



## Article

# Analysis of Mental Health Programs and Their Relationship to Injuries in Football Players: A Systematic Review

Amer Mishaal Faihan\*<sup>1</sup>

1. Republic of Iraq Ministry of Education General Directorate of Education In Anbar

\* Correspondence: [amermushal1966@gmail.com](mailto:amermushal1966@gmail.com)

**Abstract:** The implementation of mental health programs within athletic settings provides an opportunity to address the challenging psychological demands currently experienced by college athletes. Mental health issues in sports have received increased attention in recent years because of their significant personal, social, and financial consequences. Mental health disorders affect individuals who participate in sports with a prevalence comparable to that found in the general population. The mental health of athletes must be evaluated to improve the support they receive during injury and rehabilitation. Football continues to be a widely practiced sport worldwide with a high injury rate. Close to 50% of injuries in football are severe and result in a prolonged absence from the field. There is a tendency to neglect the psychological consequences of this injury and mainly focus on the diagnosis and treatment of the injury. The aim of this review was to highlight the relationship between injuries and the implementation of mental health programs. The inability to meet mental health needs following a period of injury might contribute to the perpetuation of injuries among players. In football, mental health programs play an important role in reducing the rate of injuries.

**Keywords:** Mental Health Programs, Injuries, Football Players, Systematic Review

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## 1. Introduction

Mental health constitutes a truly critical component of overall health, a concept defined by the World Health Organization as a comprehensive and holistic state of well-being enabling individuals not only to manage stress effectively but also to work productively in their various capacities and contribute meaningfully to their communities [1]. In the realm of mental health care, the identification of various disorders is absolutely paramount and must precede the application of therapeutic principles that are specifically designed to alleviate suffering and enhance overall functioning. Each individual consistently strives for a profound sense of well-being and balance; however, various injuries frequently disrupt both mental and physical functioning in significant and often troubling ways, highlighting the acute need for comprehensive mental health support following such events. Injuries represent prevalent and substantial stressors, particularly among athletes, with the overwhelming majority of collegiate athletes sustaining some form of injury during their athletic careers [2], [3]. A single incident can affect individuals profoundly and deeply, influencing cognitive processes and a vast range of emotions even in the absence of visible physical marks such as fractures or other internal injuries). Football, in particular, is characterized by a notably high injury rate, which raises urgent

concerns about the athletes' mental health and well-being. Within this demanding sport, mental health services undergo comprehensive evaluations to determine whether specific programmatic interventions effectively reduce injury incidence and ensure athlete safety [4]. Psychological factors such as reduced self-confidence, anxiety related to the possibility of reinjury, and diminished motivation have been shown through extensive research to significantly increase injury risk, thereby underscoring the importance of addressing mental health as a crucial and essential component of robust injury prevention strategies. The intricate relationship between physical and mental health highlights the necessity for a multi-faceted approach that incorporates both aspects into care practices aimed at fostering resilience and recovery for athletes in the wake of injuries [5].

Mental health among college students, and athletes in particular, is an important concern for sport medicine professionals and educators. Secular increases in symptoms of anxiety and depression among the general college population are reflected by similar increases among athletes [6]. Athletic injuries present a risk factor for poor mental health outcomes, as they often isolate athletes from their social supports and impose psychological and physical challenges during rehabilitation.

Although all athletic injuries can negatively impact one's mental health, the initial physical and psychological effects of concussions are of particular concern. Concussions can result in physical symptoms, such as nausea, headache, and dizziness, and psychological symptoms, such as sleep disturbance, anxiety, and depression [7], [8]. A wide variety of strategies have been implemented in an attempt to meet the mental health needs of athletes, including outreach programs, mental health education, engagement of influential teammates, active identification, and referral systems designed to link athletes with qualified professionals. Although mental health programs have been developed to address needs of athletes, athletes remain uncertain regarding the benefits of these programs, and continue to experience significant barriers to engagement [9].

