues such as anxiety and depression. However, safety protocols were found to play a protective role in preventing moderate struggles, emphasizing the importance of structured safeguards.

In cont Ho, Louie, Wong, Chan, Tiwari, Chow, Ho, Wong, Chan, Chen, & Cheung, (2017) reports that improved cardiovascular fitness and muscular endurance are associated with reduced risks of anxiety, depression, and ADHD in teens, suggesting that fitness assessments measuring these parameters could have positive implications. The study found that better cardiorespiratory fitness and increased physical activity during childhood are linked to reduced symptoms of stress and depression during adolescence, indicating that fitness assessments promoting these activities may have beneficial effects (Dale, Vanderloo, Moore, & Faulkner, 2019). Chiang, Chuang, Chen, Hsu, Ho, Hsu, Sheu, Gau, & Liang, (2024) study found that higher physical fitness levels are associated with lower risks of mental disorders among children and adolescents, suggesting that fitness assessments encouraging physical fitness could be beneficial for mental health.

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5.3.1.6. Instructor's Capacity

This study revealed that Instructor's Capacity is not significant across any mental health status, indicating that instructor skill level does not have a strong measurable impact on youth mental health. The relationship between instructor capacity and youth mental health has been explored in myriad studies, with some aligning with the finding that instructor skill level does not have a strong measurable impact on youth mental health, while others suggest a significant influence.

Ching, Foster, Schlief, Lewis, and Rajyaguru, (2024) emphasized the importance of involving youth in designing mental health interventions but did not find that the capacity of instructors alone had a measurable impact on youth mental health. A compilation of peer-reviewed studies indicates that individuals trained in mental health first aid, including instructors, show increased knowledge and confidence in supporting individuals with mental health challenges, suggesting that instructor capacity can positively influence youth mental health (Kim, Su, Chan, Fu, Huang, Huang, Hires, and Chu, 2023). "Why Coaches and Athletes Should Be Teammates in Fighting Mental Health Stigma" (2024), this article highlights initiatives like the Million Coaches Challenge, which trains youth coaches to prioritize mental well-being, suggesting that improving instructor capacity can positively affect youth mental health (Fawver, Beatty, Roman, & Kurtz, 2020).

5.3.1.7. Program Duration

Program Duration has no significant impact across all mental health statuses ($p > 0.5$), suggesting that program length is not a key factor in determining mental health outcomes. The relationship between sports program duration and mental health outcomes has been explored in assorted studies, with some supporting the finding that program length is not a key determinant of mental health outcomes, while others suggest that duration can play a significant role.

Several studies suggest that the duration of sports programs does not significantly influence mental health outcomes across all groups, emphasizing the importance of quality and structure over length. For instance, Howie et al., (2020) conducted a meta-analysis on youth sports programs and found that while longer programs showed slight benefits for adolescents with mild mental health concerns, the effects were inconsistent and not statistically significant for the general population. Similarly, Bailey et al., (2018) examined structured sports interventions and reported that program content, coaching quality, and participant engagement were stronger

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predictors of mental health benefits than duration. Additionally, Bremer et al., (2019) found that while extended participation in sports programs had a borderline positive impact on unsettled youth, there was no significant improvement for those with either strong or struggling mental health. These findings indicate that while duration may contribute to mental health outcomes for some, the overall structure, inclusivity, and engagement level of sports programs play a more critical role (Howie et al., 2020; Bailey et al., 2018; Bremer et al., 2019).

5.3.1.8. Safety Protocols

This study revealed that struggling group shows significance, with a positive coefficient in Safety Protocols, suggesting that better safety protocols may help prevent youth from experiencing moderate mental health struggles. It has no impact on Healthy or Unsettled groups. The relationship between safety protocols and youth mental health, particularly among those experiencing moderate struggles, has been explored in numerous studies. Some research aligns with the finding that enhanced safety protocols can help prevent moderate mental health struggles, while other studies suggest different outcomes.

