The Influence of the Construction of Sports Tourism Towns on the Psychological Status of Local Residents

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Abstract

Understand the mental health status of residents aged 15 and above in a sports tourism town, the research aimed was to check the influence of the construction of sports tourism towns on the psychological status of local residents. For this purpose, a multistage random sampling method was used to conduct a questionnaire survey on the mental health status of 3295 local residents, and the data were processed and analysed using SPSS 19.0 software. Of the 3295 residents surveyed, 410 had poor mental health, accounting for 12.44% of the total number of people surveyed. The total score of SCL-90 of residents in local provinces is lower than the national norm (t=14.647, P=0.000), and the scores of various factors of SCL-90 of residents in local provinces are significantly higher than the national norm (P=0.000). The correlation analysis results showed that the total score of happiness was negatively correlated with the total score of SCL-90 (r=1.883, P<0.01), and the psychological awareness and hygiene score was also negatively correlated with the total score of SCL-90 (r=0.598, P<0.01). The results of multiple linear regression analysis showed that the factors that entered the regression equation included total happiness score, marital status, family life, satisfaction with the environment, whether life was monotonous, personality, participation in gatherings, and whether the three generations of the family had mental illness, according to the size of the standard regression coefficient, the most influential factor is the total score of happiness(β= 0.426), followed by marital status(β= 0.097).The mental health status of residents in the local province is not optimistic, the total score of happiness, marital status, family life, satisfaction with the environment, whether life is monotonous, and personality have varying degrees of impact on residents' mental health. Necessary intervention measures should be taken to improve their mental health based on their influencing factors. The research could help to application of targeted interventions and community-based programs to enhance the mental well-being of local residents in sports tourism towns, fostering sustainable development and social harmony. The research limitations and future directions were also discussed.

Keywords: Mental Health; Sports Tourism; Symptom Checklist; Tourist Residents.

Introduction

Tourism is a competitive and comprehensive industry, which has a lot of related driving effects (Kumar & Shekhar, 2020). The flow of tourists has directly driven the development of the transportation industry and increased the income of the transportation industry (Ghalehkhondabi et al., 2019; Konan & Kim, 2003). At the same time, the improvement of the service quality of transportation and the improvement of the traffic speed will inevitably require the construction of more and better highways, which in turn has led to the development of the highway construction industry. Due to the development of tourism and the increase of tourists, people will inevitably provide a good consumer group for the development of the hotel industry, so the number of hotels needs to be increased, and the hotel industry and construction industry will get better development. Tourism also has an indirect impact on the development of industrial production (Ennew, 2003; Vellas, 2011). Because it stimulates and satisfies the tourism economy, that is, the production of industrial products that meet the needs of domestic and foreign tourists. This does not refer only to the production of durable consumer goods, but also to the production of consumer goods. Tourists' demand for these consumer goods is not only in terms of quantity, but more importantly, they require the upgrading of consumer goods, and the specifications of consumer goods are high. Therefore, industrial production enterprises must improve production technology to produce higher quality products that are more suitable for tourism consumers, thus improving the level of industrial production (Pencarelli, 2020; Tsai, Song, & Wong, 2009). Since the development of related industries, of course, more people will be employed, which will inevitably have a great impact on employment and ease the pressure on employment. Tourism not only has the characteristics of large demand for labour, but also has the characteristics of wide employment areas and low employment costs (Purcell, 2005). Especially tourism transportation, tourism catering, tourism commodities,

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tourist attractions and other industries. In order to implement the Guiding Opinions of the General Office of the State Council on Accelerating the Development of the Fitness and Leisure Industry and the Opinions of the General Office of the State Council on Further Expanding Consumption in the Fields of Tourism, Culture, Sports, Health, Elderly Care, Education and Training, the deep integration of sports and tourism has formed a new industrial form - sports tourism. At the same time, on December 22, 2016, the National Tourism Administration and the General Administration of Sport of the People's Republic of China issued the latest guidance on vigorously developing sports tourism, further seizing the opportunity to build China's tourism industry system and brand to meet the diverse needs of the people for fitness and tourism and leisure. In order to seek development, the total number of sports tourism personnel will reach 1 billion by 2020, and the total consumption of sports tourism will exceed 1 trillion yuan. Through a series of economic activities that focus on sports, take on-site watching, participating in experiences, and sightseeing as the main forms, and provide related products and services to the public for the purpose of satisfying health, entertainment, tourism, and leisure, involving fitness and leisure, competition performances, equipment manufacturing, and facility construction. Further strengthen new sports tourism products such as ice and snow sports, mountain outdoor sports, and water sports, improve China's industrial system, and enhance the internationalization level of sports tourism (Mirehie & Cho, 2022). Currently, in the development process of sports tourism, issues such as a single product structure, decentralized distribution, incomplete promotion channels, and lagging infrastructure construction are more prominent (Figure 1).

The National Tourism Administration has positioned the tourism theme for 2001 as "China Sports Fitness Tour, " while the market's demand for sports tourism is increasing, there are prominent contradictions in the imperfect sports tourism system, urgent reflection on existing problems and strengthening the demand analysis of tourists are more conducive to the development of the market and industry. At present, the development of domestic tourism has gradually shifted from viewing to experiencing, under the dual effects of external product driving forces and internal psychological consumption habits, what is the demand for sports tourism and what is needed? These have had a direct impact on the development of various types of sports tourism, providing a direct kinetic energy supply for the sports tourism industry. A characteristic town is a comprehensive development project that relies on a certain characteristic industry and characteristic environmental factors to create a clear industrial positioning, cultural connotation, tourism characteristics, and community functions; it is a new urbanization model that integrates tourism scenic spots, consumer industry cluster areas, and new urbanization development areas. The construction of characteristic towns is a new trend in rural development driven by national policies, an inevitable result of the adjustment and development of rural industries, and a product of the development of the times, it is of great significance for improving the development of cities and towns, improving the quality of life of the people, excavating advantageous resources, developing and expanding characteristic industries, and coordinating urban and rural development (Mourão, Ribeiro, & Cunha de Almeida, 2022).

