# Depression And Anxiety Among University Football Players Before Competition: A Comparative Study

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#### Abstract

Depression and anxiety are general terms that refer to the physical, emotional, behavioral and cognitive effects one experiences while undergoing a particular situation. Competitive anxiety is one of the factors to decrease athletes' performance. Feelings of tension, thinking of upcoming events in their mind, nervousness, worry and involved physiological changes such as increased heart rate response are common responses for the athletes before the competition. Some athletes are so involved with things of fear, unhappiness, guilt, discouragement, and focus distraction. The present study aimed to examine the depression and competitive state anxiety among university male and female football players before the competition. For this purpose, a total no. of 100 players (ages 18-25 years, with a mean age of 21.06 years (±4.8) was selected and a survey method was conducted to know the opinion of players on depression and competitive state anxiety. The results showed that there was a significant difference (p<0.05) between the mean score of males' depression and anxiety levels than female University Football Players before the competition.

Keywords: Anxiety, Depression, Football, Players and University.

#### Introduction

A feeling of sadness and misery that is "generally accompanied by diminished self-esteem and ranges from feelings of inadequacy to incompetence to a full-blown delusion" is what is meant by the definition of depression. People who present as depressed experience both physical and mental symptoms. In addition to delayed reactions and an air of indifference, severely depressed patients may have weight loss, sleeplessness, or appetite loss. They typically express discomfort in the form of pains, aches, and other somatic sensations that could be either psychophysiological or delusional" (LeMoult & Gotlib, 2019). It may be challenging for medical experts to discern between physical sickness and depression when making a diagnosis. Bipolar disorder and depressive disorders are two more subtypes of mood disorders that include depression. An individual's mood disturbance is a distinguishing trait of these diseases. When a person experiences intense, long-lasting emotions that significantly influence how they perceive the world, a mood disorder may develop. Regardless of the type of depression a person has, there are typically specific symptoms that make it difficult for them to function for extended periods. Furthermore, those who have been diagnosed with depression typically report having very poor social skills and occasionally having a strong desire to commit suicide (Paykel, 2022). Depression can be a passing sadness or a severe mental disease that requires medical attention. Those who are affected typically exhibit a variety of symptoms, including a disrupted mood, feelings of guilt or low self-worth, disturbed sleep or eating, lack of interest or pleasure, low energy, and difficulty concentrating. These issues might reoccur or become prevalent, which makes it very difficult for a person to attend to their daily tasks. Depression, which is pervasive in modern society, is ranked by the WHO as the fourth largest contributor to the global burden of disease in terms of years of life affected, second among teenagers and people under the age of 45 (Kumar et al., 2012).

Perfectionism in athletes has been linked to traits that may impede success in sports where players are expected to achieve flawless performance outcomes (Flett et al., 2005).

Competition is a social phenomenon that happens when people are rewarded based on how well they perform in comparison to other people who are performing the same work or taking part in the same event (Woods & Butler, 2020). One way to think of state anxiety is as a worldview that a person employs to cope with situations in his or her surroundings. State anxiety is thought to be more situational in origin and is frequently linked to the activation of the autonomic nervous system. The performance might be negatively impacted by anxiety symptoms such as chilly, clammy hands, continuous urination, excessive sweating, negative self-talk, sickness, headaches, dry mouth, increased muscular tension, stomach butterflies, and difficulty focusing (Hirsh& Kang, 2016).

An unpleasant state of tension and dread associated to fear but not centered on an item of immediate danger" is how anxiety is described. Autonomic symptoms of anxiety commonly include tachycardia (increased heart rate), sweating, dry mouth, and occasionally hyperventilation. The perception of the autonomic changes, especially palpitations (tachycardia) and lightheadedness (hyperventilation) is demonstrated to increase as a result of the autonomic symptoms. It can be challenging to pinpoint the root cause of primary anxiety disorders (those that manifest without a clear physical or environmental etiology). To increase athletic performance through better physical and mental training, psychology is becoming more and more involved with athletes, coaches, and trainers (Lopes et al., 2020). Sports psychologists must take into account the two distinct truths of Depression and Anxiety to support athletes' optimal performance (Muir et al., 2020). Therefore, the aim of the present study was to compare the depression and anxiety scores in university male and female football players.

## Methodology

The present study was conducted on university male and female football players to compare their depression and anxiety levels before their competition. For this purpose, a total no. of n=50 male and n=50 female players from local and public universities of Lahore, table, 3.1)

### Table 1.1 Male and Female players' Strength

Sr. No.	University	Players		
		Male	Female	
1	University of the Punjab, Lahore	14	12	
2	University of Central Punjab, Lahore	12	-	
3	Lahore College for Women University,	-	15	
	Lahore			
4	University of Lahore	12	12	
5	Govt College University, Lahore	12	11	
	Total Players	50	50	

The total sample was 100 players' ages 18-25 years old from different universities of Lahore. The convenient sampling technique was used for data collection. The selection of a research tool for data collection is depended on the nature of the problem to be studied. Researchers used two adopted questionnaires one on depression and the second on Competitive State Anxiety. Beck Depression Inventory (BDI) was developed by Beck et al. (1961). It was contained on 21 statements and a 4-point Likert Scale was used to get the perception of football players on statements. Whereas, The Competitive State Anxiety Inventory-2 (CSAI-2) was developed by Martens et al. (1999). It consisted of 27 statements and a 4-point Likert Scale was used to get a possible response by universities' male and female football players on statements. The collected data was analyzed and tabulated by software SPSS 25. Independent t' test administrated used to compare the depression and state anxiety levels among universities male and female football players.

# **Results**

Table No.1 Independent Samples t Test of Depression Score male and female University Football Players before Competition

	Variable	n	M	SD	t	Р
#						
1	Depression Score male University Football	50	45.90	9.49	.419	***
	Players before Competition					
2	Depression Score female University Football	50	40.00	10.73		
	Players before Competition					

Table 1 shows the results of the Independent Samples t-Test of Depression Score for male and female University Football Players before Competition. Depression Score male had a mean of 45.90 and Depression Score female mean of 40.00. This table shows that there was a significant difference (p<0.05) between the mean score of Depression male and female University Football Players before Competition.

Table No2 Independent Samples t Test of Anxiety Score male and female University Football Players before Competition

	Variable	n	М	SD	t	Р
#						
1	Anxiety Score male University Football Players before Competition	50	69.10	9.71	2.00	*
2	Anxiety Score female University Football Players before Competition	50	61.30	7.54		

Table 2 shows the results of the Independent Samples t-Test of Anxiety Score for male and female University Football Players before Competition. Anxiety Score male had a mean of 69.10 and Anxiety Score female mean of 61.30. This table shows that there was a significant difference (p<0.05) between the mean score of Anxiety male and female University Football Players before Competition.

# **Conclusion and Discussion**

The main reason for this research was to compare the depression and anxiety level of male and female players before competition. This research was descriptive by nature and survey method was used to know the opinion of players on depression and anxiety. The population of this study consisted of players in varsity games. There was a total no. of 100 participants selected as sample size.

Accordingly, to depression and anxiety, the results showed that there was a significant difference (p<0.05) between the mean score of male and female University Football Players before the Competition. The results of the present study are supported by the previous study. Depressive and anxiety disorders significantly greater risk in females than in males (Altemus et al., 2014). According to earlier research on the resilience theory, athletes' resilience

can be greatly improved by improving their assets and skills, such as coping, problem-solving, self-efficacy, emotional control, and intelligence. Additionally, resilience can be improved by having a positive view of the resources available from family and the community (Wang et al., 2015).

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