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Prevalence of Common Football Injuries and Their Correlates among School Football Players in Jimma Town

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Key words: *Football injuries, prevalence, causes, demographics, playing position*

Abstract

Background: *Football is one of the most popular sports in the world, but it carries a high risk of injuries. This study looks into the causes and frequency of common football injuries among school players in Jimma Town, Ethiopia. It also examines how demographic factors, like age, gender, playing experience, and position, affect these injuries.* ***Methods:*** *We conducted a cross-sectional study involving 300 school football players selected through random sampling. We gathered data using a structured questionnaire and analyzed it using frequency, percentage, and cross-tabulations. The study evaluated injury rates, types, and causes in relation to demographic factors and playing positions.* ***Results:*** *A high percentage of players, 76.7% reported experiencing at least one injury in the past year. The most common injuries included sprains (36.7%), strains (26.7%), contusions (20.0%), fractures (10.0%), and concussions (6.7%). The leading causes of injury were physical contact (40.0%) and overuse (26.7%), followed by poor playing surfaces (16.7%), inadequate warm-ups (10.0%), and equipment issues (6.7%). Players aged 15 to 19 and those with over three years of experience reported more injuries. Male players mainly experienced injuries from physical contact, while female players had higher injury rates due to poor surfaces and equipment problems. Midfielders and defenders reported the highest injury rates from physical contact, while goalkeepers were more likely to injure themselves from poor surfaces and equipment issues.* ***Conclusion:*** *Football injuries among school players in Jimma Town mainly occur due to physical contact and overuse. There are significant differences based on age, gender, playing experience, and position. Improving playing surfaces, ensuring proper warm-ups, and providing protective equipment can help lower the risk of injuries. Additionally, training programs should focus on the specific risks linked to different playing positions.*

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Background and problem statement

Football is one of the most popular sports in the world. This is also true in Ethiopia, where school-aged players often participate in the sport. However, with more young people playing football, injuries related to the sport have also increased. These injuries can have lasting physical and mental effects on young athletes. Although injury prevention in football is recognized as important, there is still limited knowledge about the specific causes, prevalence, and risk factors for these injuries among school football players in Jimma Town, Ethiopia.

Studies in other areas have shown that injuries in football often result from factors like physical contact, overuse, and poor warm-ups (Fuller et al., 2006; Ekstrand et al., 2011). However, much of the existing research focuses on professional or adult players. This leaves a gap in understanding youth football, especially in places with fewer resources, such as Jimma Town. There is also a significant lack of detailed studies that look at how demographic factors like age, gender, and playing experience, along with playing position (forward, midfield, winger, defensive, goalkeeper), influence football injuries among school players.

Age and playing experience are known to affect injury risk. Younger and less experienced players are generally more prone to injuries (Hawkins & Fuller, 1999; Emery &Meeuwisse, 2010). Gender differences in the types and frequency of injuries have also been noted. Studies have shown that males tend to get more injuries related to physical contact (Aarås et al., 2008). In contrast, females often report injuries resulting from other issues like poor playing surfaces (Soligard et al., 2016). Additionally, the playing position of athletes often correlates with the types of injuries they experience. For example, goalkeepers usually face more injuries from high-impact situations (Krosshaug et al., 2007), while outfield players often suffer strains and sprains due to running and tackling.

However, no thorough research has examined how these factors interact among school football players in Jimma Town. While some studies in Ethiopia have focused on general injury trends in youth sports (Mengistu et al., 2017; Hussen et al., 2020), there is a clear lack of research addressing the causes, prevalence, and demographic factors related to football injuries in Jimma Town. The current literature highlights the occurrence of football injuries in professional and international contexts but does not provide a detailed look at the specific causes and demographic risk factors for injuries among youth players in a local setting like Jimma Town. This gap indicates a need for localized research to understand how variables such as age, gender, playing experience, and playing position affect injury patterns in school football players.

The findings from this study will be important for creating injury prevention strategies tailored to the specific needs of school players in Jimma Town.