Football injury rates and risks have remained a huge concern. Football players have an elevated risk of injury compared to all other high school and collegiate sports, as well as recreational activities, such as cycling and skiing [10]. If proper summative and analytical meta-analyses can be constructed, the behavior of injuries can be better understood, potentially leading to improved prevention mechanisms. One promising direction comes from the recent development of online mental health programs. Injured athletes have accepted the use of the programs and have expressed the desire for continued and increased use. The effects of the programs themselves have, however, yet to be realized.

Interest has grown in the mental health of elite athletes, reflecting a societal focus on mental health issues broadly [11]. The mental health and psychological wellbeing of elite athletes have been examined less extensively than the physical impacts of sport participation. Elite athletes can experience depression, anxiety, and eating disorders comparable to the general population and occasionally at higher rates. Athletes can also be prone to substance abuse. These observations have driven consideration of mental health interventions applicable to athletes in both elite and non-elite sporting contexts. Inclusion of structured mental health programmes in professional sports has increased in recent years, aiming to support athletes in coping with stress, managing difficult life experiences, and promoting recovery from injury. Nonetheless, stigma and potential impacts on career progression still present relevant barriers to seeking professional support [12], [13].

In professional football, the risk of injury is substantially higher than in most industrial occupations, with about five time-loss injuries occurring per 1000 match hours. A squad of 25 players is therefore likely to experience at least 50 such injuries during a typical season. Time-loss injuries, defined as those requiring medical treatment ranging from several days to several months, significantly disrupt team performance [14]. The

financial burden associated with these injuries can be considerable, and injuries beyond a critical severity threshold may even precipitate premature retirement. Psychological factors including trait anxiety, stress, and the accumulation of daily hassles have been shown to influence the risk of sustaining an injury [15], [16]. Consequently, there has been increasing attention directed towards symptoms of distress, anxiety, depression, sleep disturbances, and substance abuse as prevalent mental health concerns among professional football players.

Mental health problems among professional football players yield negative consequences for individual players, the team, and society. A comprehensive understanding of mental health problems in relation to injury is lacking. The overarching purposes of this systematic review were to determine the existing mental health programs and their relationship to injuries in football players [17]. Four electronic databases (PubMed, PsycINFO, SPORTDiscus, and Web of Science) were systematically searched according to PRISMA guidelines, with 14 articles meeting the inclusion criteria. The selected studies involved participants with a mean age ranging from 19 to 46 years. The sport of football was examined over various seasons. Mental health programs and techniques identified and applied among football players included guided written disclosure, mindfulness-based stress reduction (MBSR), cognitive-behavioural therapy (CBT), cognitive-behavioural stress management (CBSM), a combination of MBSR and acceptance and commitment therapy, online interventions, and skill-based programmes. Not all studies found a positive relationship between mental health programmes and injury rates. Psychological aspects such as psychological pressure, fear of adverse consequences of injury, social issues, and stress may contribute to a higher incidence of injury [18], [19]. Consequently, mental health programmes that ensure positive mental health are potentially helpful in lowering injury likelihood, requiring proper establishment within athletic settings.

## 2. Materials and Methods

The review adhered to PRISMA guidelines. Searches were conducted in PubMed, Medline, Google Scholar, and Diva Portal up to June 2023. Inclusion criteria encompassed prospective and retrospective studies, systematic reviews, and meta-analyses involving male football players aged 18 or over for professionals and 17 or over for amateurs. Participants had to be active in senior leagues or international tournaments, and studies required data on injury incidence, location, type, or severity. Eligible publications were full-text articles or abstracts in peer-reviewed journals, written in English. Exclusion criteria covered protocol studies, research involving women or minors, incomplete data, divergent injury definitions, and investigations of sports other than football. Additionally, literature reviews, non-conclusive abstracts, editorials, and letters were omitted from consideration, see Table 1.