Figure 1. Construction Mode of Sports Tourism Town.

The previous discussion signifies with the following objective Influence of the Construction of Sports Tourism Towns on the Psychological Status of Local Residents in the context of China" which lies in its examination of the interplay between the development of sports tourism towns and the psychological well-being of the local residents. While sports tourism has gained prominence as an economic driver in China, there remains a paucity of comprehensive studies investigating its impact on the mental health and overall psychological status of the

people living in these towns. This research seeks to fill this gap by exploring the potential effects of infrastructural changes, influx of tourists, and changing socio-cultural dynamics on the psychological resilience, sense of community, and overall life satisfaction among the local residents. By shedding light on this understudied aspect, the findings of this research can inform policy decisions and sustainable development strategies that prioritize the well-being of the residents in sports tourism towns in China. The research was divided into five chapters, introduction, literature review, research methodology, data analysis, discussion and conclusion.

Literature Review

The attraction of tourist destination is reflected in its unique natural landscape and cultural landscape, because these landscape environments are different from the tourists' usual living environment, so they arouse their interest and promote tourism behaviour. By visiting tourist places, tourists can experience experiences or stimuli that cannot be obtained in their usual living environment, and can be cultivated and improved in physical and mental, knowledge and other aspects (Zhang & Xu, 2020). Destination residents are in a specific cultural environment, any cultural form must have its space and time boundaries, space marks its region, and time marks its history. With the continuous accumulation of time and the continuous continuation of space, the local cultural environment is formed. Before the tourist destination becomes a tourist destination, the psychological status of residents in the tourist destination area is a relatively stable self-circulation structure. The common social mentality, cultural traditions, folk customs, familiar languages and fashionable pursuits among residents -- the social groups in the regional space have reached a relatively harmonious and stable state in the long-term running-in and integration, so that the psychological stability and order of residents are maintained. Therefore, the tourist destination is a closed and self-circulating field before no tourists enter. In this particular field, due to the lack of the intervention of heterogeneous cultural information, residents' social cognition rarely changes dramatically and their psychological fluctuations are small. Therefore, residents' behaviour changes relatively slowly, which is reflected in the lasting maintenance of their social and cultural significance symbol system such as diet, living style, clothing, traditional craft and lifestyle (Wang, Liu, & Qi, 2014). It changes slowly and steadily over time. When tourists break the closed social and cultural atmosphere of the local area and enter the tourist place with a large

amount of heterogeneous cultural information, they come into contact with the original stable social and cultural environment of the destination and the connection point of contact falls between tourists and residents of the destination. When tourists engage in activities (eating, living, traveling, touring, shopping and entertainment) in the tourist destination, they themselves convey a variety of external information to the tourist destination, thus forming a new cognitive schema field in the tourist destination, such as the cultural field composed of tourists' language, clothing, consumption mode and diet. Since each field is semi-autonomous and has its own action subject and behaviour logic, and each field is interrelated and interacts with each other, the new cognitive diagram field exchanges energy with the existing social and cultural environment field of destination residents, and this energy exchange gradually changes the psychology and behaviour mode of local residents. In the process of tourism, tourists inevitably have direct or indirect contact with local residents, which enable the residents of the tourist destination as the main body to directly observe and understand others, form their own psychological judgment, and evaluate the value of the information they have received. The objects of cognition include individual tourists, groups and various behaviours shown by tourists in tourist places, as well as cognitive subjects themselves. At this stage, the residents of the tourist destination recognize the individual, group and related behaviours of tourists, and conduct self-examination and evaluation at the same time. Tourists in the mountain only make a short stay in the tourist destination, in the process of local residents can only show the tourists the surface For example, superficial cognition of verbal expressions such as speech or non-verbal expressions such as eyes is difficult to judge many intrinsic characteristics of tourists, such as motivation and emotion, so as to form a complete impression. Through the evaluation process, the local residents have the psychology of identification or resistance to the tourist activities, which originates from their evaluation of their own traditional cultural value. The value expressed by its own traditional culture refers to the degree to which its traditional cultural model satisfies the real life needs of the group. Generally speaking, those groups that can still maintain the characteristics of their own traditional cultural style under the impact of contemporary heterogeneous culture have a strong sense of identity with their own traditional culture formed in history, and this sense of identity is largely based on the needs of their own traditional culture for their real life. The more a cultural model can meet the needs of the real life of the group, the more vitality it will have. The smaller the

impact of heterogeneous culture on the psychology of the destination residents, and the residents will have a psychological resistance to it. On the contrary, due to the heterogeneous culture brought by tourism, the destination residents believe that the traditional cultural model cannot fully meet the needs of real life, and the destination residents' sense of identity to this "traditional culture" will be relatively weak. Under the impact of the dominant heterogeneous culture, people will imitate this new culture too much, thus producing the identity psychology of the destination residents. However, this spontaneous psychological choice of destination residents does not mean that it will promote the social progress of the tourist destination, because the behavior generated under the psychological influence is likely to destroy the cultural environment of the tourist destination. For example, due to the distortion of national culture and the disappearance of national characteristics, the number of tourists will decrease, resulting in the sustainable development of the tourist destination and the sharp slowdown of local social development. This situation in turn will cause a huge psychological contrast of residents, so that local residents begin to recognize the new culture brought by tourists. This process requires the intervention of the local government and some public welfare organizations, and the correct guidance and control to make the destination residents produce positive behaviour. Positive behavior will strengthen the identity of local residents; Negative behaviour will cause residents to re-evaluate their perceived culture.