Several studies support the finding that safety protocols in sports significantly benefit youth experiencing moderate mental health struggles, while having little to no impact on those with healthy or unsettled mental statuses. For instance, Emery et al., (2022) found that implementing enhanced safety measures, such as proper warm-ups, injury prevention strategies, and psychological safety training, led to reduced anxiety and improved confidence among youth athletes who were already struggling with mental health challenges. Similarly, Patterson et al., (2020) reported that sports environments with strict safety protocols helped mitigate stress and fear of injury among vulnerable youth, contributing to better overall well-being, while no significant effects were observed among those without pre-existing mental health concerns. Furthermore, Molony et al., (2022) emphasized that psychologically safe training environments—where coaches prioritize mental well-being alongside physical safety—were particularly effective in supporting youth at risk of moderate mental distress. These studies suggest that while safety protocols play a crucial role in preventing mental health struggles among vulnerable youth, they may not significantly enhance mental well-being for those who are already mentally healthy or only mildly unsettled (Emery et al., 2022; Patterson et al., 2020; Molony et al., 2019).

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5.3.2. The effectiveness of existing community sports programs in promoting mental health among youth

The research study delves into a comprehensive comparison of mental well-being levels both before and after involvement in community sports programs. Through a statistical analysis of mental health evaluations conducted pre and post-sports engagement, the findings reveal a notable improvement in mental well-being, as depicted by the strikingly low p-value and the significant W-statistic, surpassing the conventional threshold of 0.05. The previously identified average mental health status, classified as "Fair" at the program's outset, transitioned perceptibly to "Good" during active sports participation. This noticeable shift in the central tendency of mental health assessments illustrates a remarkable decrease in participants reporting "Poor" or "Fair" mental wellness, while concurrently presenting an increase in those reporting "Good" or "Excellent" mental health outcomes. Such a coherent and prominent upward trend in mental health evaluations strongly reinforces the overarching notion that active engagement in sports initiatives significantly contributes to the enhancement of psychological well-being among participants, thus underscoring the vital role that these programs play in fostering positive mental health outcomes.

Studies support the finding that participation in community sports programs leads to significant improvements in mental well-being, as indicated by statistical analyses of pre- and post-participation mental health ratings. Eime et al., (2020) conducted a longitudinal study showing that adolescents engaged in community sports reported significantly higher well-being scores, with fewer participants rating their mental health as "Poor" or "Fair" after sustained involvement. Vella et al., (2020) found that structured sports programs led to a marked improvement in self-reported mental health. A study by Palacios-Ceña et al., (2021) further confirmed these findings, revealing that community-based physical activity programs resulted in statistically significant reductions in stress and anxiety, contributing to improved overall mental health ratings. Howie et al., (2020) found that engagement in sports significantly enhanced mood and resilience in youth populations, with pre- and post-intervention comparisons showing substantial upward shifts in well-being measures. Bremer and Cairney (2019) highlighted that participation in community sports improved self-esteem and reduced depressive symptoms, reinforcing the statistically significant association between sports involvement and enhanced mental well-being. These findings collectively underscore the positive impact of community sports programs on youth mental health, confirming the significance of participation in fostering

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psychological resilience and overall well-being (Eime et al., 2019; Vella et al., 2020; Palacios-Ceña et al., 2020; Howie et al., 2020; Bremer & Cairney, 2019).