**Table 1.** Inclusion and Exclusion Criteria for the Systematic Review.

Category	Details
Databases	
Searched	PubMed, Medline, Google Scholar, Diva Portal
Study Design	Search was conducted up to June 2023. • Prospective studies   • Retrospective studies   • Systematic reviews   • Meta-analyses
Participants	• Male football players   • Professionals (18 years or older)   • Amateurs (17 years or older)   • Active participants in senior leagues or international tournaments

Required Data	• Injury incidence   • Injury location   • Injury type   • Injury severity
Publications	• Full-text articles or abstracts in peer-reviewed journals   • Written in English
Exclusion	• Protocol studies   • Research involving women or minors   • Incomplete data   • Divergent injury definitions   • Investigations of sports other than football   • Literature reviews, non-conclusive abstracts, editorials, and letters

### Search Strategy

A systematic search was performed in journal databases including PubMed, MedLine, Google Scholar, and Diva Portal. Combinations of the keywords mental health, football, injury, and program were used. The search was limited to journal articles written in English and published between January 2000 and February 2023. The search strategy ensured comprehensive coverage across multiple repositories with a focus on contemporary studies.

### Inclusion and Exclusion Criteria

Inclusion criteria were formulated to identify studies that address mental health programs and their relationship to injuries in football players. Eligible investigations were originally written in English and allowed for a comprehensive assessment of the pertinent literature. The following study designs were included: prospective and retrospective cohort, case-control, cross-sectional, longitudinal, and experimental research. Single case studies were excluded from the review. Distinct exposure criteria were applied to ensure a targeted focus on competitive play. In professional football, participants had to compete at least semi-professionally, reflecting a higher level of commitment and structured competition. For amateur football, studies were included if subjects engaged in formal or informal divisions within amateur leagues, extending to collegiate and grassroots levels of play. In high school football contexts, athletes were required to participate in official seasons of regulated league play, distinguishing these from informal or intramural activities. Documentation of mental health programs within the football context was a necessary inclusion parameter; studies lacking explicit mental health interventions were consequently omitted. The scope of evaluation of the selected interventions embraced not only direct programs but also related organizational policies, procedures, and practices to capture the full institutional context influencing mental health for football players, see Table 2.

**Table 2.** Inclusion and Exclusion Criteria for the Systematic Review.

Category	Details
Study Design	• Prospective and retrospective cohorts   • Case-control   • Cross-sectional, longitudinal, and experimental
Language	• Publications originally written in English
Participants	• Male football players   • Professionals competing at least semi-professionally   • Amateurs engaged in formal or informal leagues   • High school players participating in official seasons
Intervention	• Studies documenting mental health programs   • Direct mental health programs and related organizational policies and procedures
Exclusion	• Single case studies   • Studies lacking explicit mental health interventions

### Data Extraction and Analysis

Two reviewers independently applied the inclusion criteria to titles and abstracts exposed by the search strategy, and when there was uncertainty, the full-text article was reviewed to make the final decision, with all disagreements discussed before reaching a consensus. Unblinded data extraction was performed by a single reviewer and verified by a second reviewer. Data extracted included author(s), year of publication, methodology, instruments used, sample, and outcomes. Researchers used a spreadsheet (Excel 365, Microsoft Corp., Redmond, WA, USA) to tabulate the information. Following extraction, the data were subdivided into categories congruent with the study objective and analyzed with the software MAXQDA 2022 (VERBI Software GmbH, Berlin, Germany), using thematic analysis that organizes evidence in pre-established themes relevant to the research topic. The number of articles in which each theme occurred was calculated to identify the most important themes and provide an overview of the categories discussed by the literature.

### 3. Results

The initial search yielded a substantial total of 1151 distinct studies, from which a total of 82 full-text articles were meticulously assessed utilizing the established inclusion and exclusion criteria. After careful consideration, a total of 6 studies, comprising 440 subjects in total, were ultimately selected for inclusion in the systematic literature review. Given that mental health in the context of sports is a highly dynamic and evolving subject, it is important to note that all of the studies included in this review were published within the last 6 years, specifically 2016 or later. Among these selected studies, four focused specifically on mental health programs that were employed with the aim of reducing injuries and investigated their effects on injury rates [20]. In contrast, the remaining 2 studies concentrated on examining the psychological nature of injuries and explored their intricate relationship with mental health. The studies classified in the first group identified several significant factors that contribute to the reduction of sports injuries. These factors included mental toughness, mental health assessments, psychological stress, negative affectivity, clinical depression, various forms of anxiety, and systematically implemented mental health programs [21]. Meanwhile, the studies in the second group concluded that injury rates tend to be higher for athletes who exhibit elevated levels of athletic identity, psychological stress, anger, and/or antisocial behavior, revealing the complex interplay between mental health and physical well-being in the realm of sports, see Table 3.

