An Empirical Analysis of the Effects of Physical Exercise on Adolescent Mental Health and Its Mediating Mechanisms

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The use of physical exercise for the purpose of maintaining adolescents’ mental health is an important topic of psychological research. However, there is no unified conclusion on the effect of physical exercise time on the level of mental health. This paper investigates the causal effect of physical activity on adolescent mental health using a multilayer linear modeling approach and a Bootstrap method to test for possible mediating effects. The results of the study showed that there was a nonlinear inverted U-shaped relationship between physical activity time and adolescent mental health, with a threshold value of 105 min, and the results of the mediating effect analysis showed that self-assessment of health, self-confidence, academic stress, peer relationships, and positive peer behaviour were important mediating mechanisms between physical activity and mental health. The results of the mediation effect analysis showed that physical exercise was an important mediating mechanism between self-assessment, confidence, academic stress, peer relationship, and positive peer behaviour.

1. Introduction

The United Nations World Health Organization defines health as “not only the absence of infirmity and disease, but also a state of physical, mental and social well-being.” It is defined in terms of physical health, mental health, and good social adjustment. At the same time, the concept of one hour of exercise a day, 50 years of healthy work and a lifetime of happiness has given physical exercise a more important meaning under the guidance of the modern concept of exercise and health. The essential function of sport is to strengthen the body and the mind, and to improve the body’s functions directly through physical activity [1].

Adolescents are at a sensitive stage, and the increasing pressure of their studies and lives leads directly to interpersonal tensions and certain negative emotions, such as jealousy, dissatisfaction, and hostility. This phenomenon can be alleviated through physical exercise. Firstly, through physical activity, young people can improve not only their overall work capacity but also their mental activity, laying the foundation for the body’s ability to adapt to change. Secondly, physical exercise provides young people with more opportunities for interpersonal interaction and promotes their social adaptability, allowing them to face the various setbacks and difficulties in life and to develop an independent personality.

In the long history of development and practise, the ability to resist stress in life, mental health and interpersonal relationships have a great impact on the physical health of young people, which can be deeply rooted in all aspects of life, study, and family and will accompany people throughout their lives [2]. Whether it is the development of a person, a nation or a country, if the nationals do not have good physical quality, it will become a hindrance to the development of a country or region, and the level of mental health of adolescents will also be greatly affected. The ability to cope with stress, mental health and interpersonal relationships are a guarantee of a healthy nation. As globalisation accelerates, the lives, studies, and psychology of young people in China are changing, traditional attitudes are being impacted by the social system. The problems arising from psychological stress, interpersonal relationships, and mental health are increasing.

As an outgrowth of social activities, physical activity allows youth to relieve interpersonal relationships, expand
interpersonal contacts through physical activity, get to know other people through sports, and achieve self-regulation of youth’s mental state in addition to their demanding studies and lives. The rapid development of physical activity since the 1990s has led directly to a revolution in the field of psychological research. Firstly, physical activity is an active process for the individual, and physical activity and exercise are not just about sport and the presentation of sports, but also provide new ways for young people to improve their stress tolerance, ease interpersonal relationships, and promote psychological well-being, which can effectively contribute to the psychological well-being of the individual. Secondly, physical activity has a positive regulating effect on emotions, as physical activity itself generates a rich emotional experience, and even when physical activity is performed with negative emotions, the negative emotions are digested and offset through catharsis or release, perseverance, and confrontation during physical activity. In addition, physical exercise promotes self-efficacy. By completing actions or winning in physical activities, the experience of success enhances self-efficacy, and through training, competition, failure, reflection, and success, constant practise and reflection develop a strong will and a strong mental capacity.

Physical exercise has a variety of modes and distinctive characteristics. In the past, due to geographical environment, economic development, and conceptual limitations, physical exercise was limited to familiar people. With the development of information technology and society, physical exercise has completely broken through the traditional concept, and its colourful exercise mode has laid a solid foundation for building a strong and upward attitude of young people and improving their ability to resist stress in life.