Materials and METHODS

Study Setting

This study took place in Jimma Town, one of the largest urban centers in the Oromia Region of Ethiopia. It serves as the capital of the Jimma Zone. The town is located in the southwestern part of the country, about 352 kilometers from Addis Ababa, Ethiopia's capital city. Jimma is known for its social and cultural diversity, historical importance, and economic activities. It also plays a key role as an educational and administrative center in the region. The town has a young population, with many residents being school-age children and youth. This makes it an ideal location for research on school sports and football participation.The schools involved in this study were intentionally selected to represent the diversity of Jimma Town. Both urban schools, which are in the more developed parts of the town, and semi-urban schools, located on the outskirts with fewer resources, were included. This approach ensured that the study captured the experiences of football players from different socio-economic and infrastructure backgrounds. Urban schools usually have better access to sports facilities, trained coaches, and medical services. In contrast, semi-urban schools may lack proper infrastructure, safety equipment, and specialized sports staff. These differences provided a chance to examine how variations in school environments and resources affect the occurrence and management of football injuries.

Study Design

This study used a quantitative method and a cross-sectional design to investigate the prevalence and causes of common football injuries among school football players in Jimma Town. The choice of a quantitative approach was based on the study's main goals, which needed the systematic collection and analysis of numerical data to find measurable patterns and relationships. Quantitative research helps identify trends across large groups of participants and allows for statistical testing of relationships between factors. This makes it a good fit for studies on injury prevalence and contributing factors. A cross-sectional design was chosen because it allows for data collection at one specific time. Unlike longitudinal studies, which follow participants over a long period, cross-sectional research captures a snapshot of the current situation. This approach is time- and resource-efficient, which is especially important in low-resource settings like Ethiopian schools. By collecting data at the same time from many players across different schools, the study could evaluate the distribution of injuries, their frequency, and their immediate causes in a systematic and practical way.

Population

The study focuses on school football players in Jimma Town. This group includes male and female students aged 10 to 19 who take part in football activities at various schools. The participants come from different schooling levels, including primary and secondary. The study targets 300 school football players in Jimma Town, with 240 male and 60 female players. These players represent both public and private schools and cover a range of football positions, including forward, midfielder, winger, defender, and goalkeeper. They also have varying levels of experience, with less than 1 year, 1 to 3 years, and more than 3 years.

Sampling Techniques

To ensure fair representation of the study population, we used a stratified random sampling technique. We chose this approach because football players in Jimma Town schools are not a uniform group; they differ in terms of gender, playing position, and years of playing experience. Therefore, stratification was necessary to capture the diversity in the population and to make sure the findings reflected the realities of all categories of players.

The first level of stratification was based on gender. Since football participation in schools includes both male and female students, it was important to include both groups in proportion to their actual numbers. This avoided gender bias and allowed the study to compare injury patterns between boys and girls. The second level of stratification considered playing position. Football players typically have specific roles such as goalkeeper, defender, midfielder, or forward. Each position has different physical demands and risk factors for injuries. Ensuring representation across these positions made it possible to analyze whether certain injuries are more common in specific roles.

The third level of stratification focused on playing experience, which was categorized into different ranges of years of participation. Players with more experience may have developed better skills or conditioning, while newer players might face different risks. Including both groups helped the study reflect a range of experiences.After defining the strata, we identified the total number of football players in each participating school. Proportional allocation was then used to determine how many players to sample from each stratum. Finally, we conducted random sampling within each subgroup to avoid bias and give every eligible player an equal chance of being selected. This method ensured balanced representation, improved the reliability of the results, and reduced sampling errors.

Sample Size

The total sample size for this study included 300 school football players selected from various schools in Jimma Town. Of these, 240 participants were male, which represented 80 percent of the sample, while 60 participants were female,

accounting for the remaining 20 percent. This distribution was not random; it reflected the actual proportion of male and female football players involved in school programs within the study area. The sample size was determined according to statistical guidelines used in quantitative research. Specifically, the calculation was based on the estimated total number of active school football players in Jimma Town. A 95% confidence level and a 5% margin of error were used in the estimation. This approach provided a sound balance between accuracy and practicality. The chosen confidence level showed that the study results could apply to the wider population with a high degree of confidence, while the margin of error ensured that any variations would stay within an acceptable range.

