

A Study to Determine the Prevalence and Risk Factors for Depressive Symptoms Among Football Players with a History of Injury: A Literature Review

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Abstract: Football is the most popular sport played in the world and it demands a lot not only physically but also psychologically on the players. Although the main research focus of sports science has been on injury prevention and physical performance, new studies have demonstrated that sports-related injuries have significant mental health implications, most notably, depressive symptoms. The paper will assess the relationship between football injuries and depressive symptoms by integrating six peer-reviewed studies that assessed the same at professional, semi-professional and amateur levels and in different cultural and gender settings. These research prove that injury is a significant stressor that triggers the occurrence or aggravates the symptoms of depression, though the impact depends on gender, level of competitiveness, culture, and the timing in the career of an athlete. Longitudinal studies show a highly significant support to the directional hypothesis i.e. severe musculoskeletal injury predicts future depression and anxiety, but depressive symptoms do not predict injury. Furthermore, accumulation of psychological stress over the course of a competitive season, tensions with coaching team members, and cultural norms may make one susceptible to depressive reactions. The paper is concluded by implications on sports medicine and athletic training, coaching and interdisciplinary rehabilitation protocols.

Keywords: Football; Injury; Depression; Athlete Mental Health; Anxiety; Sports Psychology.

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I. INTRODUCTION

Football being the most popular sport in the world needs outstanding physical, technical and psychological performance. In spite of the fact that the research of physical conditioning and injury prevention remains the leading one in the field of sports science, the mental health outcomes of injuries, especially of depressive symptoms, are becoming increasingly popular. According to recent researches, a football player undergoes a special form of psychological pressure both associated with the demands of competitions and the social pressure, as well as a constant threat of being injured. Such stressors are more pronounced in situations where there are injuries, which tend to cause emotional imbalances such as anxiety, stress, and depression (Ito et al., 2023).

According to cognitive appraisal model (Wiese-Bjornstal et al., 1998), the emotional reaction of an athlete to injury is greatly reliant on the way the injury is perceived which entails the loss of identity, decreased self-worth and fear of not being able to perform at the same level as prior to

the injury. In addition, studies indicate that the correlation between injuries and mental health is cumulative and, very directional. Such serious injuries can result in depressive symptoms in the further career of the athlete (Kilic et al., 2018; Burger et al., 2025).

The purpose of this paper is to review six studies examining depressive symptoms among football players in relation to injury. This analysis aims to identify patterns, determinants, and practical implications for clinicians, trainers, and coaches.

II. METHODS

The paper is a synthesis of six original research studies on the relationship between football injuries and depressive symptoms that are peer-reviewed. The presented studies represent various populations: professional players in Japan (Ito et al., 2023), elite German youth and professional players (Burger et al., 2025), amateur male players (Jansen et al., 2019), elite female professionals (Prinz et al., 2016), mixed-gender futsal and football players (Olmedilla et al., 2018),

and multinational professional players in a longitudinal study of injuries (Kilic et al., 2018).

All the studies assessed depressive symptoms with validated measurements of PHQ-9, CES-D, DASS-21, GAD-7, and GHQ-12. These approaches are retrospective survey, cross-sectional design, prospective cohort follow-up, and multi-point longitudinal measurements. Such variables as current injury status, injury history, injury number of severe injuries, psychological characteristics, anxiety levels, and career-related stressors will be analyzed.

III. RESULTS

➤ *Cross-Cultural Dissimilarities in Expressing Depression*

Ito et al. (2023) discovered that 9.4 per cent of male professional football players in Japan had depressive symptoms, but there was no correlation between depression and injury. These differences can be explained by cultural norms that focus on emotional control and fear of being selected.

➤ *Seasonal Cumulative Mental Strain*

Burger et al. (2025) demonstrated that depressive symptoms were linearly increasing during the competitive season. Depression and anxiety levels were greatly high among female players as compared to males. The trait-like stability was more powerful than the state fluctuations underlining the long-term vulnerability.