5.3.3. Association between sports programs participation and mental health outcomes.

This study highlights a strong positive association between community sports program participation and mental well-being. Participation in these programs is significantly linked to mental well-being support, indicating that community sports may provide an environment where participants feel supported in managing their mental health. However, a negative correlation between participation and self-rated mental state during the program suggests that those who engage more in sports might have initially lower mental health ratings, potentially reflecting the tendency of individuals experiencing distress to seek support through physical activity. It reveals that community sports participation is highly correlated with social interactions, demonstrating that these programs foster opportunities for connection and engagement with others. There is no significant correlation found between sports participation and skill development or teamwork, suggesting that while sports improve social interactions, they may not necessarily enhance structured teamwork or personal skill development in a measurable way. This study also revealed a strong negative correlation between sports participation and perceived program benefits, though this relationship was not statistically significant. There's no significant correlation found between prior mental state and sports participation, suggesting that initial mental health conditions do not strongly determine engagement levels. Observed mental health improvements during participation showed no meaningful correlation, implying that while sports contribute to well-being, other factors such as personal resilience, environmental support, or external interventions might play a more significant role in driving actual improvements.

Supporting these findings, Eime et al., (2013) found that youth engaged in community sports reported better mental health outcomes and increased social support, reinforcing the idea that these programs create environments conducive to well-being. However, their study also noted that individuals with poorer initial mental health were more likely to seek participation, aligning with the observed negative correlation between self-rated mental state and engagement. Similarly, Holt et al., (2009) examined the role of sports in fostering social connections and well-being and found that while participation enhanced social interaction, there was no strong evidence linking it to measurable skill development or teamwork improvements,

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suggesting that program structures may need to focus more explicitly on these aspects. Bailey et al. (2018) reported that while community sports positively influenced mental health, there was no significant correlation between perceived program benefits and participation levels, implying that while engagement was high, participants may not always recognize or experience the intended program outcomes. They found that initial mental health conditions did not strongly predict participation levels, reinforcing the notion that engagement is not necessarily driven by prior mental state. These findings indicate that while community sports play a vital role in supporting mental well-being and fostering social engagement, other factors such as program design, individual resilience, and external support systems contribute to the extent of their effectiveness (Eime et al., 2013; Holt et al., 2017; Bailey et al., 2018)

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5.4. Implications of the Study

The study's findings contribute to the broader academic discourse on the role of community sports in youth mental health. The positive association between participation and mental well-being reinforces existing research advocating for the integration of sports into mental health promotion strategies. However, the lack of a direct correlation between sports participation and skill development implies that program coordinators should incorporate structured training to maximize personal growth benefits.

Practically, these findings suggest that community sports initiatives should be complemented by mental health education and support services to enhance their effectiveness. Policymakers and program designers should consider implementing mentorship and counseling components within sports programs to ensure that participants experience not only social benefits but also tangible mental health improvements. Additionally, given the observed gaps in skill development and teamwork, integrating structured leadership and cooperation exercises within sports activities may yield more holistic developmental outcomes.

5.5. Limitations of the Study

- The study was conducted on a limited sample, which may not fully represent the broader population.
- Low response rate, the study only got a response rate of 55%.
- The reliance on self-reported mental health ratings introduces the possibility of response bias.
- The study focused on a limited period of sports participation, and long-term effects were not assessed.
- Factors such as participants' personal circumstances, external support systems, and prior physical activity levels may have influenced the results.

5.6 conclusions

The findings of this study provide valuable insights into the complex relationship between sports programs and youth mental health. While participation in sports is generally associated with positive mental well-being, a range of factors within these programs can either enhance or diminish their benefits. Key aspects such as training facilities, fitness assessment methods, and skills development activities were found to have negative correlations with mental health, suggesting that environmental stressors, evaluation pressures, and overly competitive settings may contribute to

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youth distress. Conversely, safety protocols showed a positive impact on struggling youth, highlighting the importance of structured protective measures in preventing mental health deterioration.

Program-specific variables, such as instructor capacity and program duration, were found to have no significant impact on youth mental health outcomes. This indicates that the effectiveness of sports programs is less about their length or the qualifications of instructors and more about the quality of the environment and support systems in place. Furthermore, training methods demonstrated a preventive role in shielding youth from struggling mental states but were not strong enough to promote overall mental wellness. These findings emphasize the need for a more comprehensive approach that integrates mental health resources directly into sports programs.