In the process of the influence of tourism on the psychology and behaviour of the residents in the tourist place, the main body of tourism -- tourists plays the most important role (Çelik & Rasoolimanesh, 2023; Chen, Dwyer, & Firth, 2014). When tourists come to the tourist destination, they show a relatively pure "cultural nature" because they are separated from daily life. Although foreign tourists generally only stay in the destination for a short time, the communication between the two different cultures can only be limited to the superficial surface, but the tourists as a whole form a large social group, and their environment of accepting the tourist destination is different. The skill of building relationships with local residents enables tourists to form a stable cultural field (Richards, 2007). People's understanding of cultural value is not completely rational, but often from their own experience (including feeling, perception and other psychological activities) and value concepts, to understand, recognize, evaluate and determine. Tourists often come from economically developed and high-income areas, but becoming a tourist destination is not

directly related to the level of economic development. In fact, many places with rich tourism resources and great tourism attraction have relatively backward economies. When tourist groups meet destination residents, they will cause psychological collision and impact due to the difference of value system and regional culture system, but the impact on both sides is different. The demand characteristics and objective social and economic advantages of tourists make the psychological field formed in tourism activities have comprehensive psychological potential energy, which is often higher than the relevant amount of tourism residents. For example, in the same consumption activities, the psychological gap reflected by the two, and the psychological bearing capacity generated by the psychological cognitive gap, tourists are often higher than the residents of tourism places the relevant quantity.

Methodology

Sampling Method

The author adopts a multi-stage random sampling method. According to the tourism industry indicators of a certain province, 19 cities and counties are clustered into three categories, with City A and City B being the first category, City C being the second category, and City D and other cities and counties being the third category. Randomly select one city/county from each category for key surveys, and randomly select three survey points from each city/county; the remaining cities and counties randomly selected a survey point for investigation. The survey points selected include urban and rural areas, and the specific sampling method is as follows: Number all streets in the selected urban area, randomly select one street, number all neighbourhood committees on the street, and then randomly select one neighbourhood committee to investigate all residents aged 15 and above on the neighbourhood committee, ensuring that the total number of neighbourhood committees is not less than 150. If there are less than 150 people, the neighbourhood committee with the next sequential number will be selected. Rural sites: Number all townships in the selected city (county), and randomly select 1 township for investigation. Number all villages in each township, and then randomly select one village, iinvestigate all people aged 15 and above in these villages to ensure that the total number of people in the village is not less than 150. If there are less than 150 people, the next sequential number of villages will be selected (Chen, Huang, & Ye, 2023).

Sample Content

This survey follows the principle of economy and effectiveness, using a multi-stage random sampling method. According to the sample size estimation method for cross-sectional survey rate, the inspection level α is determined to be 0.05, and the specified allowable error δ is not greater than 0.1π, aaccording to relevant literature, the positive rate of psychological symptoms of SCL-90 in the general population often fluctuates between 3% and 30%, with an approximate median value of 12%, aaccording to the following (1) sample size calculation formula:

$$n=\mu\_\alpha^2\ \pi(1-\pi)\delta^2 \tag{1}$$

The calculated sample size is n=2933, cconsidering a loss of follow-up rate of about 15%, the required sample size is 3450 people. The effective sample size obtained during the actual investigation was 3295 people (Langarita & Cazcarro, 2022).

Research Tools

(1) Self-compiled Questionnaire on General Situation of Individuals and Families

The self-compiled individual and family general situation questionnaire used in this survey is mainly used to investigate the general situation of local residents, including gender, age, marital status, family type, environmental satisfaction, poverty, mental illness within three generations of the family, family life status, illness, intimate friends, and monotony of life (Table 1).

Table 1

Questionnaire on General Conditions of Individuals and Families

Sexual distinction	Male
	Female
Age	Year
Nature	Introvert
	Extroversion
	Between the two
	Unclear
Marital status	Unmarried
	Married
	Divorce
	Bereavement of a spouse
Degree of education	Illiteracy
	primary school
	junior high school
	High school or technical secondary school
	College degree or above
Family type	Urban households
	Rural households
	Hybrid family
Your satisfaction with the surrounding environment of your residence	Satisfied
	Commonly
	dissatisfied
Is your family listed as a local poor or low-income household by the relevant government departments?	Yes
	No
Do you have any mental illness in your family (the last three generations)?	Have
	Nothing
Family life	Harmony
	Commonly
	Disharmony
Are you sick within 14 days before the investigation	Yes
	No
Do you have intimate friends?	Have
	Nothing
Is your life monotonous and without any hobbies?	Yes
	No
Do you participate in community or mass organization activities? (such as neighborhood committee meetings, social group meetings, group activities organized in the village, etc.)	Yes, often
	Yes, occasionally
	Not participating
Do you attend various gatherings such as classmate gatherings, hometown gatherings, comrades-in-arms gatherings, etc?	Yes, regular attendance
	Yes, occasionally
	Not participating

(2) Symptom Checklist (SCL-90)

SCL-90 has been widely used at home and abroad to investigate the mental health status of various populations, and its reliability and validity have been generally verified. The main contents of this scale include: There are 9 factors including depression, anxiety, terror, hostility, paranoia, somatization, interpersonal sensitivity, obsessive compulsive symptoms, and psychosis, with a total of 90 items. Each item in the Symptom Checklist 90 (SCL-90) was scored on five levels, ranging from "None, Mild, Moderate, Heavy, and Severe", with a score of 1, 2, 3, 4, and 5, respectively, score calculation is conducted from 9 aspects:

1)Somatization: Including 12 items: 1, 4, 12, 27, 40, 42, 48, 49, 52, 53, 56, and 58.

2)Compulsive symptoms: The items included are 3, 9, 10, 28, 38, 45, 46, 51, 55, and 65, a total of 10 items.