➤ *Amateur Player Findings*

According to Jansen et al. (2019), the prevalence of depression was 13.47 percent among the amateur players. The same result was found with higher anterior injuries in the first season, which was linked to higher anxiety, though later injuries could not be predicted by the baseline anxiety.

➤ *Long-Term Career Effects on Female Playwrights*

Prinz et al. (2016) found that career-time prevalence rates of depression in high-level female players were high. Although total injuries were not directly related to depression in playing years, there was an accumulated injury burden that predicted post-career depression. Disagreement with coaches was highly predictive of depressive symptoms.

➤ *Gender-Specific Injury Responses*

Olmedilla et al. (2018) did not report any immediate differences in depression among the injured and non-injured players. Nevertheless, the males that sustain injuries were found to have greater anxiety, and females had greater stress even when unharmed.

➤ *Causality of Injury to Mental Disabilities*

Kilic et al. (2018) presented substantial proof of unidirectional causality: severe injuries (time-loss: >28days) greatly heightened the prospect of achieving depressive and anxiety indications in the following 12 months. Preexisting depression was not a predictor of injuries.

IV. DISCUSSION

In all the six studies, there are commonal patterns. Severe injuries are a common psychological stressor, which in many cases results in a depressive state and other psychological challenges. Longitudinal data support a causal relationship between injury and depression and not the other way round. Nevertheless, the psychological impacts of injury differ among the different genders, cultural context, and degrees of play.

Women athletes are more susceptible to cumulative stressors and in many cases, they indicate disagreement with coaches' staff as one of the biggest contributors of depressive symptoms (Prinz et al., 2016). Cultural factors, including the Japanese workplace, can also change the key predictors of distress and move them not towards physical injury but towards social anxiety and stigma of performance (Ito et al., 2023).

Due to the expectations and competitive pressures, amateur players have a high level of psychological distress despite the reduced stakes of the profession and are often motivated by them (Jansen et al., 2019). Also, seasonal accumulation of strain (Burger et al., 2025) illustrates that depressive symptoms may be augmented over time not only when there is an acute injury but also when performance is demanded on a long-term basis.

In general, it is indicated that the psychological reaction to injury is multifactorial and depends on the severity of the injury, the identity of the athlete, the social relationships, the stressor related to the gender, the cultural pressure, and the stage of the athlete's career.

V. IMPLICATIONS

➤ *Compulsory Psychological Examinations*

After serious time-loss disorders (>28 days), legitimate psychological health examination instruments like PHQ-9 or GAD-7 must be introduced into rehabilitated guidelines (Kilic et al., 2018).

➤ *Mental Health Monitoring over the Course of a Season*

Since depression has a cumulative effect throughout the season, psychological support needs to be integrated as opposed to crisis-oriented by teams (Burger et al., 2025).

➤ *Gender-Specific Strategies*

Specific interventions to deal with coaching conflict, recognition, and chronic competitive stress are required with female players.

➤ *Culturally Adequately Customized Direction*

Certain stressors within the sociocultural frameworks must be tackled with respect to mental health strategies- the stigma and anxiety that are focused on vis-a-vis Japanese football populations.

➤ *Education of Communication and Coaching*

This can be achieved by training coaches on how to manage the conflicts and how to communicate in a constructive way, which lowers the psychological damage, especially among female athletes.

➤ *Identity and Career Transition Support*

Cumulative injury burden should be a predictor of post-career depression; hence, players who are almost retiring must have access to mental health counseling and career identity development services.

VI. CONCLUSION

All the evidence presented proves that injuries among football players are a major factor leading to depressive symptoms, but this association differs in the degree and character depending on gender, level of competition, and culture. Serious injuries are significant psychological stress factors that have a long-term outcome, and accumulative mental stress during a season also leads to depressive states. The mental health issues of football players are complex, and interdisciplinary care, constant observation, and culturally competent intervention strategies are required. The awareness of those trends can enhance better rehabilitation results, greater well-being of athletes, and help create sports performance environments that are more holistic.

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