Choosing a sample size of 300 also had practical benefits. It was large enough to permit meaningful statistical analysis across different groups, including gender, playing position, and experience level. At the same time, the number was manageable for data collection, allowing questionnaires and interviews to be administered thoroughly without straining resources or compromising data quality. Additionally, the relatively large sample size boosted the reliability of the findings by decreasing the chance of random variation affecting the results.

Data Collection Methods

Data were collected using quantitative methods such as surveys. A structured questionnaire was given to each player. The questionnaire included questions about demographics, such as age, gender, and playing experience. It also asked about playing position, injury history, causes of injuries, and the frequency of injuries over the past year. A standardized questionnaire used among school football players served as the main tool for gathering data on injury rates, demographics, and causes. The questionnaire contained closed and multiple-choice questions to gather the needed information about the issue being studied. The questionnaire was pre-tested with a small group of 30 school players who were not part of this study to ensure clarity and reliability. The pilot test showed a Cronbach's alpha of .87, indicating a high level of internal consistency and reliability of the measurement tool.

Data Analysis Methods

Data analysis was done using the Statistical Package for the Social Sciences (SPSS version 27) for quantitative data. The data were analyzed with descriptive and inferential statistics. We calculated descriptive statistics like frequency distributions, percentages, and means to describe participants' demographics, injury prevalence, and injury causes. We used Chi-Square Tests to examine the relationships between demographic factors such as age, gender, and playing experience and injury occurrence. Correlation Analysis was used to explore the link between playing positions and types of injuries sustained.

Ethical Considerations

Ethical considerations were followed throughout the study. Informed consent was obtained from all participants and their guardians for minors before they joined. This included a clear explanation of the study's purpose, procedures, potential risks, and benefits. All collected data remained confidential and was accessible only to the research team. Participant identities were anonymized to protect privacy. Participation was voluntary, and participants could withdraw from the study at any time without facing negative consequences. The study was reviewed and approved by the ethics committee at Jimma University Sports Academy Research Ethics Review Board (JUSA-RERB-S14/2024) to ensure that the research met ethical standards for human participants. No physical examinations were part of the study. The research focused on self-reported injuries and did not put participants at any additional risk.

Results of the study

This study looks at how common football injuries affect school players in Jimma Town. We examined sociodemographic factors like age, gender, playing experience, and positions to see how they relate to types of injuries and how often they occur. We used a quantitative method and a cross-sectional design. The data were analyzed using frequency percentages and correlation coefficients. Table 1 shows the sociodemographic information of the participants. The findings reveal that most participants were aged 15 to 19 years (60.0%) and male (70.0%). Additionally, many players had 1 to 3 years of experience (50.0%).

Table 1. Sociodemographic Information of Participants (n=300)

Variable	Category	Frequency (N)	Percentage (%)
Age	10–14 years	100	33.3
	15–19 years	200	66.7
Gender	Male	240	80.0
	Female	60	20.0
Playing Experience	<1 year	50	16.7
	1–3 years	160	53.3
	>3 years	90	30.0

In table 2, the distribution of participants by playing position is shown. The results indicate that midfielders made up the largest group at 30.0%. They were followed by defensive players at 23.3% and forwards at 20%.

Table 2. Distribution of Playing Positions (n=300)

Playing Position	Frequency (n)	Percentage (%)
Forward	60	20.0
Midfield	90	30.0
Winger	50	16.7
Defensive	70	23.3
Goalkeeper	30	10.0

In Figure 1, the prevalence of common football injuries is shown. The results reveal that the most frequent injuries were sprains at 40.0% and strains at 30.0%. Injury rates among school football players in Jimma Town are high, with sprains and strains being the most common. Age, playing experience, and position on the field are important factors in predicting injury occurrence