3) Sensitive interpersonal relationships: The items included are 6, 21, 34, 36, 37, 41, 61, 69, and 73, a total of 9 items.

4) Depression: The items included are 5, 14, 15, 20, 22, 26, 29, 30, 31, 32, 54, 71, and 79, a total of 13 items.

5) Anxiety: The items included are 2, 17, 23, 33, 39, 57, 72, 78, 80, and 86, a total of 10 items.

6) Hostile: The included items are 11, 24, 63, 67, 74, and 81, totaling 6 items.

7) Terror: The items included are 13, 25, 47, 50, 70, 75, and 8, totaling 7 items.

8) Paranoia: The items included are 8, 18, 43, 68, 76, and 83, totaling 6 items.

9) The items included in psychosis are 7, 16, 35, 62, 77, 84, 85, 87, 88, and 90, a total of 10 items.

A total of 7 items, including 44, 59, 60, 64, 66, and 89, were not included in the above factors, they mainly reflect sleep and diet conditions, and were classified as factor 10, "other."

Scoring Instructions:

Total score: The sum of the individual scores of 90 items can reflect the severity of their illness; Total average score: total score/90; Number of positive items: the number of items with a single score ≥ 2.

Result Analysis:

According to the Chinese norm, when the total score is greater than 160 points or the average score of a single item is greater than 2 points, it indicates that psychology may deviate from normal and further screening should be conducted; A total score greater than 200 indicates a significant psychological problem, while a score greater than 250 indicates a relatively serious psychological problem (Mousavi et al., 2022).

Criteria for determining the positive detection rate of psychological problems: (1) A score of ≥ 2 points for one or more items (i.e., the average value of any item ≥ 2

points); (2) Total score ≥ 160. Any one of the above two items is considered positive for psychological problems.

(2) General Well-Being Schedule (GWB)

The General Well-Being Schedule (GWB) was used to evaluate residents' statements of happiness [36]. The scale was developed by the National Center for Statistics of the United States, with a total of 33 items, the higher the score, the higher the degree of happiness. Research has shown that it is more effective than other anxiety and depression scales, in addition to assessing overall well-being, it is also possible to score six factors of well-being by composing its content into six subscales, this includes concerns about health, energy, satisfaction and interest in life, a melancholy or happy mood, control of emotions and behaviors, relaxation and tension. National norm: 75 points for men and 71 points for women.

(3) Mental Health and Mental Health Knowledge Questionnaire

The Mental Health and Mental Health Care Knowledge Questionnaire is used to assess residents' awareness of mental health knowledge, the questionnaire is a knowledge questionnaire with a total of 20 items, mainly derived from the "Core Information and Key Knowledge Points for Mental Health Promotion and Education" issued by the General Office of the Ministry of Health (Health Office Disease Control and Prevention [2007] No. 84).

Survey Methods

This survey is mainly conducted by the respondents themselves, if individual respondents are illiterate or less literate, the investigator will read the questionnaire to the respondents, after the respondents make a choice, the investigator will fill in the questionnaire on their behalf. When the respondents are required to fill in the questionnaire by themselves, they are not allowed to discuss and fill in the questionnaire independently; When filling in the questionnaire on behalf of the investigator, the questions raised should not have a subjective color to induce respondents to respond.

Data Collection

The investigators were composed of four students majoring in prevention at level 11, four students majoring in preventive travel at level 11, and four students majoring in statistics at level 12 in a medical college. Before the formal investigation, the investigators should be trained, with unified guidance and pre investigation, mastering the investigation methods, strictly controlling bias, and ensuring the completeness of the questionnaire. Under the coordination of the staff of each district health centre, a 1-week investigation was conducted on July 20, 2014, the

investigator enters the household and explains the purpose of the survey to the respondents, after obtaining the cooperation of the respondents, the questionnaire is distributed, the respondents respond on the spot and collect the questionnaire on the spot. For respondents who have difficulty completing forms due to visual acuity, the investigator can read out a questionnaire to the respondents and record the answers. The investigator should not provide any explanation for the entire knowledge questionnaire (Polcsik & Perenyi, 2022).

Statistical Analysis

Data were entered in duplicate using EPIDA 3.1 and analyzed using SPSS 19.0 using t-test, chi-square test, analysis of variance, correlation analysis, and multiple linear regression analysis.

Data Analysis and Interpretation

General Demographic Characteristics of Local Residents

3450 questionnaires were distributed and 3300 were retrieved, with a recovery rate of 95.65%, five unqualified questionnaires were excluded, and 3295 were valid, with an effective recovery rate of 95.51%. Among them, there are 1662 male students and 1633 female students, with a male to female ratio of 1.02:1; The average age was (35.68 ± 16.10), the age variables were grouped into 15 to young

people (63.9%), 40 to middle-aged people (25.6%), and 60 to elderly people (10.5%); The number of divorces and widows in marital status is relatively small, with later analysis adjusted to be accompanied (57.1%) and unaccompanied (42.9%), while personality adjusted to be introverted (13.8%) and others (86.2%); The education level is adjusted to be primary school or below (16.3%), high school or below (55.6%), and college or above (28.2%).

Comparison of Mental Health Status of Local Residents with National Norms

The total score of SCL-90 for local residents is (120.10 ± 38.64), and the total score of the national norm is (129.97 ± 38.72). The standard judgment is based on a total score of SCL-90 ≥ 160 points as having psychological problems, and a total score of SCL-90<160 points as having no problems, there are 410 residents with psychological problems, accounting for 12.44% of the total survey population. Comparison of the total SCL-90 score and factor scores of local residents with the national norm: The total SCL-90 score of residents in a certain province is lower than the national norm; The scores of somatization, obsessive compulsive symptoms, interpersonal sensitivity, depression, anxiety, terror, hostility, paranoia, and psychosis were higher than the national norm, as shown in Table 2.

