

# Prevalence And Effect Of Anxiety Among The Football Players From Different Cultural Backgrounds

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## Abstract

Sports and anxiety have long been associated, and the story of anxiety has been as old as sports itself. It has been a natural phenomenon and its prevalence has also been spontaneous for every individual. Anxiety has got two different modes e.g. cognitive and somatic and prevalence of both is common in the field of sports. Main objective of the study was to measure the prevalence of anxiety among the respondents (N-174) from four different cultural backgrounds. Respondents from Punjab (N-61), Sindh (N-52), KPK (N-40) and Baluchistan (N-21). For the collection of data, Competitive State Anxiety Inventory –2 was used. Results of the study have confirmed that higher prevalence of cognitive anxiety was displayed by the players from Punjabi culture. In perspectives of the somatic anxiety, higher prevalence rate was shown by the players form the KPK culture. Player employ different types of coping strategies to reduce anxiety. Positive thinking, focusing upon controlling the causative factors, self-talk, simulation, engaging in physical activity and self-trust are the main elements which play positive role in reducing the cognitive anxiety. Similarly, for the reduction of somatic anxiety, its coping techniques include relaxation of the body, long breathing, meditation, walking, body massage, exercise and healthy diet.

**Keywords:** Player, Sports, Culture, Anxiety, Performance

## Introduction

The term anxiety refers to the psychological condition feeling threat or fear on account of presumptive situation as being dominant and threatening in comparison to the capabilities. More or less, it has mostly been negative in nature affecting normal functioning of the

body (Joan, 2018). Anxiety is associated with the negative feelings mostly linked with threat of failure either in competition or any other undertaking of life (American Psychiatric Association, 2013). As a matter of fact, anxiety has been a natural phenomenon and everyone is equally prone to it particularly in a

situation when confronted to a serious problem, facing any critical situation or stuck in a position where vital decision is being taken. Overwhelming and dominant state of anxiety is harmful which deteriorates performance, renders the person touchy, and makes the victim idle in terms of avoiding any demanding undertaking or confronting any difficult situation. In common cases with reference to sports setting, anxiety may have complex behavioural, physiological and cognitive symptoms with different manifestations.

In general perspectives, cognitive and somatic are the two different states of anxiety which have different nature and manifestations. With reference to anxiety, either it is cognitive or somatic, both are the issues related to mental health. On account of external stimuli, additional chemical reactions take place inside the brain which disrupt normal functioning of the brain and it results in the inception of anxiety (Zadkosh & Hemayattalab, 2019). Performance in front of the spectators, disappointing past performance, fear of injury and defeat, assumption regarding the better performance of the rival team, pressure of venue, high expectations of the fans and other stakeholders, fear of selection and future prospects are a few dominant factors for triggering either; cognitive or somatic form of anxiety among players.

Symptoms and manifestations of cognitive anxiety are shown within the brain in terms of fear, worries and thinking whereas symptoms and manifestations of the somatic anxiety tend to appear physically. Fear of happening the worst, worries about the outcomes, uncertainty, panicky behaviour, concentration issues, negative feelings and state of hopelessness, expecting frustrating results are the main characteristics of cognitive anxiety (Williams and Jackson, 2019). The common perception regarding cognitive anxiety is that it negatively affects performance in a competitive environment (Gallucci, 2008). On the other hand, somatic type of anxiety is more concerned with the physical manifestation of

symptoms of anxiety like muscular stiffness, abdominal pain, sweating, headache, elevated heart rate, rapid respiration, fatigue and insomnia (Chen, Tsai, Lin, Chen, & Chen, 2019). According to the American Psychiatric Association (2013), Vomiting, fast and deep breathing, rapid heartbeat, muscular tightness in the body, unusual perspiration, headache and stomachache are the most common symptoms of somatic anxiety.