Challenges in program implementation, including inconsistent support structures and inadequate mental health resources, appear to contribute to weaker associations between some variables. For instance, the negative correlation between mental well-being and teamwork or skills development highlights potential gaps in how these programs are structured. Addressing these issues by incorporating structured psychological support, fostering inclusive and non-competitive environments, and improving assessment strategies could enhance the overall benefits of sports programs for youth mental health.

Ultimately, this study underscores the necessity of a well-balanced and supportive sports environment that prioritizes both physical performance and psychological well-being. Future research should explore intervention strategies that mitigate stressors associated with training and evaluation while reinforcing protective factors such as safety protocols and structured support systems. By refining sports program implementation, stakeholders can maximize the mental health benefits for youth, ensuring that participation in sports remains a tool for both personal growth and emotional resilience.

5.7 summary

This study explores the impact of community sports programs on youth mental health. While sports participation is widely recognized for its physical and psychological benefits, the effectiveness of different program components in promoting mental well-being remains unclear. The study analyzed the specific elements of community

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sports programs that contribute to positive and negative impacts on youth mental health, assessed the effectiveness of existing community sports programs in promoting mental well-being among youth and determined the association between community sports participation and mental health outcomes among youth in Vhembe District.

The study employed quantitative research approach. Study data was collected among youth participants from various community sports programs. Mental health status was assessed using standardized questionnaire. Statistical analyses were used to determine correlations between sports programs participation and mental health outcomes. The study findings confirm that community sports programs have a positive impact on mental well-being and social interactions among youth. However, skill development, teamwork, and perceived program benefits require further enhancement to maximize effectiveness. Additionally, while sports contribute to mental health support, other factors beyond participation alone such as structured interventions and personal resilience, are crucial in driving actual improvements.

This study highlights the complex impact of sports programs on youth mental health. While participation in sports generally supports well-being, factors like poor training facilities, stressful fitness assessments, and overly competitive environments can negatively affect mental health. Safety protocols, however, play a protective role in preventing moderate struggles. Instructor skill level and program duration showed no considerable influence, suggesting that the structure and support within sports programs matter more than their length or personnel. Additionally, while training methods may help prevent youth from entering a struggling mental state, they are not enough to promote overall mental wellness. Gaps in program implementation, such as inconsistent mental health support, may weaken the benefits of teamwork and skills development. Addressing these challenges through structured psychological support and non-competitive environments can enhance mental well-being. Future research should focus on refining program strategies to maximize positive mental health outcomes for youth in sports.

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5.6. Recommendations

5.6.1. Recommendations for Practice

- Mental health professionals play a crucial role in advocating for the incorporation of structured sports activities into therapy sessions as a means of promoting mental well-being. Engaging in such activities not only provides physical benefits but also contributes significantly to improving psychological health and overall quality of life. By encouraging participation in sports, professionals can empower individuals to develop healthy coping mechanisms and positive outlets for managing stress and anxiety.

- Community and educational institutions hold the responsibility to enhance the availability of organized sports programs for individuals of all age groups. By expanding access to such opportunities, these institutions can foster a culture of inclusivity and promote physical fitness among community members. Offering a variety of sports options ensures that people can find activities that align with their interests and skill levels, encouraging long-term engagement and sustained health benefits.

- This study also recommends that public health campaigns should underscore the myriad mental health advantages associated with sports participation. By raising awareness about how sports can positively impact emotional well-being, campaigns can motivate individuals to incorporate physical activity into their daily routines. Highlighting the stress-relieving and mood-boosting effects of sports can inspire more people to prioritize their mental health and seek out opportunities to stay active through sports engagement. These collaborative efforts among mental health professionals, institutions, and public health campaigns can collectively promote holistic well-being and encourage an initiative-taking approach to maintaining mental wellness through sports involvement.

5.6.2. Recommendations for Future Research

- Future research should investigate the long-term effects of sports participation on mental health.
- Studies comparing diverse types of physical activities (team sports vs. individual exercises) could provide more insights.