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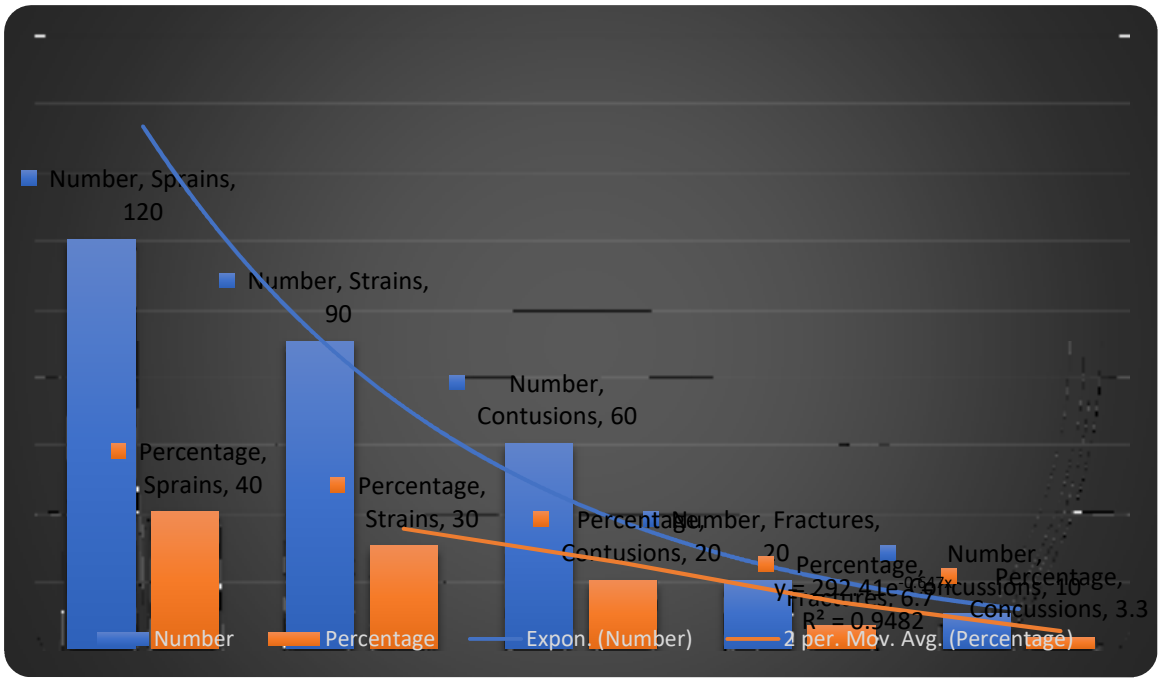

Figure 1. Prevalence of Common Football Injuries

In Table 3, the correlation between playing positions and types of football injuries is shown. The results indicate that sprains are most strongly linked to midfielders (r = 0.30, p < 0.001). Forwards and wingers also showed moderate links (r = 0.25 and r = 0.22, respectively). Similarly, strains had the strongest connection with midfielders (r = 0.28, p < 0.001). Defensive players and forwards also had noticeable links (r = 0.20 and r = 0.22, respectively). Contusions were highly associated with defensive players (r = 0.30, p < 0.01) and wingers (r = 0.25, p < 0.01). Fractures were most strongly correlated

with goalkeepers (r = 0.28, p < 0.01), while defensive players also showed a moderate link (r = 0.25). Concussions were most associated with goalkeepers (r = 0.30, p < 0.01), likely due to high physical contact and aerial duels.

Table 3. Correlation Between Playing Positions and Types of Football Injuries

Playing Position	Sprains (r)	Strains (r)	Contusions (r)	Fractures (r)	Concussions (r)	Significance (p)
Forward	0.25	0.22	0.15	0.10	0.08	0.001**
Midfield	0.30	0.28	0.20	0.12	0.09	0.001**
Winger	0.22	0.18	0.25	0.14	0.11	0.003**
Defensive	0.18	0.20	0.30	0.25	0.12	0.002**
Goalkeeper	0.12	0.15	0.18	0.28	0.30	0.002**