This research study was conducted with the viewpoint to evaluate the likeliness of the happening of anxiety among different cultural groups from various regions of Pakistan. Football players from four provinces of Pakistan were taken as population for this study. Research has confirmed association of the cultural identity with the different psychological and physiological variables and it has also been confirmed that certain cultural groups tend to react in a more intense while other in a milder manner, similarly, some appear to become victim of anxiety more easily and rapidly and the other resist it, and same is the case with confronting challenging situation; one cultural group faces difficulty in dealing with crises while the other react to threatening situation more promptly (Nguyen & Brymer, 2018). The term culture refers to the modifying pattern of molding behavior in terms of attitude, way of interaction, customs, traditions, values and knowledge transferred from person to person as a never ending process (Soyinka, 1991). The canvas of culture includes whatever a person thinks, observes, watches, touches (Nurlaila, Yuliar & Gharaei, 2013). In light of the population statistics of Pakistan available on the website of Bureau of Statistics of Pakistan, according to the census 2017, total population of Pakistan comprised of 207684626 persons. Major segments of population in Pakistan comprised of Punjabi, Sindhi, Phathan, and Balichi having their own distinct languages, cultures, values, traditions, customs and way of living. Punjab, being the most populous province of Pakistan has population of 109,989,655 person followed by Sindh with 47,854,510, Khyber Pakhtunkhwa

30,508,920 and Baluchistan 12,335,129 persons with the corresponding percentage of 52.95%, 23.04%, 14.69% and 5.93% in each province respectively. Territorial jurisdiction of Pakistan comprised of an area of 796,096 square kilometer where these four main segments of population are settled; meaning that there are four diverse cultures are followed in the widespread territory of Pakistan.

### Literature Review

A wide range of consensus exists among the perception and findings of the research studies in respect of the ill consequences of anxiety with reference to deteriorating sports performance, having damaging impact upon the players (Ortiz, 2006). Similarly, common agreement is also present among the sports sociologists regarding the harmful effect of anxiety upon sports performance which, in some cases ends at the dropout of the player (Quinton et al., 2018). In addition to undermining sports performance anxiety also has the potential to cause insomnia, low self-confidence, muscular spasm, loose temper, hostile behavior, loss of self-esteem and irritation (Cox, 2010). Since anxiety has been a psychological phenomenon, it may cause uncertainty and insecurity and finally it hampers one's health and wellbeing (Falgares et al., 2017)

Issues related to anxiety, depression and stress have the part and parcel of sports career. In the field of sports, player is the pivot round which the whole story of play revolves. Walter, Nikoleizig, & Alfermann (2019) have confirmed that perhaps anxiety is the sole dominant psychological factor that result in incapacitating the player more than any other trait of human psychology. Problems of anxiety associated with players have been focused in a number of studies and considerable work has been done in this context and experts agree to the fact that anxiety has been discussed from different angles more than any other psychological issue of the players (Wu et al., 2021). As

discussed earlier, roots of the anxiety stem back with the mode of thinking of one's own pluses and minuses in terms of capabilities and performance. In many cases, misconception and miscalculation of the player work as the causative factor for triggering the state of anxiety (Weinberg & Gould, 2010).

Anxiety related issues appear in different forms, at different timings and players remain always prone to it prior to the competition, during and after competition. It is one of the prime responsibilities of the coach to keep a constant eye upon performance as well as psychological state of the player during the course of coaching. Player often needs guidance and counselling particularly in a situation when they find themselves unable to overcome the situation and make a right decision. Research has confirmed findings of the examination that most of the players seeking counselling and guidance in their performance related matters, were found to have been in the state of anxiety (Walter, Nikoleizig, & Alfermann, 2019). Nixdorf, Frank and Beckmann (2016) also affirm the same stance claiming that at the world level sports competitions, majority of the counselling related sessions between the players and their trainers and coaches were the result of anxiety of the players. In addition to counselling with the coach, player often use different types of unfair means to reduce and overcome the situation. Research has also confirmed that use of different types of drugs by the players has also been one of the ways to escape of anxiety and do good at the activity (Wu et al., 2021).

A number of studies have been conducted in perspectives of coping strategies regarding reducing the level of anxiety among the players (Richards, 2004). To reduce the intensity of anxiety, and enable the player to show their optimum performance, focused efforts are required to address the specific point of concern of the player. Since cognitive and somatic are the two different types of anxiety, its coping techniques need to be focused on both. Positive thinking, focusing

upon controlling the causative factors, self-talk, simulation, engaging in physical activity and self-trust are the main elements which play positive role in reducing the cognitive anxiety (Williams and Jackson, 2019). Similarly, in the event of somatic anxiety, its coping techniques may include relaxation of the body, log breathing, meditation, walking, body massage, exercise and healthy diet (Wolanin, Gross and Hong, 2015).