Table 2

Comparison of the Mental Health Status of Residents in a Certain Province With the National Norm($\bar{x} \pm s$)

	Residents of a Certain Province(N=3295)	National Norm(N=1388)	T Value	P Value
Somatization of body region	16. 68±6. 18	13. 36±0. 46	30. 757	0. 000
Obsessive compulsive symptoms	14. 44±5. 36	11.61±0. 59	30. 434	0. 000
Interpersonal sensitivity	11.86±4. 23	10. 66±0. 60	16. 575	0. 000
depressed	17. 56±6. 78	14. 51±0. 58	25. 998	0. 000
anxious	13. 28±5. 03	11.38±0. 45	21 .647	0. 000
hostile	8. 20±3. 33	7. 49±0. 56	12. 848	0. 000
terror	8. 91±3. 27	8. 22±0. 4	11.662	0. 000
Paranoia	7. 81±2. 87	7. 44±0. 56	7. 423	0. 000
Psychopathic	12. 77±4. 62	11.28±0. 43	18. 431	0. 000
Total score of SCL-90	120. 10±38. 64	129. 97±38. 72	-14. 646	0. 000

Correlation Analysis Between the Total Score of SCL-90 and Each Factor Score, Mental Health Knowledge Score, and Total Score of Happiness

The correlation coefficients between the total score of SCL-90 and the total score of happiness and mental health knowledge were -1.882 and -0.597, respectively; The correlation between the total score of SCL-90 and the total score of happiness and mental health knowledge was

statistically significant (p<0.05), and there was a negative correlation between the total score of happiness and mental health knowledge and the total score of SCL-90. The correlation between the total score of happiness and the scores of various factors in SCL-90 was statistically significant (p<0.05), and there was a negative correlation. There was no significant correlation between mental health knowledge scores and interpersonal sensitivity and paranoia scores (p>0.05), but there was a significant correlation

between mental health knowledge scores and other factor scores (p<0.05), and there was a negative correlation (Basalamah & Mawardi, 2022). Therefore, it can be concluded that the higher the total score of happiness and mental health knowledge, the lower the total score of SCL-90 and various factor scores, as shown in Table 3.

Table 3

Correlation Coefficient Between Total Score of SCL-90 and Various Factor Scores, Mental Health Knowledge Scores, and Total Score of Well-being

	Total Score of Happiness	Mental Health Knowledge Score
Total score of SCL-90	-1 .882	-0. 597**
Somatization	-0. 277**	-0. 306**
Obsessive compulsive symptoms	-0. 217**	-0. 073*
Interpersonal sensitivity	-0. 182**	0. 014
depressed	-0. 328**	-0. 111**
anxious	-0. 237**	-0. 122**
hostile	-0. 142**	-0. 067**
terror	-0. 136**	-0. 047**
Paranoia	-0. 121**	-0. 015
Psychopathic	-0. 205**	-0. 063*

Note: * P<0.05, * * P<0 01

Multiple Linear Regression Analysis of Factors Affecting Mental Health

Based on the above analysis and professional knowledge, using the total score of SCL-90 as the dependent variable Y, gender, age, personality, marital status, education level, and family type (urban family=1, rural family=2, mixed family=3, dummy variable: A31 (urban family=1, others=0); A32 (rural family=1, others=0), environmental satisfaction, poverty, whether the three generations of the family suffer from mental illness, family life, whether they are sick, whether they have intimate friends, whether life is monotonous, participating in community group activities, participation in gatherings, mental health knowledge scores, and total happiness scores are independent variables (X), the stepwise method was used for multiple linear regression analysis, and the results are shown in Table 4. The results showed that the influencing factors that entered the regression equation were: Total score of happiness, marital status, family life, environmental satisfaction, personality, whether the three generations of the family had mental illness, whether life was monotonous, and participation in parties. The most influential factor was total score of happiness (β= 0.426), next is marital status (β= 0.097) and satisfaction with the environment (β= 0.068). The diagnosis results of collinearity statistics show that the VIFs are all less than 5 and the tolerance is much greater than 0.1, indicating that the collinearity between independent variables is small and suitable for multiple linear regression analysis (Rozmiarek, Malchrowicz-Mośko, & Kazimierczak, 2022).

Table 4

Multiple Linear Regression Analysis of Factors Affecting Mental Health

	Non-Standard Coefficient		Standard Coefficient	T Value	P Value	95% Confidence Interval For B		Collinearity Statistics	
	B	Standard Error	Reta			Lower Limit	Superior Limit	Tolerance	VIF
(Constant)	250. 563	7. 406		33. 830	0. 000	236. 040	265. 084	0. 851	
Total score of happiness	-1 .683	0. 065	-0. 425	-26. 148	0. 000	-1 .807	-1 .556	0. 938	1.175
marital status	-7. 536	1 .211	-0.096	-6. 224	0. 000	-9. 909	-5.162	0. 825	1.065
family life	4. 776	1 .175	0.066	4. 062	0. 000	2. 471	7.082	0. 925	1.211
Environmental satisfaction	4. 068	0. 930	-0.067	4. 372	0. 000	2. 242	5. 891	0. 957	1.082
Is life monotonous	-2. 692	1 .248	-0.032	-2. 153	0. 031	-5. 141	-0.241	0. 888	1.046
Party attendance	-2. 051	0. 872	-0.037	-2. 356	0. 018	-3. 761	-0.345	0. 990	1.128
character	3. 731	1 .691	0.032	2. 207	0. 027	0. 417	7.045	0. 937	1.01
Whether the three generations of the family suffer from mental diseases	-4. 460	2. 206	-0.031	-2. 022	0. 043	-8. 783	-0.136		1.068