In table 4, the correlation between demographic factors and types of football injuries is shown. The results indicated that sprains are positively linked to playing experience (r = 0.35, p < 0.001) and age (r = 0.32, p < 0.001). Gender has a moderate correlation (r = 0.25, p < 0.01), with males being more likely to experience sprains. Similarly, strains have the strongest correlation with playing experience (r = 0.30, p < 0.001), and age also plays a role in the occurrence of strains (r = 0.28, p < 0.01). Contusions showed moderate correlations with all variables, particularly age (r = 0.24, p < 0.01) and playing experience (r = 0.25, p < 0.01). Gender has a weaker correlation (r = 0.18, p < 0.05). Fractures showed the strongest correlation with playing experience (r = 0.22, p < 0.01), indicating that more experienced players face higher physical demands. Likewise, concussions displayed weak but significant correlations with age (r = 0.18, p < 0.05) and playing experience (r = 0.15, p < 0.05). Gender reflects the lowest correlation (r = 0.10, p < 0.05), with males being slightly more prone.

Table 4. Correlation Between Demographic Variables and Types of Football Injuries

Demographic Variable	Sprains (r)	Strains (r)	Contusions (r)	Fractures (r)	Concussions (r)	Significance (p)
Age	0.32	0.28	0.24	0.20	0.18	0.001**
Gender	0.25	0.20	0.18	0.12	0.10	0.005**
Playing Experience	0.35	0.30	0.25	0.22	0.15	0.001**

In Table 5, the prevalence of injuries by age, gender, and playing experience is shown. The results indicate that older players, especially those aged 15 to 19, and those with more than three years of experience are more likely to suffer from sprains and strains. Additionally, female players report slightly higher rates of fractures than male players.

Table 5. Prevalence of Injuries by Age, Gender, and Playing Experience

Variable	Sprains (%)	Strains (%)	Contusions (%)	Fractures (%)	Concussions (%)
Age					
10–14 years	40.0	30.0	15.0	10.0	5.0
15–19 years	35.0	25.0	22.0	10.0	8.0
Gender					
Male	38.0	28.0	21.0	9.0	7.0
Female	32.0	25.0	17.0	12.0	6.0
Playing Experience					
<1 year	30.0	20.0	25.0	15.0	10.0
1–3 years	36.0	30.0	20.0	10.0	4.0
>3 years	40.0	28.0	15.0	10.0	7.0

Injury Prevalence by Playing Position is shown in Table 6. The results indicate that midfielders have the highest rates of sprains at 40.0% and strains at 30.0%. This may be due to the physical demands of their position. Goalkeepers are more likely to experience concussions at 25.0% and fractures at 15.0% compared to other positions. Overall, the most common injuries are sprains at 36.7% and strains at 26.7%. Fractures at 10.0% and concussions at 6.7% occur less frequently, but they need special attention for prevention.

Table 6. Injury Prevalence by Playing Position

Playing Position	Sprains (%)	Strains (%)	Contusions (%)	Fractures (%)	Concussions (%)
Forward	35.0	25.0	20.0	10.0	10.0
Midfield	40.0	30.0	15.0	10.0	5.0
Winger	30.0	25.0	25.0	10.0	10.0
Defensive	35.0	28.0	20.0	12.0	5.0
Goalkeeper	25.0	20.0	15.0	15.0	25.0

The causes of common football injuries are shown in Figure 2. The results indicate that the leading cause of injuries is physical contact at 40.0%. This is followed by overuse at 26.7% and poor playing surfaces at 16.7%. Inadequate warm-up contributes to 10.0% of the injuries, while equipment issues account for 6.7%.

