

National University of Science and Technology

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The Impact of Anxiety and Arousal on Shooting at Goal Accuracy among Zimbabwean Premier League Soccer Strikers

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ABSTRACT

Performance in soccer has been attributed to the player's technical, tactical and physical fitness. Little or no focus has been given to the mental preparedness of soccer players. Such studies on the impact of anxiety and arousal among soccer players on shooting accuracy in Zimbabwe are lacking. The present study aimed at investigating the impact of anxiety and arousal on goal shooting accuracy among soccer strikers in Zimbabwean league. Twenty-three elite Zimbabwean male soccer players aged 24.65 ± 4.29 with soccer playing experience of 5.09 ± 3.28 years were purposively sampled from twelve top teams in the 2011 Premiership log table. Participants competed individually in high- (A), moderate- (B) and low-pressure (C) condition in a counter-balanced repeated measures design. Descriptive statistics, one way ANOVA, post hoc test, Pearson's Product Moment correlation coefficient and multiple regression analysis of anxiety and arousal with shooting accuracy were computed using SPSS Version 16.0. The mean scores for heart rate, systolic blood pressure, cognitive anxiety intensity and somatic anxiety intensity indicated that highest anxiety was experienced in the high pressure condition compared to moderate and low pressure conditions. Post hoc tests revealed significant differences across all conditions for elite Zimbabwean male soccer strikers for cognitive anxiety intensity $(F_{(1.42, 31.30)} = (232.994), p = .000)$, somatic anxiety $(F_{(2.44)} = (397.513), p = .000)$.000), heart rate ($F_{(1.56, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = 95.464$, p = .000) and systolic blood pressure ($F_{(1.44, 34.41)} = .000$) and systolic blood pressure ($F_{(1.44, 34.41)} = .000$) and $F_{(1.44, 34.41)} = .000$ $_{31.69} = 113.808$, p = .000). The relationships between pre-competition anxiety and arousal and goal shooting accuracy were strong with linear correlations between the intensity of cognitive anxiety condition A, r = .92, condition B, r = .80, condition C, r = .90 and somatic anxiety condition A, r = .96, condition B, r - .95, condition C, r= .90. Cognitive anxiety was the strongest predictor of shooting at goal accounting for 85.4% in condition A for Day One, condition B, 74.6%, and condition C, 69.2%. Similar results were observed in Day Two for all variables. It was concluded that Zimbabwean footballers experienced the highest anxiety intensity and arousal under high pressure conditions; that there were significant differences across all conditions, that the relationship between anxiety/arousal and shooting at goal was linear. Cognitive anxiety was the strongest predictor of shooting at goal. It is recommended that coaches and administrators should help footballers moderate the impact of anxiety and arousal by treating all competitive matches equally.