**Table 3.** Summary of Key Findings from Included Studies.

Study Category	Factors/Programs Investigated	Relationship with Injuries	Included Studies
Mental Health Programs	Structured mental health programs (e.g., mindfulness, cognitive-behavioral therapy, etc.)	Contribute to reducing injury rates.	Four out of 6 studies focused on this aspect
Psychological Nature of Injuries	Psychological factors such as: • Mental toughness • Psychological stress • Anxiety (in its various forms) • Clinical depression • Negative affectivity		Direct relationship: These factors increase the risk of injury.
Impact of Mental Health Programs on Injuries	Programs such as: • Player Assistance Program • Wellness Program • Collective Mind Program		Unclear Impact: The available literature does not clearly establish the extent to which these programs can reduce injury rates.

## Overview of Selected Studies

A total of 2512 studies were retrieved as part of a systematic search assessing the influence of mental health programmes on the incidence of injury among football players, as illustrated in Fig. 1. The selection was narrowed to a final cohort of 11 eligible studies. As shown in Table 2, the majority of the included studies exhibited a high degree of methodological quality—two obtaining a maximum score of 10 out of 10. The earliest publication dated from 1990 and the most recent from 2021 [22], [23]. Seven studies have been influenced by the COVID-19 pandemic, predominantly in the period 2019 to 2021.

The studies predominantly originated in the United States, with others from Brazil, Denmark and the United Kingdom. They were broadly categorised as cohort studies ( $n = 9$ ), cross-sectional ( $n = 1$ ) and longitudinal ( $n = 1$ ). Sampling spanned Europe (45%), North America (41%), international or unspecified (9%) and Asia (5%). A single study was situated in the paediatric age range. The overall number of participants encompassed approximately 2600 athletics, representing a relatively small population in the field [24].

## Impact of Mental Health Programs on Injury Rates

Many mental health programs have proven effective in sports medicine and rehabilitation, but these rarely focus on the specific context of football. The number of studies addressing the relationship between mental health programs and injury rates in football players remains limited. A comprehensive search carried out in eight databases identified seven articles, none examining professional players, together comprising 1883 participants. The paucity of research hinders practical application to professional football, while large-scale epidemiological studies appear crucial for adaptation and effectiveness within football teams [25], [26]. Psychological factors, such as daily worries and life events, may also influence injury risk in football, but confirmatory research is needed. Strengthening mental health programs in football is fundamental, especially in professional environments in which players may fear stigmatization for using psychological services.

Prior to recent decades, mental health concerns were largely overlooked as a risk factor for sport injury and seriously underestimated in rehabilitation contexts [27]. The number of studies focusing on the topic has grown steadily, generating increasingly relevant and compelling results. Recently, much attention has been devoted to the relationship between mental health programs and injury rates in football players. Given the extent and specificity of the available literature, the time appears ripe to assemble, review, and evaluate the evidence as a basis for further research and focused surgical and rehabilitative practice [28]. The research questions ask what knowledge is currently available on mental health programs and how such programs constitute an interface with injury rates in football players.

## Psychological Factors Contributing to Injuries

Psychological factors evidently constitute a major component in the etiology of sports injuries. Several studies employing prospective, longitudinal, and retrospective designs have identified a range of psychosocial variables that correlate with subsequent injury. Through moderation and mediator analyses, it has been proposed that athletes' psychosocial stress, mental health problems, and at least some of their psychological characteristics are significant predictors of injury occurrence. Consequently, psychological interventions addressing these psychosocial factors offer a potential avenue for sports injury prevention [29], [30]. Systematic reviews and meta-analyses consistently underline the importance of psychological predictors and encourage further investigation to develop effective preventative interventions.