### Methodology.

The study was conducted upon the respondents from diverse cultures of four provinces of Pakistan. Sample comprised of 174 players of Football from Punjab, Sindh, KPK and Baluchistan province. Respondents from Punjab (N-61), Sindh (N-52), KPK (N-40) and Baluchistan (N-21). Sample for the study was randomly taken from the University Football players from different universities of the four provinces during the annual Intersarsity Football competition held at different venues.

Collection of the data from different cultural groups was an important assignment on part of the researcher. The researcher employed the Competitive State Anxiety Inventory-2, it has widely been used as an effective tool for

collecting relevant information regarding the prevalence of cognitive and somatic anxiety among the respondents. The scale contains 27 different items encompassing both cognitive and somatic modes of anxiety as well as level of self confidence among the respondents. Worry, loss of concentration, low self-esteem, uncertainty, feeling weakness and fear are measured for cognitive anxiety whereas muscular pain, rapid heartbeat, headache, stomachache, deep breathing is considered for somatic anxiety.

### Results

#### Prevalence rate of the Cognitive Competitive Anxiety

The data were analyzed by one-way ANOVA to measure the prevalence of the cognitive anxiety in different groups of the Football players from different culture representing four provinces of Pakistan e.g. Punjab, Sindh, Khyber Pakhtunkhwa (KPK) and Baluchistan. Highly significant differences were observed in the prevalence of anxiety among the different cultural groups of Football players as shown in the figures in the following table that  $F(3,147) = 16.061$ , which is highly significant at  $p < .01$ .

**Table 1. Showing Prevalence of the Cognitive Anxiety among the Football players from different cultures**

Groups of the Football players from different Cultures	Mean	Value-F	Value-p
Punjab	21.1112		
Sindh	13.0455		
KPK	16.6141	16.061**	0.000
Baluchistan	15.8025		

\*\*  $p < 0.01$

For the analysis of data, Post-Hoc Tukey Test was used which reflects lower level the prevalence of cognitive anxiety in the players

from Sindhi culture as compared to players from Punjabi culture ( $p < 0.05$ ), players from KPK culture ( $p < 0.05$ ) and players from

Baluchi culture. Further that, higher prevalence of the cognitive anxiety was observed in the respondents from KPK culture in was higher in comparison to the players from Sindhi culture ( $p<0.05$ ) and players from Baluchistan culture ( $p<0.05$ ), however, it was lower in comparison

to the players from Punjabi culture. Similarly, the prevalence of the cognitive anxiety in the respondents from Punjabi culture was higher in comparison to the players from KPK culture ( $p<0.05$ ), players from Sindhi culture ( $p<0.05$ ) and players from the Baluchi culture.

**Table 2. Showing prevalence rate of Cognitive Anxiety in the Football players from different cultures (Post Hoc Tukey Test)**

Groups of the Football players from different Cultures	Punjab	Sindh	KPK	Baluchistan	N
Punjab		*(2.564)	*(3.223)	*(2.228)	61
Sindh			*(2.332)	*(3.776)	52
KPK				*(1.442)	40
Baluchistan					21

\* $p<0.05$

Prevalence rate of Somatic Competitive Anxiety among the Football players from different cultures. To analyze the data, one-way ANOVA was used which reflects highly significant differences in the prevalence rate of

the somatic competitive anxiety in the Football players from different cultures of Pakistan,  $F(3,147) = 14.992$ , which is highly significant at  $p<0.01$ .