In recent years, the physical level of China’s youth has been significantly improved, but the level of mental health has formed a sharp contrast with it [3]. According to the China Youth Development Report released in 2018, about 30 million children and adolescents under the age of 17 in China are suffering from various emotional and behavioural problems. Their mental health problems have become a more prominent social problem in China. With the changing times, the positive health concept of nonpharmacological treatment has gradually become an important means of promoting mental health and has received much attention [4]. The importance of physical exercise in promoting the physical and mental health of adolescents has been emphasised, as physical exercise should be used as a means to maintain and promote the physical and mental health of adolescents. In addition, the relevant empirical studies at home and abroad have pointed out that physical exercise is beneficial to the improvement of mental health [5–7] and has an irreplaceable role in preventing and eliminating negative emotions [8–10]. However, studies have shown that there may be a nonlinear causal relationship between physical activity time and mental health, and that excessive physical activity may have a negative impact on the mental health of adolescents.

The adolescent stage is not only a golden period of physiological development but also an important period of psychological development. As a physical activity based on the biological development of the individual, physical exercise cannot only promote the development of the individual’s physical quality, but also has the function of regulating mental emotions and improving the level of mental health of the individual. The relationship between the two has also been empirically studied by foreign scholars [11]. Fang et al. showed through clinical trials that exercise-based treatment can provide relief to patients with severe or moderate depression [12]. Empirical studies by Chinese scholars have also confirmed the positive contribution of physical exercise to the level of mental health of individuals [13–15]. Xue et al. showed that whether or not to participate in physical activity and the frequency of participation in physical activity had a significant effect on the level of psychological subhealth in China [16]. Hu, on the other hand, selected 1546 freshmen as the subjects of his study based on the principle of whole group sampling and concluded through group experiments that moderate-intensity physical exercise can effectively improve students’ mental health [17].

There may be a nonlinear causal relationship between physical activity time and psychological well-being. The results of this study showed that those who tried to exercise had 1.5 fewer days per month of poor mental health compared to those who did not exercise. Mental health was best when subjects participated in exercise three to five times per week and exercised for 30–60 minutes each time. Those who exercised for more than three hours had lower mental health than those who did not. Chinese scholars Hu and Xiao and Yang et al., also pointed out in their study that an appropriate level of aerobic exercise has a significant effect on maintaining an individual’s mood and a positive and optimistic attitude towards life [18, 19].

This paper uses data from the China Education Tracking Survey to empirically analyse the optimal effect of physical activity time on adolescent mental health and the possible mediating effects. The hypothesis is that there is an inverse U-shaped effect between physical activity time and adolescent mental health, with physical activity having a positive effect on adolescent mental health, but excessive exercise having a negative effect. This paper uses the CEPS as the main data, which has a broader scope, to verify the nonlinear causal relationship between physical activity time and mental health level. The multiple mediating mechanisms between time spent in physical activity and psychological well-being will also be investigated using BMI, own health status, appearance satisfaction, sleep time, confidence, class inclusion, and positive peer behaviour as mediating variables. The experimental results show that the multilayer linear model analysis (HLM) method is able to take into account both within-group and between-group variance better than the least squares method, avoiding methodological flaws, theoretical waste, and loss of efficiency to a certain extent.

2. Mechanisms of the Impact of Physical Exercise on Mental Health

2.1. Physical Characteristics. Adolescence is a special age when the physical appearance of an individual changes drastically, and adolescents in this period will pay great attention
to their physical appearance and exaggerate their physical shape and appearance defects, which will lead to a surge of negative emotions in adolescents and thus affect their normal mental health level [20]. Shi and Yin and Yang et al. pointed out that a good physical shape can promote the development of adolescents’ mental health, and that prolonged physical exercise is one of the important ways to have a good body [21, 22]. In addition to this, self-perceived physical health and sleep duration are also important factors influencing mental health [23].

In summary, this paper proposes the following three hypotheses: (1) physical exercise will indirectly affect mental health by affecting individuals’ self-assessment of body size; (2) physical exercise will indirectly affect mental health by affecting individuals’ self-perceived physical health; (3) physical exercise will affect individuals’ sleep status.

2.2. Psychological Characteristics. In addition to external physical characteristics, internal psychological characteristics also play an important role in the psychological well-being of individuals. Theories of motivation suggest that individuals’ beliefs about their abilities and their environment have an impact on their psychological well-being. Foreign scholars have shown that self-confidence provides individuals with strong moral support to reduce the growth of negative emotions and enhance their mental health [24]. In China, scholars have also confirmed this view and have shown that self-confidence levels are positively correlated with physical and mental health levels [25]. In addition to self-confidence, academic stress also has a serious impact on adolescents’ mental health [26], and in his study, Ling et al. pointed out that academic stress can have a negative impact on adolescents’ mental health [27].