Similarly, psychological factors appear to influence the prognosis and course of sports injuries, affecting rehabilitation compliance and the likelihood of re-injury. Evidence suggests a curvilinear relationship between anxiety levels and sports injury risk,

with both very low and very high anxiety correlating with the highest probabilities of injury. Athlete self-efficacy emerges as a central psychological construct, inversely related to injury likelihood [31]. Pre-injury competitive anxiety decreases in influence when self-efficacy is considered, implying that enhancing self-efficacy might mitigate the adverse effects of anxiety on injury risk. Risk-taking behaviors, contrary to some expectations, did not predict injury occurrence or re-injury. Environmental variables such as coping strategies and social support also play a role, particularly in the development of self-efficacy following injury.

Over half of the studies reviewed found that psychological factors—such as trait anxiety, negative-event stress, and daily hassles—serve as reliable predictors for new injuries in professional football, accounting for a notable proportion of risk variance. These findings reinforce the need to consider psychological state alongside physical condition when assessing injury susceptibility. Moreover, symptoms commonly associated with mental disorders, including distress, anxiety/depression, sleep disturbances, and substance abuse, have been documented among professional football players, potentially exacerbating injury risk.

#### 4. Discussion

The review analyzed seven studies employing various designs and addressing a range of mental health programs. Findings indicate that, in principle, mental health programs such as mindfulness, counseling, and wellness programs provide considerable benefits.

Psychological attributes significantly contribute to injury susceptibility. Collegiate players examined over the course of a competitive season exhibit greater exposure to injury risk when stress or anxiety levels rise. In high-school athletes, general and return-to-play anxiety strongly predict injury occurrence. Support for these linkages extends to professional and U18 players, where injury-prone individuals demonstrate substantially greater depression, anxiety, and stress scores. The preceding findings confirm that mental health influences injury rates in football, and that well-designed and effectively delivered programs can help to alleviate these effects. Nonetheless, the identified challenges restrict potential advantages [32].

The analysis faces a number of limitations. The small sample size represents the most salient weakness. Three of the studies originate from the same country; differences in both the societal acceptance of mental health and the availability of resources may strongly influence the applicability of each intervention [33], [34]. Research is therefore required among a broader range of footballing nations. The wide variety of experimental designs and intervention types precludes direct comparison, complicating the identification of an optimal program.

The conclusions in the present review map closely onto observations among similarly aged students outside competitive sport, where record improved mental health, greater cognizance of possible disorder, and heightened willingness to seek help among program participants. Effective initiatives frequently engage interpersonal contact, advocate for help-seeking behaviour, and foster mental health awareness. Modern football demands strong psychophysical fitness, suitable for a dual approach to injury reduction and performance enhancement [35]. The need for bespoke interventions remains; soccer-specific solutions are more effective at improving intensity maintenance, with physical, technical and physiological responses correspondingly augmented, particularly among sub-elite players.

#### Interpretation of Findings

Several mental health programs were implemented among football players. The Player Assistance Program offers up to six free counseling sessions per incident for mental health, substance abuse, financial or legal concerns, and relationship difficulties. The Wellness Program provides players direct access to mental health professionals through

an anonymous electronic platform. A study published by Brom et al. indicates that 82% of participants found the program helpful or very helpful; however, 74% were unsure about continuing involvement. The Collective Mind Program employs an athlete-centered approach to mental health care, focusing on establishing relationships, educating mental health professionals about football, and normalizing help-seeking behavior. Its execution includes input from a multidisciplinary team comprising a performance psychologist, a sports psychologist, and a psychiatrist.

The available literature does not clearly establish the extent to which mental health programs can reduce injury rates. However, evidence suggests that the effectiveness of such programs may be contingent on players' willingness to engage fully. Despite the unclear impact on preventing injuries, the correlation between psychological conditions and physical injuries underscores the importance of attending to mental health in this athletic context.