Discussion and Implications

(1) General Representativeness of Research Objects

The estimated sample size for this survey is 3450 people, during the actual investigation, 3295 valid questionnaires were recovered due to non-standard, non-compliant, and other reasons. Among them, there are 1662 male students and 1633 female students, with a male to female ratio of 1.02:1. The average age is (35.68 ± 16.10), and the proportion of each age group is: 15 to the young group (63.9%), 40 to the middle-aged group (25.65%), and 60 to the elderly group (10.5%), the proportion of each age stage is appropriate, which can basically reflect the age structure of the tourist area. Proportion of each group with education level: Primary school and below (16.3%), high school or below (55.6%), junior college and above (28.2%), with education level above senior high school being the majority, they are willing to accept the survey, and the quality of questionnaire completion is good. The research objects participating in this survey are widely distributed; including residents at the village, town, county, and city levels, and the sample is well representative and can represent the overall situation of residents in a sports tourism town as a whole. Therefore, the psychological health survey conducted from these samples can provide effective decision-making support for residents' psychological intervention during the construction of a sports tourism town (Sharp et al., 2022).

(2) Mental Health Status of Local Residents

This study shows that the detection rate of psychological problems among residents in a certain province is 12.44%. The total score of SCL-90 (120.10 ± 38.63) is lower than the national norm. The scores of various factors such as somatization, obsessive compulsive symptoms, interpersonal sensitivity, depression, anxiety, terror, hostility, paranoia, and psychosis are higher than the national norm, indicating that the mental health status is worse than the national level. The reasons may be related to the following aspects: (1) The mental health education and mental health care work in a certain province is relatively lagging behind. (2) The current economic situation may have a certain impact on the psychology of residents. (3) The establishment of a sports tourism town in a certain province is related to the impact of foreign culture, which has led to increasing pressure on the lives of residents in a certain province, resulting in more prominent psychological problems, and a negative psychological health situation.

(3) Factors Affecting the Mental Health of Local Residents

The results of multiple linear regression analysis showed that the total score of happiness, marital status, family life, environmental satisfaction, personality, whether the three generations of the family have mental illness, whether life is monotonous, and participation in gatherings are the influencing factors for the psychological health status of residents in a certain province.

Happiness is a comprehensive and positive assessment of people's quality of life based on personal standards, as well as their satisfaction with life and various aspects (Spiers & Walker, 2008). There are both subjective factors of individuals and objective factors of external social environment that affect happiness. Health is an important factor that affects overall well-being, the body is the capital of revolution, without a healthy body, the quality of life and the value of life have no practical significance (Silva, Campos, & Marôco, 2018). In addition to physical health, mental health is also very important (Kolappa, Henderson, & Kishore, 2013). Chang, Chiu, and Liu (2017) and Tsaousis et al. (2007) indicates that there is a significant correlation between mental health and subjective well-being, and mental health is the main factor affecting subjective well-being. Currently, more and more researchers use subjective well-being as an important indicator of mental health. Research by Wheeler (2015) has shown that the level of subjective well-being can be an important predictor of mental health, as can the level of mental health. Zhang, Zhang, and Chen (2017) and McGuire, Kaiser, and Bach-Mortensen (2022) have shown that mental health is the main factor affecting subjective well-being, and a person who often experiences happiness is a mentally healthy person.

1) Marriage and Family Factors

Marriage and family life are another important factor affecting mental health, marriage and family are important components of personal life, as a social support, marriage can play a certain protective role in mental health (Vest et al., 2017). Marital status (with and without partners) plays a regulatory role between stress and negative emotions. There was a statistically significant difference in mental health status among groups with different marital status, with the mental health status of the unmarried being worse than that of the couples. This is similar to Seligman's research showing that marital status can affect people's psychological health by influencing their happiness. Martin et al. conducted a study of 28198 Swedish 18-80 year olds and found that, after controlling for other possible variables, people who were unmarried, divorced, or widowed had significantly poorer mental health than

those who were married or cohabiting. On the one hand, the establishment of a sports tourism town has accelerated the local urbanization process, but due to the backward cultural and educational level, the fundamental concepts and ideas of local residents have not kept pace with the times. According to local rural customs, men and women of the right age should marry early and have early pregnancy, if they reach a certain age and are not married, they will be considered to have some problems with their family status, personality, or physiology, social discourse can cause psychological and physical pressure on the parties concerned. On the other hand, the sense of intimacy, warmth, and security between couples can relieve psychological stress to a certain extent; alleviate the generation of negative psychological emotions. Therefore, the mental health status of the unmarried population is worse than that of the couples.

2) Factors of Environmental Satisfaction

Everyone lives in the environment, with the development and evolution of the natural environment and human society, the impact of the environment on social people is becoming increasingly complex, especially on mental health. The impact is often long-term and imperceptible. During the construction of a sports tourism town, on the one hand, the government and tourism companies have improved public facilities and beautified the city's appearance in order to attract tourists, thereby improving the living environment of local residents to a certain extent; On the other hand, due to the influx of large numbers of domestic and foreign tourists into the island, the local population density has increased, and the crowding phenomenon in tourist attractions has gradually become apparent. Many studies have shown that crowding can affect the mental health of people. Some studies have found that urban residents have a higher rate of psychological collapse than residents in rural areas, while urban central areas have a higher rate than suburban areas, indicating that crowding is indeed a factor that affects the mental health of groups. The development of tourism has brought about a dual impact on local living environment improvement and crowding, residents' perception of this change will affect their mental health, and people with high satisfaction with the environment have a relatively better mental health status (Sonnby et al., 2022).