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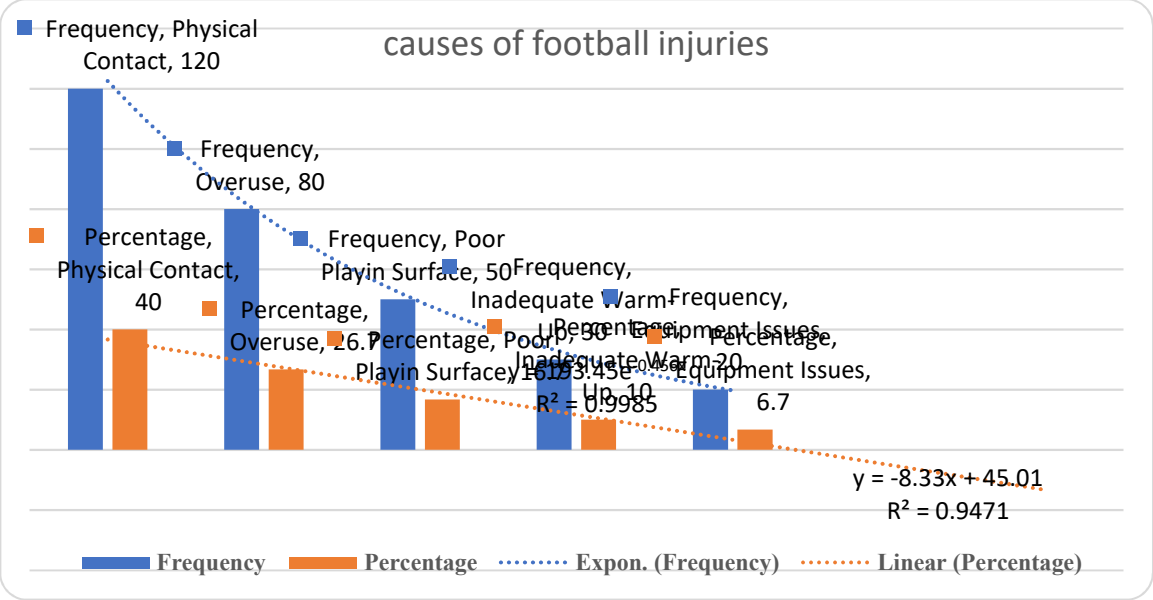

Figure 2. Distribution of Causes of Injuries

The demographics distribution of injury causes by age, gender, and playing experience is shown in Table 8. The results show that older players, aged 15 to 19 years, and those with more than three years of experience,encountermore physical contact and overuse injuries. Female players report more injuries from poor playing surfaces and equipment problems than male players.

Table 8. Distribution of Causes of Injuries by Age, Gender, and Playing Experience

Variable	Physical Contact (%)	Overuse (%)	Poor Playing Surface (%)	Inadequate Warm-Up (%)	Equipment Issues (%)
Age					
10–14 years	35.0	20.0	25.0	12.0	8.0
15–19 years	42.0	30.0	15.0	8.0	5.0
Gender					
Male	41.0	28.0	18.0	8.0	5.0
Female	36.0	20.0	22.0	12.0	10.0
Playing Experience					
<1 year	30.0	15.0	30.0	15.0	10.0
1–3 years	40.0	28.0	20.0	8.0	4.0
>3 years	45.0	35.0	10.0	6.0	4.0

The distribution of injury causes by playing position is shown in Table 9. The results indicate that position has a significant impact. Midfielders and defensive players report the highest rates of injuries from physical contact, at 45.0% and 50.0%, respectively. Goalkeepers report higher rates of injuries due to poor playing surfaces (25.0%) and equipment problems (10.0%).

Table 9. Distribution of Causes of Injuries by Playing Position

Playing Position	Physical Contact (%)	Overuse (%)	Poor Playing Surface (%)	Inadequate Warm-Up (%)	Equipment Issues (%)
Forward	38.0	25.0	20.0	12.0	5.0
Midfield	45.0	30.0	15.0	7.0	3.0
Winger	40.0	28.0	20.0	8.0	4.0
Defensive	50.0	25.0	15.0	7.0	3.0
Goalkeeper	30.0	20.0	25.0	15.0	10.0

Discussion

The study aimed to identify how common football injuries are among school football players in Jimma Town. It focused on the effects of demographic factors and playing positions. The findings showed that injuries were very common, affecting about 76.7% of the participants. This matches earlier research indicating that football injuries are frequent, especially in young athletes (Ekstrand et al., 2011; Fuller et al., 2006). The results indicated that sprains (36.7%) were the most reported injury, followed by strains (26.7%) and contusions (20.0%). This is consistent with studies on youth football players, which identify sprains and strains as the most common injuries (Hawkins & Fuller, 1999; Andersen et al., 2004). The lower prevalence of fractures (10.0%) and concussions (6.7%) suggests that while serious injuries happen, they are less frequent. This could be because of better awareness and the use of protective measures in schools.