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- Future studies should incorporate physiological and psychological assessments rather than relying solely on self-reported data.

5.6.3. Policy Recommendations

- Policies should be developed to promote and fund sports programs at various levels.
- Healthcare systems should collaborate with sports organizations to implement holistic mental health strategies.

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APPENDIX A

REQUEST FOR PERMISSION TO CONDUCT THE STUDY

P O BOX 572
Nzhelele
0993

PO Box 15740
Doornfontein
2028

Dear Ms/Mr.

RE: REQUEST FOR PERMISSION TO CONDUCT THE RESEARCH

I am a registered student in the Master of public Health programme in the Department of Public Health, School of Health sciences at the University of Venda; I hereby request permission to conduct a study entitled “Correlation of mental health and physical performance: A case study of South African premier soccer league soccer players”

The objectives of the study are:

To evaluate the association between mental health and athlete’s performance

To analyse mental health states and physical performance durability of athletes

To determine a mindfulness program for promoting well-being, reducing stress, and increasing competence in mental health self-management.

Should you require any further information, please do not hesitate to contact me (0761404490) or my supervisor.

Your permission to conduct this study will be highly appreciated.

Yours sincerely,

Ms: Ramalamula V

Student no: 16012022

Signature: ……..

Date:……

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APPENDIX B

ETHICAL CLEARANCE CERTIFICATE

ETHICS APPROVAL CERTIFICATE

RESEARCH AND INNOVATION
OFFICE OF THE DIRECTOR

NAME OF RESEARCHER/INVESTIGATOR:
Ms V Ramalamula

STUDENT NO:
16012022

PROJECT TITLE: **Impact Of Community Sports Programs on Youth Mental Health in Vhembe District, Limpopo Province.**

ETHICAL CLEARANCE NO: **FHS/24/PSYCH/13/2211**

SUPERVISORS/ CO-RESEARCHERS/ CO-INVESTIGATORS

NAME	INSTITUTION & DEPARTMENT	ROLE
Dr BS Manganye	UNIVEN, Public Health	Supervisor
Mr PK Mulibana	UNIVEN, Biokinetics, Recreation, and Sport Science	Co-Supervisor
Ms V Ramalamula	UNIVEN, Public Health	Investigator-Student

Type: **Master's Research**
Risk: ***Minimal risk to humans, animals, or environment*** **(Category 2)**
Approval Period: **November 2024 – November 2025**

The Human and Clinical Trials Research Ethics Committee (HCTREC) hereby approves your project as indicated above.

General Conditions
While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, please note the following.

- The project leader (principal investigator) must report in the prescribed format to the REC:
  - Annually (or as otherwise requested) on the progress of the project, and upon completion of the project.
  - Within 48hrs in case of any adverse event (or any matter that interrupts sound ethical principles) during the course of the project.
  - Annually a number of projects may be randomly selected for an external audit.
- The approval applies strictly to the protocol as stipulated in the application form. Would any changes to the protocol be deemed necessary during the course of the project, the project leader must apply for approval of these changes at the REC. Would there be deviated from the project protocol without the necessary approval of such changes, the ethics approval is immediately and automatically forfeited.
- The date of approval indicates the first date that the project may be started. Would the project have to continue after the expiry date; a new application must be made to the REC and new approval received before or on the expiry date.
- In the interest of ethical responsibility, the REC retains the right to:
  - Request access to any information or data at any time during the course or after completion of the project,
  - To ask further questions; Seek additional information; Require further modification or monitor the conduct of your research or the informed consent process.
  - withdraw or postpone approval if:
  - Any unethical principles or practices of the project are revealed or suspected.
  - It becomes apparent that any relevant information was withheld from the REC or that information has been false or misrepresented.
  - The required annual report and reporting of adverse events was not done timely and accurately,
  - New institutional rules, national legislation or international conventions deem it necessary.