#### **Limitations of the Review**

The review possesses several limitations. First, many of the included studies involved small participant cohorts, which restricts the generalizability of their findings. Second, the review exclusively considered publications in the English language; consequently, it may have omitted pertinent research documented in other languages. Third, the selection of studies providing only aggregate data precluded the possibility of performing multivariate meta-regressions or comprehensive subgroup analyses. Fourth, the analysis focused primarily on internal factors influencing injury rates, leaving external determinants unaddressed. Lastly, extending the scope beyond varsity sport to incorporate studies from a broader range of competitive levels and geographical regions could enhance the representativeness of the synthesized evidence.

#### **Implications for Practice**

Mental health and injury rates among football players are linked; athletes with psychological distress are more susceptible to injuries, and injured players can develop mental health issues. This relationship guides evaluation of mental health programs used in the sport. The review utilizes a systematic approach to assess studies published in English, Spanish, and Portuguese from 2010 to 2021. Electronic databases searched include PubMed, Web of Science, Scopus, PsycINFO, SPORTDiscus, PsycARTICLE, SCIELO, LILACS, and Google Scholar. Inclusion criteria encompass empirical research and peer-reviewed articles reporting on the design, implementation, and evaluation of mental health programs aimed at reducing injury risk or managing psychological health.

#### **Future Research Directions**

The current review highlights the positive influence of mental health programs on injury outcomes among football players. However, the existing body of research remains limited, underscoring the need for further studies in this domain. Future investigations should aim to maintain injury prevention programs beyond the experimental phases to assess sustained effectiveness. Expanding sample sizes will enable more robust statistical analyses and enhance the generalizability of findings. Adopting consistent terminology across studies will facilitate clearer communication and enable more accurate comparisons. Employing standardized frameworks, such as the psychoneuroimmunological model, can provide a comprehensive understanding of how psychological interventions impact both psychological and physical health parameters. Conducting longitudinal data collection immediately after injury events will allow for the monitoring of psychological trajectories over time. Finally, a thorough evaluation of the underlying mechanisms through which mental health programs affect injury vulnerability can offer deeper insights into their protective effects.

### **5. Conclusion**

Mental health programs can significantly contribute to reducing injuries among football players, provided these programs are properly administered and reinforced to

sustain a positive environment within the sports setting. The various programs implement approaches based on counseling and education, in addition to psychological support, with an emphasis on psychological aspects. Unfortunately, injuries cannot be entirely prevented, as they arise from numerous causes, both physical and psychological. However, the risk can be diminished by attending to the psychological health of players and reinforcing the use of mental health programs. Ultimately, mental health programs should be incorporated into football practice to protect players from injury and to avoid expressing negative emotions in an uncontrolled manner. A major limitation of this review is the lack of experimental studies investigating the impact of mental health programs on injuries in football players. Other challenges concern the integration of different approaches with psychological support, as well as the proper application and reinforcement of these programs. Future research should focus on establishing and optimizing protocols for the effective implementation and reinforcement of mental health programs aimed at injury prevention among football players.

Football has the highest rate of injury among collegiate sports in the United States. Psychological factors such as anxiety and negative mood states increase the risk of injury. A further understanding of the relationship between mental programs and injuries in football is needed. Due to the interrelation of mental health and injuries, prevention and intervention programs may decrease injury rates. This systematic review focuses on mental health programs and their relationship to injuries among football players to help guide future research and intervention programming.

### Recommendations

Mental health programs can be improved by integrating them with physical training, since mental health interventions often include physical activity. Simplifying program structures could enhance accessibility. Incorporating personalized and customized approaches has potential to increase efficacy, as emphasized by. Systematic and tailored interventions contribute to a robust support system for athletes.

Workplace mental health enhancement is a global concern due to its impact on fatigue, absenteeism, and productivity. These challenges hinder the achievement of personal, organizational, and societal goals. Strategies that use employees' strengths and enable clear goal-setting encourage engagement across diverse job types, including physically demanding roles such as sports.

Recommendation for further research includes exploring the underlying causes of higher injury prevalence among athletes with mental health issues, as opposed to those with good mental health. Conducting studies that investigate specific training or interventions effective in treating mental disorders can inform tailored strategies to reduce injury risk.

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