The study found that physical contact was the main cause of injuries (40.0%), followed by overuse (26.7%), poor playing surfaces (16.7%), inadequate warm-ups (10.0%), and equipment issues (6.7%). Physical contact being the top cause fits with findings from the FédérationInternationale de Football Association (FIFA), which stated that most injuries in football happen due to direct contact with other players (Krosshaug et al., 2007). Overuse injuries, which affected 26.7% of the participants, are common among youth players who often train at high intensity without enough rest (Ekstrand et al., 2011). Inadequate warm-ups, which caused 10.0% of the injuries, highlight the need for proper pre-game preparations to lower injury risk (Soligard et al., 2016). The lower percentage of injuries from equipment issues (6.7%) suggests that players in Jimma Town might be using basic or standard sports gear, but it also shows that there is room for improvement through better equipment management and

supply.

Age, gender, and playing experience significantly influenced injury rates. Older players (15–19 years) and those with more than three years of experience reported higher injury rates, likely due to more intense participation and exposure to competitive play. Other studies have noted similar trends, where older and more experienced players face higher injury risks because of increased exposure to high-contact situations (Hawkins & Fuller, 1999; Emery &Meeuwisse, 2010). Gender differences were also clear. Male players had a higher rate of injuries related to physical contact, possibly due to variations in playing styles and intensity between male and female players (Aarås et al., 2008). In contrast, female players reported a relatively higher number of injuries from poor playing surfaces and equipment issues. This points to areas that need improvement, such as better playing fields and consistent access to the right sports gear. The playing position of the athletes was another key factor influencing injury rates. Midfielders and defensive players experienced the highest injury rates due to physical contact. This finding is in line with research by Fuller et al. (2006), who noted that positions involving continuous running, tackling, and engagement have greater injury risks. Goalkeepers had fewer injuries from physical contact but were more prone to injuries from poor playing surfaces and equipment problems. This may be because goalkeepers often make impactful movements and face different physical stresses compared to outfield players (Krosshaug et al., 2007).

Implications for Injury Prevention

The results highlight the need for specific injury prevention strategies. To tackle injuries from physical contact and overuse, school football programs should add injury prevention training that covers strength conditioning, skill development, and recovery processes (Soligard et al., 2016). Proper warm-ups before games and practices can help reduce injuries from sudden exertion (Cools et al., 2010). Improving playing surfaces can lower injuries from uneven or dangerous conditions. Participants reported that poor field quality led to injuries, indicating a need for investment in better facilities. Schools should also think about providing protective gear and making sure it is well-maintained to lessen injury risks, especially for goalkeepers who face unique injury threats (Aarås et al., 2008).

Conclusion

The study shows a high rate of football injuries among school players in Jimma Town. The findings point out how demographic factors and playing positions affect injury rates. Physical contact and overuse were the main causes, highlighting the need for injury prevention strategies that include proper training, warm-ups, and improved facilities. Addressing gender-specific risks and providing access to quality equipment will be crucial for lowering injury rates and promoting safer football for school athletes. The

frequency of football injuries is strongly affected by age, gender, playing experience, and position. Midfielders and more experienced players are at greater risk for sprains and strains, while goalkeepers face a higher chance of concussions and fractures. Tailored preventive measures for age groups, experience levels, and specific positions are vital. The findings reveal that injuries among school football players mainly result from physical contact and overuse, especially in midfielders and defensive players. Factors like age, gender, and experience also play a role in the causes of injuries. Prevention strategies should aim to improve playing surfaces, ensure proper warm-ups, and use suitable equipment to lower injury risks.

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