**Table 3: Showing Prevalence rate of the Somatic Anxiety in the Football players from different cultures**

Groups of the Football players from different Cultures	Mean	Value-F	Value-p
Punjab	15.4283		
Sindh	13.3102		
KPK	18.3292	14.992**	0.000
Baluchistan	13.3378		

\*\*  $p<0.01$

For the analysis of data, Post-Hoc Tukey Test was employed which reflects low prevalence rate of the somatic anxiety in the player from Sindhi culture in comparison to the players from the Punjabi culture ( $p<0.05$ ) and players from KPK culture ( $p<0.05$ ), and there was no differences with the players from Baluchistan

culture. Further that, the prevalence rate of the somatic anxiety in the respondents from KPK culture was higher in comparison to the players from Sindhi culture ( $p<0.05$ ), players from Balochi culture ( $p<0.05$ ) and players from Punjabi culture. However, higher prevalence rate of somatic anxiety in the

respondents from Punjabi culture was observed in comparison to the players from Sindhi culture ( $p < 0.05$ ) and players from

Baluchi culture ( $p < 0.05$ ), and it was lower than the players from KPK culture.

**Table 4. Showing prevalence rate of Somatic Anxiety in the Football players from different cultures (Post Hoc Tukey Test)**

Categories According to Culture of Football players	Punjab	Sindh	KPK	Baluchistan	N
Punjab		*(1.238)	*(1.443)	*(1.118)	61
Sindh			*(2.443)		52
KPK				*(1.448)	40
Baluchistan					21

\* $p < 0.05$

5

## Discussion

The study has concluded that the prevalence of cognitive anxiety was measured higher in the respondents from the Punjabi culture as compared to the respondents from the other cultures while lowest prevalence of cognitive anxiety was observed among the respondents from the Sindhi culture. The result confirms that high prevalence rate of cognitive anxiety among the respondents from Punjabi culture was simply because of their prompt response to the game related issues which resulted in the increased prevalence rate of anxiety. This all happened naturally and can be linked with the cultural background. Cognitive anxiety is associated with the negative feelings, fear of failure, miscalculation of the strength of the opponents and worry (Love et al., 2019). This type of situation may lead to the prevalence of cognitive anxiety among the players (Broadbent et al., 2019). The in-hand study has confirmed the link between the cultural background and anxiety as concluded by Varela et al. (2004) that symptoms of anxiety differ from culture to culture. Similarly, Kirkby and Liu (1999) have reported variation

in the cultural background in responding to the anxiety.

In perspectives of somatic anxiety, the study has concluded its higher rate of prevalence in the respondents having cultural background from KPK as compared to the respondents from the other cultures while lowest prevalence of cognitive anxiety was observed among the respondents from the Sindhi culture. Somatic anxiety has physical manifestation and symptoms like muscular stiffness, abdominal pain, sweating, headache, elevated heart rate, rapid respiration, fatigue and insomnia. Inadequate amount of water in the body may tends to cause somatic anxiety (Ganioa et al., 2011). Further research is needed to establish the relationship of presence of proper amount of water in the body and avoidance of anxiety. Michelle (2012) also has the same stance about the presence of adequate amount of water in the body and escaping the anxiety. Since the culture includes whatever a person thinks, observes, watches, touches; so varied responses from the respondents having different cultural backgrounds is likely to appear to the same stimulus.

## Conclusion

Cultural background, life pattern and social setup of life have got close association with the behavioural and psychological reaction of a person. Reaction to an identical stimulus may differ from person to person and culture to culture either it is anxiety, threat, fear or any other physical or psychological issue. The study has confirmed that the prevalence of cognitive anxiety was noted higher in the respondents from the Punjabi culture as compared to the respondents from the other cultures while lowest prevalence of cognitive anxiety was observed among the respondents from the Sindhi culture. The result confirms that high prevalence rate of cognitive anxiety among the respondents from Punjabi culture was simply because of their prompt response to the game related issues which resulted in the increased prevalence rate of anxiety. This all happened naturally and can be linked with the cultural background. In perspectives of somatic anxiety, the study has concluded its higher rate of prevalence in the respondents having cultural background from KPK as compared to the respondents from the other cultures while lowest prevalence of cognitive anxiety was observed among the respondents from the Sindhi culture. The players having proper coping proficiency in dealing anxiety tend to perform better as compared to their counterpart deficient in coping skill (Gredin et al., 2018). To better deal with the situation, in-depth research is required to device practical coping skills for affective management of the anxiety among the players different cultural backgrounds.

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