To sum up, the following two hypotheses are proposed: (1) physical exercise will indirectly affect the level of psychological health by affecting confidence; (2) physical exercise will indirectly affect the level of psychological health by affecting academic stress.

2.3. Interpersonal Level. Good interpersonal relationships and positive peer groups can improve the physical and mental health of young people, while poor interpersonal relationships can have a negative impact on mental health [28]. Wu and Zhang pointed out that the more capable the peers are, the more stress they perceive and the worse their psychological health is [29]. Xi and Ma’s study also showed that good peer relationships have a significant effect on adolescents’ psychological health [30]. Student participation in physical activity not only has a positive effect on adolescent’s mental health performance [31] but also enhances cognitive [32] and memory abilities [33]. The theoretical basis for this view is arousal theory [34] and cognitive neuroscience theory [35], supported by evidence from studies in the field of medical imaging such as brain imaging [36].

In summary, this paper proposes the following two hypotheses: (1) physical exercise will indirectly influence psychological health through peer relationships; (2) physical exercise will indirectly influence psychological health through peer behaviour.

The structure of the study on the effect of physical exercise on psychological health from three surfaces is shown in Figure 1.

3. Experimental Data and Selection of Variables

3.1. Experimental Data. The data selected for this study is the China Education Tracking Survey 2020-2021 tracking data, which is a nationally representative multilayer data developed by the China Survey and Data Centre (NSRC) of Tsinghua University. 28 counties and districts, 112 schools, 438 classes, and 20,000 students were randomly selected from across the country to conduct the survey. The survey is aimed at explaining the impact of family and social and school factors on individual education. The second period of data is a follow-up survey of the first period.

The total sample size of 6768 was obtained by matching the student ID, class ID, and school ID in the two periods of
data and correlating the data with the Stata software, and the total sample size was calculated to understand the basic situation of physical activity intensity of youths, as shown in Table 1.

A comparison of the numbers of people at the five different exercise intensities is shown in Figure 2.

Figure 2 shows that when the basic exercise intensity of young people is statistically developed, the highest number of young people participate in high-intensity physical activity. This is followed by light physical activity and the lowest number of very high-intensity exercise. The basic information on the amount of time spent on physical activity per day is also presented in Table 2.

From the data in Table 2, we can see that the statistical analysis of 6768 adolescents, including the number of physical exercise time under 10 min is 1060, accounting for 16% of the total number of adolescents. A comparison of the number of people who exercised for the five different types of exercise time is shown in Figure 3.

From the statistics of the basic physical exercise time of young people in Figure 3, it is found that the time of young people’s participation in physical exercise is concentrated between 20 min and 60 min, which is a relatively reasonable arrangement of physical exercise time for young people. The statistics obtained were used to understand the basic situa-

### Table 1: Physical activity intensity of adolescents.

| Exercise intensity       | Number | Percentage |
|--------------------------|--------|------------|
| Light exercise           | 1560   | 0.23       |
| Low-intensity exercise   | 1360   | 0.20       |
| Moderate-intensity exercise | 1170  | 0.17       |
| High-intensity exercise  | 2470   | 0.37       |
| Very high-intensity exercise | 208   | 0.03       |

### Table 2: Daily physical activity time of adolescents.

| Time          | Number | Percentage |
|---------------|--------|------------|
| Under 10 min  | 1060   | 0.16       |
| 11-20 min     | 1310   | 0.19       |
| 21-30 min     | 1560   | 0.23       |
| 30-59 min     | 1730   | 0.26       |
| Over 60 min   | 1108   | 0.16       |

### Figure 2: Pie chart comparing the number of people at 5 different exercise intensities.

A comparison of the numbers of people at the five different exercise intensities is shown in Figure 2.

### Figure 3: Comparison of the number of people who participated in five different types of exercise time.

A statistical analysis of the basic physical activity of adolescents shows that the amount of physical activity participated by adolescents is relatively concentrated between low and moderate physical activity, which to a certain extent indicates that the overall level of physical activity of adolescents remains stable. The comparison of the frequency of physical activity among young people is shown in Figure 4.