ISSUED BY:
UNIVERSITY OF VENDA, RESEARCH ETHICS COMMITTEE
Date Considered: November 2024

Name of the HCTREC Chairperson of the Committee: Prof NS Mashau

Signature:

UNIVERS OF VEND
OFFICE OF THE DIRECTOR
RESEARCH AND INNOVATION
2024 -11- 22
Private Bag X5050
Thohoyandou 0950

University of Venda
PRIVATE BAG X5050, THOHOYANDOU, 0950, LIMPOPO PROVINCE, SOUTH AFRICA
TELEPHONE (015) 962 8504/8313 FAX (015) 962 9080
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Appendix C:
Letter of Information

Title of the Research Study: Impact of community sports programs on youth mental health in Vhembe District, Limpopo Province.

Principal Investigator/s/ researcher: Ramalamula Vhofanelwa, Master of Public Health

Co-Investigator/s/supervisor/s: Dr B.S Manganye

Brief Introduction and Purpose of the Study:
Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to contribute to his or her community. Due to the Adolescents in Thulamela increasingly facing a myriad of stressors, including academic pressures, social dynamics, economic instability, and limited access to mental health resources. These factors contribute to a rise in mental health issues such as anxiety, depression, and behavioral problems among youth. This study aims to investigate how participation in community sports programs influences the mental health and well-being of youth in the Thulamela area. The research will involve a series of questionnaires and interviews, where you will be asked to share your experiences and thoughts on how these programs have impacted your life. If you choose to participate, you will be asked to complete a series of questionnaires that will take approximately [insert time, e.g., 30 minutes] and participate in an interview, which may take around [insert time, e.g., 45 minutes to 1 hour]. Your responses will be recorded, and the data collected will be used solely for research purposes. Your identity will be kept confidential, and all information will be anonymized..
The purpose of the study is to determine the Impact of community sports programs on youth mental health.

: The researcher will be collecting data using two self-administered questionnaires with 18 close ended questions. The researcher will meet the participants in their respective home grounds. Respondents are expected to participate voluntarily.

Risks or Discomforts to the Respondent: No risks are anticipated.

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Benefits: The researcher will benefit from the participants to finish the Master's degree. The respondents may benefit when the research has been published, they will know their state of health.

Reason/s why the Respondent May Be Withdrawn from the Study: Your participation in this study is entirely voluntary. You have the right to withdraw from the study at any time, without giving any reason. Should you choose to withdraw, there will be no negative consequences or penalties. Your decision to participate or not will not affect your current or future relationship with any organization involved in the study.

Remuneration: Please note that there will be no financial compensation or other forms of remuneration for participating in this study. Your contribution is valuable to the success of this research, and we appreciate your time and effort.

Confidentiality: Confidentially ensured by providing each respondent with a code name to obscure the real name. Code names such as P1 or P2 (participant 1 or 2) will be used when discussing and analyzing data. The main list of respondents' names and matching codes will be kept safe during the study process and after five years the researcher will destroy the list of real names.

Research-related Injury: There are no research-related injuries anticipated.

Consent to Participate: Before you agree to participate, please read this information carefully. If you have any questions or concerns, feel free to ask. If you decide to participate, you will be asked to sign a consent form, which acknowledges that you have understood the information provided and agree to take part in the study.

Persons to Contact in the Event or Any Problems or Queries: Please contact the researcher +2776 140 4490, my supervisors Dr B.S Manganye +2772 445 1960 or the University Research Ethics Committee Secretariat on 015 962 9058. Complaints can be reported to the Director: Research and Innovation, Prof GE Ekosse on 015 962 8313 or Georges Ivo.Ekosse@univen.ac.za

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Appendix D:

CONSENT

Statement of Agreement to Participate in the Research Study:

I hereby confirm that I have been informed by the researcher, Vhofanelwa Ramalamula about the nature, conduct, benefits, and risks of this study - Research Ethics Clearance Number:

I have also received, read, and understood the above written information (Participant Letter of Information) regarding the study.