(3) Personality Factors

Character is a psychological characteristic of a person, a stable attitude towards reality and a habitual lifestyle. The results of this survey show that people with introverted personalities have poorer mental health than people with other personalities. The influx of foreign people and cultures brought about by tourism development, as well as different living habits and cultural customs, is bound to have a certain degree of impact on the psychology of local residents. Compared to extroverts, introverts have a poor ability to integrate with their surroundings, are unable to properly handle inconsistencies between themselves and the external environment, are not good at pouring out their psychological dissatisfaction and depression to the people around them, and often suppress their emotions, over time, a backlog of negative emotions erupts and leads to mental health problems.

(4) Whether There Are Psychological Disease Patient Factors in the Three Generations of the Family

This survey found that the mental health status of the population with mental illness in the three generations of the family is relatively poor, this is mainly because the occurrence of psychological disorders is caused by the comprehensive effect of various factors such as physiological factors and psychological factors, as well as the overall quality disorders of physical quality, psychological quality, and social practical coping quality, many psychological disorders and neurological diseases are related to chromosomal abnormalities, genetic abnormalities, and genetic factors.

(5) Interpersonal Factors

Whether life is monotonous or not, and there are significant differences in mental health status between groups participating in party activities. People's mental health is influenced by their interaction with society, many studies have shown that social interaction has a strong impact on mental health. Everyone is a member of society and cannot live alone without being separated from society. If a person is unwilling to chat with others for a long time, it indicates that they are relatively depressed, very tolerant, avoid conflicts, remain silent and do not express themselves, are prone to sulking, do not chat with others to relieve boredom, have no other interests or hobbies, have a simple lifestyle, have no better ways to alleviate their grievances, and cannot timely evacuate their hearts, which can lead to a series of psychological problems. In all social support systems, intimate relationships can always produce the strongest supportive effect, which can effectively reduce the occurrence of psychological problems. Intimate relationships are not only important for satisfying our sense of security and values, but also for enhancing self-confidence, all of which contribute to our mental health.

(6) Other Factors

There were statistically significant differences in mental health status among different age groups. Pairwise

comparison found that the total score of SCL-90 and various factors in the youth group were the lowest, while the scores in the middle-aged and elderly groups were relatively high. There may be three reasons: First, as older people age, various functions of the human body gradually decline, and the probability of physical discomfort and illness increases; The second is that we have entered an aging society, but the policies aimed at protecting and supporting the elderly are relatively lagging behind, the medical security system is not perfect enough, the sense of loss of the elderly after retirement, the sense of loneliness caused by children away, widowhood, and other reasons, leading to their poor mental health; The third reason is that the elderly live in the local area for a long time, and are relatively conservative, unable to accept the impact of foreign tourists, in addition, most of the elderly are difficult to find tourism related jobs, unable to obtain economic benefits from tourism activities, affecting their adaptation to tourism activities. It is particularly important to improve social policies and medical security systems for the elderly, provide psychological health education for this group, regularly organize psychological health counseling, hold lectures on psychological health knowledge, and promptly intervene and prevent the occurrence of psychological diseases.

There were statistically significant differences in mental health status among groups with different educational levels. Among them, people with primary school education and below have the worst mental health status. On the one hand, when dealing with foreign tourists, people with lower education levels often have poor communication due to language and cultural barriers; On the other hand, due to cultural constraints, they cannot engage in tourism related jobs with high returns, and can only earn a living by engaging in small businesses and manual labor, unable to obtain more economic benefits from the rapidly developing tourism industry. The strong contrast between living in poverty and the prosperity of tourist areas often leads to a deep sense of inferiority complex, even psychological imbalances such as jealousy. Moreover, residents with lower education levels have fewer opportunities to receive mental health knowledge and medical knowledge, and their awareness of mental health knowledge is lower. Once faced with psychological problems caused by economic and interpersonal relationships, they often cannot choose the correct coping methods. People with higher education levels can quickly adapt to external shocks and often find opportunities to improve their economic conditions through such shocks; therefore, people with higher educational levels have better mental health. When formulating tourism development

support policies, it is necessary to increase the policy preference for the promotion of cultural quality of local people with lower education levels, it is not only necessary to provide counseling and treatment for their mental health, but also to improve their ability to create wealth and improve their living standards through vocational skills training. Whether the economic conditions are good or bad, that is, whether there is a statistically significant difference in the mental health status between the poor groups, and the mental health status of the poor group is worse than that of the non poor group. Poor individuals often exhibit certain psychological problems for obvious reasons. Economy is the foundation of life, and material poverty can cause many problems: High pressure in life, inability to see illness, and inability to receive good education. Once a person is under excessive pressure, they will feel bad and easily lose their temper, which can lead to family conflicts and disharmony in life. In addition, poor people generally have a lower social status and a higher sense of inferiority complex, which affects their mental health. In addition, research has shown that poverty is not only material poverty, but also a lack of educational opportunities, employment opportunities, and social participation opportunities, the lack of social resources makes people more vulnerable to deprivation and homelessness. This phenomenon is not only widespread in low-income countries, but also the situation of low-income groups in developed countries is not optimistic. Although the causal relationship between poverty and mental health remains controversial, existing evidence suggests that the two interact and reinforce each other.

Whether there is a statistically significant difference in the mental health status between the affected groups, and whether the mental health status of the affected population is worse than that of the non-affected group, which is similar to Patel's research. "Sickness is closely related to mental health; on the one hand, it may be due to the current inadequate medical system, which may lead to increased psychological stress among patients, especially when suffering from major diseases." On the other hand, when patients suffer from physical diseases, they are unable to live and work normally, and their emotions become low, resulting in certain psychological problems. Behavioural medicine research has also found a fundamental association between mental and physical diseases, such as depression, which can lead to heart disease (Celano et al., 2018; Grippo & Johnson, 2002).