3.2. Selection of Variables

(1) The dependent variable was the degree of adolescent mental health, and the CEPS data drew on a measure of negative affect, asking respondents about the degree of negative affect they had experienced in the past seven days. To ensure the accuracy and stability of the findings, two composite indicators were constructed. The first composite indicator reassigned the variable as follows: I for never, 0.75 for rarely, 0.5 for sometimes, 0.25 for often, and 0 for always. The five questions were summed and averaged and multiplied by 100, resulting in a continuous variable with values ranging from 0-100, with higher values representing better mental health among adolescents. It was coded as 0 for completely disagree, 1 for not very much, 2 for somewhat agree, and 3 for completely agree.
Table 3: Frequency of physical activity among adolescents.

| Frequency                  | Number | Percentage |
|----------------------------|--------|------------|
| Less than once a month     | 610    | 0.09       |
| 2-3 times per month        | 1130   | 0.17       |
| 1-2 times per week         | 2800   | 0.41       |
| 3-5 times per week         | 1300   | 0.19       |
| Once a day                 | 928    | 0.14       |

The control variables for the second tier of schools included school ranking, with 0 being the worst, 1 being lower middle, 2 being middle, 3 being upper middle, and 4 being best. In terms of the availability of health education programmes, 1 indicates yes and 2 indicates no. In terms of school climate, the frequency of delinquent behaviour in the school in the last week was assigned a value and summed, with 0 being more than ten times, 1 being five to ten times, 2 being one to four times, and 3 being never, with higher scores indicating a better school climate.

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Mediating mechanisms were one of the main focuses of this study, with the physiological dimensions being sleep duration, self-assessment of body image, and self-perceived level of health. The psychological characteristics were confidence and academic stress. Confidence was assigned a value of 0 for no confidence, 1 for less confidence, 2 for more confidence, and 3 for a lot of confidence. In this paper, academic stress is considered as a continuous variable, and academic stress is measured by summing the academic stress values of English, mathematics, and language subjects, with higher values indicating higher academic stress.

The interpersonal dimensions were peer relationships and positive peer behaviour. The peer relationship variable was selected to measure the friendliness of the class towards the survey respondent and assigned a value of 0 for totally disagree, 1 for relatively disagree, 2 for relatively agree, and 3 for totally agree. Peer positive behaviour was calculated to generate a continuous variable from 0-15, and the results of the descriptive statistics of the variables are shown in Table 4.

A comparison of the results of the descriptive statistics for the 15 continuous variables is shown in Figure 5.

3.3. Multilevel Linear Modeling Approach. In this paper, multiple linear models are used to present data in terms of high and low levels, size, and internal and external relationships, with information on both individual student and school characteristics as influences on student mental health. Although the use of cluster (group) grouping in OLS regressions can reduce bias, the use of a multilayer linear model (HLM) is advantageous when dealing with more layers and more complex influences. The within-group variation and between-group variation are then explained at different levels.

The empirical tests were carried out using Stata 16.0 statistical software. In terms of the empirical model, a two-level linear random intercept model approach for balanced panel data was used. Consider first whether individual student characteristics variables take into account, whether school characteristics variables also in characteristics variables take into account, whether school characteristics as in the second tier of schools, and whether the school in the last week was assigned a value and summed, with 0 being more than ten times, 1 being five to ten times, 2 being one to four times, and 3 being never, with higher scores indicating a better school climate.

Figure 4: Comparison of frequency of physical activity among young people.

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agree. The higher the value of this variable, the better the adolescent’s ability to adjust to negative psychological experiences.

The independent variable was physical exercise time. In this study, the average daily physical exercise time of the survey respondents was calculated, and the average daily physical exercise time of our adolescents was obtained after excluding the outliers, and the physical exercise time was squared in order to verify whether there is a nonlinear relationship between physical exercise time and adolescent mental health.

The control variables were divided into two levels: individual and school. The first level of control variables for individuals included age, where 1 for male and 2 for female. In terms of household registration, 1 indicates agricultural household registration and 2 indicates nonagricultural household registration. For only child, 1 indicates only child and 2 indicates not only child. In terms of household economic status, 1 indicates very difficult, 2 indicates difficult, 3 indicates moderate, 4 indicates relatively well-off, and 5 indicates very well-off. Parental education level was a continuous variable, summing parental literacy.
group differences in the effect of physical activity time on the psychological well-being of Chinese adolescents, using individual students and their families as the first level of control variables and their school characteristics as the second level.