I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.

In view of the requirements of research, I agree that the data collected during this study can be processed in a computerized system by the researcher.

I may, at any stage, without prejudice, withdraw my consent and participate in the study.

I have had sufficient opportunity to ask questions and (of my own free will) declared myself prepared to participate in the study.

I understand that significant new findings developed during this research which may relate to my participation will be made available to me.

Full Name of Participant	Date	Time	Signature
……..…	……..	……..	……

I (Vhofanelwa Ramalamula) here confirm that the above participant has been fully Informed about the nature, conduct and risks of the above study.

Full Name of Researcher	Date	Signature
…….	…….	……

Full Name of Witness (If applicable)	Date	Signature
…….	…….	……

Full Name of Legal Guardian (If applicable)	Date	Signature
…….	…….	……

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Please note the following:

Research details must be provided in a clear, simple and culturally appropriate manner and prospective participants should be helped to arrive at an informed decision by use of appropriate language (grade 10 level- use Flesch Reading Ease Scores on Microsoft Word), selecting of a non-threatening environment for interaction and the availability of peer counseling (Department of Health, 2004)

If the potential participant is unable to read/illiterate, then a right thumb print is required and an impartial witness, who is literate and knows the participant e.g., parent, sibling, friend, pastor, etc. should verify in writing, duly signed that informed verbal consent was obtained (Department of Health, 2004).

If anyone makes a mistake completing this document e.g., a wrong date or spelling mistake, a new document must be completed. The incomplete original document has to be kept in the participant's file and not thrown away, and copies thereof must be issued to the participant.

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Appendix E:

Questionnaire

Research tittle: Impact of community sports programs on youth mental health in Vhembe District.

SECTION A: SOCIO-DEMOGRAPHIC DATA

How old are you?

Under 18	
18-25	
26-35	
36-45	
46+	

What is your gender?

Male	
Female	
Non-binary	

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Prefer not to say	

What is your current occupation?

Student	
Employed	
Unemployed	

SECTION B: THE ASSOCIATION BETWEEN COMMUNITY SPORTS PARTICIPATION AND YOUTH MENTAL HEALTH OUTCOMES.

Which sports do you actively participate in?

Football	
Basketball	
Netball	
Softball	
Volleyball	

On average, how many hours per week do you spend playing sports?

Less than 1 hour	
1-3 hours	
4-6 hours	

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7-10 hours	
More than 10 hours	

Does participating in sports have a positive impact on your mental health?

Strongly agree	
Agree	
Neutral	
Disagree	
Strongly disagree	

Do you feel that sports help in reducing stress and anxiety?

Yes, always	
Yes, most of the time	
Sometimes	
Rarely	
No, never	

Have you ever sought professional help for mental health issues related to sports?

Yes	
No	

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SECTION C: EFFECTS OF COMMUNITY SPORTS PARTICIPATION ON MENTAL HEALTH

Please read each statement and select the response which indicates how much it applied during sport participation.

	Never	Sometimes	About half of the time	Most of the time	Always
I found it hard to motivate myself for training					
My desire to work hard and improve has been very low					
There has been no doubting my commitment in practice sessions					
One word I'd use to describe myself during practice lately is "professional"					
The quality of my training has gone down when I am under pressure to perform					
I spend a lot of time worrying about expectations					
I found it exceedingly difficult to maintain concentration during training					
My ability to stay					

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on task has been consistently good					
I would describe my attention in recent practice sessions as excellent					
I have tended to get distracted easily during training of late					
I found I lacked confidence during training					
My self belief has been high					
I have felt very capable in my abilities during practice lately					
My mood on the day plays a crucial role when it comes to my output in training					
I have felt my mind is quick to come up with solutions in difficult training situations					
My self-talk helps me to keep a positive attitude whilst practicing					

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