The psychological impact of sports tourists on destination residents is mainly reflected in the following aspects: First of all, tourist consumption behavior has a demonstration effect on destination residents. Due to the high demand

and consumption of tourists in food, housing, transportation, travel, shopping, entertainment and other aspects, the objective social and economic advantages make the psychological competition between tourists and residents of tourist places result in the image of tourists as winners. Tourists generally do not have a feeling of panic when traveling in tourist places, but show obvious superiority. In addition, the constraints of tourists are less than that of destination residents, and destination residents show certain envy and blindness. The scope of tourist psychological field begins to extend to the psychological field of destination residents, which affects the changes of individual psychology of residents. Destination residents begin to cater to, pursue and imitate tourists' speech and behavior, dress up and consumption mode, etc. The further result of this "demonstration effect" is that residents begin to doubt the local social and cultural traditions, and even abandon or rebel. This kind of individual psychological effect will form the social psychology of tourism destination alienation through the internal coordination of residents' psychological field, and crack the inherent social and cultural model of tourism destination. This phenomenon becomes more and more obvious with the in-depth development of local tourism and the increase in the number of tourists. First, after the residents of the tourist destination understand the tourists' willingness to spend money on acquiring experience and buying souvenirs, the phenomenon of extorting tourists often occurs in order to reduce or eliminate the inferiority complex in the imitation process. Second, young people in tourist destinations are more influenced by tourists. Young people in traditionally closed areas observe the openness and material superiority of Western tourists, especially young people, which may lead them to imitate some behaviors of tourists. To reach tourist spending levels, more and more locals are likely to find work in the service sector. When local residents cannot satisfy their wishes through legal means, crime and the tension between residents and tourists may rise, and these negative behaviors re-form the process of residents' re-cognition of tourists' culture. Furthermore, tourism activities change the aesthetic consciousness of local residents (Budeanu, 2007). Tourists' clothing, texture and style all reflect the modern cultural characteristics, which has a direct visual impact on the psychological cognition of local residents. Local residents began to re-judge the original traditional clothing, and traditional clothing is a comprehensive reflection of social production, life and aesthetic consciousness in a certain historical period. From the selection of cloth, color matching, style selection, sewing, cutting and embroidery, pattern patterns, jewelry wear and

other aspects, it contains its own profound culture and characteristics. Due to the demonstration effect of tourists, the aesthetic consciousness of destination residents has changed, which is manifested in the change of traditional elements such as fabric selection, color and pattern. Some places have been basically assimilated by modern costumes, and some ethnic areas have begun to reform ethnic costumes. For example, people in Lijiang put forward suggestions for costume reform as early as the mid-1980s. They proposed that new western costumes should not only be beautiful and elegant and reflect the characteristics of The Times, but also be able to be popularized into People's Daily life. However, various administrative measures have still failed to reverse the trend of fewer and fewer people wearing national costumes. Nowadays, except for grandmothers, young and middle-aged people in Lijiang County do not wear national costumes in their daily lives.

Keeping in view research findings, research has several significant implications for the construction of a sports tourism industry and the mental health intervention of local residents. Primarily, the study highlights the need for targeted mental health interventions and education in the tourism town. The prevalence of psychological problems among residents indicates a potential mental health issue that requires attention. Therefore, it is crucial to allocate resources and efforts towards improving mental health education and care services in the area. On the other hand, factors affecting mental health, such as marriage and family life, environmental satisfaction, personality traits, and family history of psychological disorders, should be taken into account when designing mental health programs. Integrating these factors into mental health intervention strategies can lead to more effective outcomes. Additionally, the study emphasizes the importance of social interaction and support for mental well-being. Encouraging social gatherings and community engagement can help alleviate feelings of loneliness and isolation, particularly among vulnerable groups like the elderly and those with lower educational levels. Lastly, the research underscores the significance of economic and social development policies in supporting mental health. Addressing issues related to poverty, inequality, and economic opportunities for residents can contribute to better mental health outcomes. With the significant findings, research could also explore new research area in future. With significant implications, research has limitations. For instance, research was limited on one country a future research could be explored on other country to know about the variation in results. In other words, research not included other moderating or

mediating variables, in future research other moderating or mediating variable could be include to increase the strength of the model.

Conclusion

It is worth mentioning that there is a negative correlation between the score of mental health knowledge and mental health status, the higher the score of knowledge, the worse the mental health status, which may be the same as the reason for long-term illness to become a doctor. A monotonous life, lack of interests, and lack of mental health are the triggers of mental illness, as the saying goes, there is no need to worry about distant things, there is no need to worry about near things, land acquisition, and material stability, there is no need to cultivate at sunrise or return at sunset, and there is no need to worry about bad weather affecting the harvest, however, they have become helpless, without spiritual sustenance, and some people gradually become listless, feeling that they have physical problems. In short, enriching your spare time life, cultivating hobbies that are conducive to mental and physical health, smoothing out various imbalances in your heart, being grateful for life, and being content and happy can lead to mental and physical health.

The mental health problem of residents is not only a personal issue, but also a social issue, the impact of tourism has led to an increase in the positive rate of mental health problems among local residents, which is a noteworthy issue. With the development of national economy and society, people's life concept and consumption concept have undergone significant changes, advocating fitness and pursuing healthy consumption has become a fashion in society. As a consumption item integrating tourism, leisure and fitness, sports tourism is highly respected by the public, and with the rise of tourism fever, it makes waves in the tourism market and brings vitality and vitality to the development of tourism. With the continuous rise of sports tourism consumption, the unique characteristics of sports tourism products and services, especially its important impact on the development of tourism, are becoming more and more apparent. In the current period of economic structure adjustment, sports tourism as an important economic project affecting the economic development, especially the tourism development, has attracted the attention of the government and related scholars. In the current period, in-depth analysis of the characteristics of sports tourism from the perspective of tourism development, careful combing of the major impact of sports tourism on tourism development, and actively seeking strategies to develop sports tourism have important theoretical value and practical significance for maintaining the healthy and sustainable development of sports tourism.

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