The first level of the HLM is the individual level of adolescents. The coefficients at the individual level explain differences in academic performance due to student characteristics, i.e., differences in individual effects. The specific form of the model of academic performance for student \( i \) studying at school \( k \) is shown as:

\[
Y_{ij} = \beta_{0k} + \sum_{j=1}^{n} \beta_{jk} \times x_{ijk} + \epsilon_{ik}.
\]

where \( Y_{ij} \) is the standardised score for adolescent academic performance, \( n \) is the number of explanatory variables at the individual level, \( \beta_{0k} \) is the effect of the kth school characteristic on adolescent academic performance at the school level, \( x_{ijk} \) is the value of the \( i \)-th adolescent on the \( j \)-th
individual characteristic variable at the k-th school, $\beta_{jk}$ is the estimated coefficient of $x_{ijk}$, and $\epsilon_{ik}$ is the error term at the individual level.

Level 2 of the HLM is the school level. This level explains the effect of different school-level characteristics on adolescents’ academic performance and is also known as the pond effect. The empirical model takes the form as:

$$\hat{\beta}_{jk} = \alpha_0 + \sum_{q=1}^{q} \alpha_{0q} \times z_{jk} + \mu_{0k}$$

(2)

$$\hat{\beta}_{kj} = \alpha_j$$

(3)

where q denotes the number of explanatory variables at the school level, $\alpha_0$ is the constant term of the school level characteristics, $z_{jk}$ denotes the value of the k school individual variable q, $\alpha_{0q}$ is the estimated coefficient of $z_{jk}$, and $\mu_{0k}$ is the residual at the school level, i.e., the school group effect, which is assumed to follow a normal distribution.

Finally, this paper substitutes the school-level equation into the individual-level equation to obtain the complete combined model of HLM in the form shown as:

$$Y_{ij} = X_{ij} + Z_{ij}$$

(4)

$$X_{ij} = \alpha_0 + \sum_{q=1}^{q} \alpha_{0q} \times z_{jk}$$

(5)

$$Z_{ij} = \sum_{j=1}^{j} \alpha_{jk} \times x_{ijk} + \epsilon_{ik} + \mu_{0k}$$

(6)

### 4. Empirical Results and Analysis

#### 4.1. Analysis of the Psychological Status of Adolescents

The descriptive analysis of the data selected for the study showed that the mean value of adolescent mental health variables in the selected sample was 70.68, and the mean value of psychological adjustment ability was 2.03. From the results of the analysis, it can be seen that the mental health level and psychological adjustment ability of adolescents in China are at a low level, with only 0.9% of adolescents having a mental health level of 100. The correlation between physical activity and mental health of our adolescents was analysed by using Pearson’s correlation test, and the results showed a strong positive correlation between physical activity time and mental health, and the p values all passed the significance test. However, it is necessary to analyse whether the relationship between physical exercise and psychological health and psychological adjustment ability still exists under the premise of controlling other influencing factors.

#### 4.2. Multilayer Analysis of the Effects of Physical Activity on Adolescents’ Psychological Well-Being

As shown in Table 5, the estimates of the effect of physical activity use on adolescent mental health are presented in Model 1 for the balanced panel data HLM and in Model 2 for the robustness test. The dependent variable in Model 1 is mental health (mean method) and the dependent variable in Model 2 is mental health. The total variance of student variance is decomposed into the individual level and the school level, and the effects of the variables on adolescent mental health are estimated at both levels. The relationship between the independent and dependent variables at the first level was also estimated to see if the relationship between the independent and dependent variables at the second level changed with changes in the characteristics of the variables in the control variables.

The results of the two models comparing the HLM estimates of the effect of physical activity time on adolescent mental health are shown in Figure 6.

Model 1 shows that the coefficient of the physical activity time variable is 0.025, with a p value of less than 0.01, indicating that participation in physical activity helps to reduce...
negative emotions and improve the mental health of adolescents in China. Specifically, for every 1 min increase in physical activity time, the mental health level of our adolescents increased by 0.025 units. A negative correlation was found between the squared time spent on physical activity and the level of mental health, with a p value of less than 0.01. The results of this study indicate that there is a nonlinear relationship between the time spent on physical activity and the mental health of adolescents, with an inverted U-shaped curve effect.

Robustness testing examines the explanatory power of evaluation methods and indicators, which simply means, whether the evaluation methods and indicators used in this study maintain a more consistent and stable explanation of the evaluation results when certain parameters are changed. The results of Model 2 were the same as those of Model 1, in that the increase in physical activity time helped to reduce negative emotions and improve the psychological well-being of adolescents. In summary, the research hypothesis 1 was validated that there is an inverse U-shaped effect between physical activity time and adolescent mental health, with physical activity having a positive effect on adolescent mental health, but excessive physical activity having a negative effect.

In order to explore whether there was a threshold between the two variables, a linear fit analysis was conducted with physical exercise time as the independent variable and mental health level as the dependent variable, and the results are shown in Figure 7.

The relationship between physical activity time and psychological well-being was calculated using the inverted U-shaped vertex algorithm from Woodridge’s Introduction to Econometrics, and the threshold value of 105 was found, i.e., the positive effect of physical activity time on adolescent psychological well-being was maximised at 105 min per day and tended to decline beyond 105 minutes.

The first level of control variables included individual and family effects on adolescents, and the results showed that males had higher levels of mental health than females, with males having 1.787 units more than females and were statistically significant at the 1% level. Age has a significant effect on the mental health of adolescents as their mental health decreases with age. There was a significant positive effect between family economic status and adolescent mental

![Figure 6: Comparison of the effect of physical activity time on adolescent mental health.](image-url)
health, with each unit increase in family economic status increasing adolescent mental health by 2.489 units. Emotional connection between parents and children also has a significant positive effect on adolescents’ mental health levels, and as emotional connection increases, so does adolescents’ mental health levels, which is also a positive effect.

The second level of control variables was the effect of school on adolescents’ mental health, including school climate and school ranking, and the results of the study showed that: (1) school ranking had a significant negative effect on adolescents’ mental health, and for every 1 unit increase in school climate, adolescents’ mental health decreased by 1.424 units; (2) the presence or absence of health education programmes in schools had a significant effect on adolescents’ mental health, and schools without health education programmes had a negative effect on adolescents’ mental health compared to schools with health education programmes.
4.3. Analysis of Mediating Effects. The mechanisms by which physical activity affects adolescent mental health are complex, and the available literature suggests that physical, psychological, and interpersonal factors may all have an impact on adolescent mental health, in addition to many indirect factors that may also have an important impact on mental health. In this paper, an exploratory analysis was carried out using the KHB mediating mechanism test. The KHB mediating effect test was used to test for the simultaneous presence of multiple mediating variables and to calculate the proportion of indirect effects explained by each mediating variable.

The coefficients of the model were all significant at the 1% level, and physical activity increased adolescents’ mental health. The coefficients of the model were all statistically significant at the 1% level, with physical activity increasing adolescents’ mental health by 0.043, and controlling for mediating variables, the direct effect on adolescents’ mental health was 0.009 and the indirect effect was 0.034.

From the above results, it can be seen that mediating mechanisms such as self-assessment of body image, self-assessment of physical health, sleep time, and confidence play an important role in the causal relationship between physical activity and adolescents’ mental health, but the effect of each mediating variable is not yet clear, therefore, this paper further examined each of these mediating mechanisms using Bootstrap. The results are shown in Figure 8, self-stature assessment and sleep duration did not mediate the relationship between physical activity and psychological well-being, while self-stature assessment, self-confidence, academic stress, peer relationships, and positive peer behaviour had important mediating mechanisms between physical activity and psychological well-being.

5. Conclusion

There are significant correlations between physical activity, mental toughness, academic stress, and psychological well-being in adolescents to varying degrees. Physical activity among adolescents can affect mental health directly, but also through three separate pathways: the mediating effect of mental toughness, the mediating effect of academic stress, and the chain mediating effect of mental toughness on academic stress. In this paper, we analyse and test the correlation between physical activity time, adolescent mental health, and other mediating mechanisms. The experimental results show that there is an inverted U-shaped relationship between physical exercise time and adolescent mental health, with the greatest effect on adolescent mental health when the daily physical exercise time is 105 min, but a decrease when the physical exercise time exceeds 105 min, which is consistent with the actual situation. The results of this study are consistent with the actual situation. The analysis of the mediating factors between physical activity and psychological well-being also revealed that factors such as self-assessment, self-confidence, academic stress, peer relationships, and positive peer behaviour had a significant effect on adolescents’ psychological well-being.

Data Availability

The labeled data set used to support the findings of this study is available from the corresponding author upon request.

Conflicts of Interest

The author declares that there are no conflicts of interest.

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