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Original Research

Is there a link between previous exposure to sport injury psychology education and UK sport injury rehabilitation professionals' attitudes and behaviour towards sport psychology?

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ABSTRACT

Objectives: The use of sport psychology strategies during sport injury rehabilitation can lead to several positive outcomes such as improved adherence and self-efficacy. The purpose of this study was to compare the sport psychology related attitudes and behaviours of UK sport injury rehabilitation professionals (SIRPs) who had studied the psychological aspects of sport injury to those who had not. Participants and design: Ninety-four SIRPs (54 physiotherapists and 40 sports therapists with a mean of 9.22 years' experience of working in sport) completed an online survey and were grouped according to their level of previous exposure to sport injury psychology education at an undergraduate/postgraduate level. Analyses were undertaken to establish whether there were any differences in sport psychology related attitude (MANOVA), usage (MANOVA), and referral behaviours (chi square) between the groups. Results: The MANOVA and chi square tests conducted revealed that those who had studied the psychological aspects of sport injury reported using significantly more sport psychology in their practice and making more referrals to sport psychologists.

Conclusions: It was concluded that sport injury psychology education appears to be effective in increasing the sport psychology related behaviours (use of sport psychology and referral) of SIRPs and should be integrated into professional training.

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1. Introduction

A relatively large body of evidence exists which suggests that use of sport psychology during sport injury rehabilitation can lead to several positive outcomes such as improved attitude, adherence, and self-efficacy (Brewer, 2010). Sport injury rehabilitation professionals (SIRPs), such as athletic trainers, physiotherapists, and sports therapists, are considered to play an important role in ensuring that injured athletes receive sport psychology support and are given the opportunity to experience these positive outcomes (Kamphoff, Thomae, & Hamson-Utley, 2013; Lafferty, Kenyon, & Wright, 2008; Tracey, 2008). There is a consensus that, due to their frequent contact with the injured athlete, SIRPs are ideally placed to provide some degree of psychological support to the

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injured athlete (Arvinen-Barrow, Massey, & Hemmings, 2014). Heaney (2006b) proposed that SIRP should act as a "frontline practitioner" providing basic sport psychology support, with the sport psychologist delivering more advanced services.

SIRPs appear to be open to such a role and aware of the potential impact of psychological factors on the rehabilitation process. Research in the field has consistently found that SIRPs show a positive attitude towards the role of sport psychology during injury rehabilitation (Arvinen-Barrow et al., 2014). In their study of 215 athletic trainers in the USA, Clement, Granquist, and Arvinen-Barrow (2013) found that the majority of athletic trainers they surveyed felt that athletes were affected psychologically by injury, reported several psychological factors distinguishing between those who cope successfully and unsuccessfully with injury (e.g. positive attitude), and highlighted the importance of psychological skills in sport injury rehabilitation.

Although this might suggest that SIRPs recognise the importance of sport psychology and use it accordingly, deeper investigation reveals that this is not the case. Firstly, whilst SIRPs generally

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hold a positive attitude towards sport psychology, this does not always extend to implementation. For example, in their review of the literature Alexanders, Anderson, and Henderson (2015) identified a gap between SIRPs recognising the importance of psychological intervention and providing such intervention. It has been suggested that this may be a reflection of a lack of knowledge or training relating to sport psychology (Arvinen-Barrow, Hemmings, Weigand, Becker, & Booth, 2007; Arvinen-Barrow, Penny, Hemmings, & Corr, 2010; Heaney, 2006a). This view is supported by SIRPs themselves. Research has shown that there is almost universal agreement that the training of SIRPs in sport psychology is inadequate and that SIRPs consistently express a desire to develop their knowledge of sport injury psychology theory and practice (Arvinen-Barrow et al., 2010; Heaney, 2006a; Lafferty et al., 2008).

Secondly, it would seem that there are discrepancies between the types of sport psychology interventions SIRPs employ and research evidence (Arvinen-Barrow et al., 2007; Cormier & Zizzi, 2015). SIRPs tend to gravitate towards more practical techniques that are motivational in nature, such as goal setting, rather than more unfamiliar techniques such as imagery or relaxation strategies (Clement et al., 2013; Cormier & Zizzi, 2015; Lafferty et al., 2008). This is perhaps indicative of SIRPs developing their skills in delivering psychological support through experiential rather than formal learning and lack knowledge and training relating to specific techniques (Arvinen-Barrow et al., 2010). Alternatively, it could be due to a perception that teaching such techniques is beyond the professional role and boundaries of the SIRP and best delivered by a sport psychologist, who should ideally work alongside the SIRP as part of a sports medicine support team (Arvinen-Barrow et al., 2010; Clement & Arvinen-Barrow, 2013).

Thirdly, as well as there being deficiencies in the amount and type of sport psychology intervention delivered directly by SIRPs, there is also appears to be deficiencies in referral behaviour. Referral rates to sport psychologists by SIRPs are relatively low, for example, Clement et al. (2013) found that only 17% of SIRPs they surveyed had ever referred an injured athlete to a sport psychologist. This could be due to a perceived lack of access or due to a perceived lack of need for referral; both factors that could be influenced by exposure to psychology of sport injury education. As such, researchers have highlighted the need for SIRPs to be educated on the benefits of referral and working with a sport psychologist (Heaney, Walker, Green, & Rostron, 2015).

Given the shortcomings evident in SIRPs use of sport psychology in their work with injured athletes and their expressed desire for further training on sport psychology it would appear that the training and education of SIRPs in sport psychology is of importance. It has been suggested that sport psychology training for SIRPs needs to be highly relevant and thus education that specifically addresses the psychological aspects of sport injury is required rather than more general sport psychology education (Heaney et al., 2015). The focus of this study is therefore on sport injury psychology education. Despite the apparent importance of sport injury psychology education, very few studies have investigated the links between sport injury psychology education and the attitudes and behaviours of SIRPs. Research has shown that well-designed education can lead to changes in attitude and behaviour. For example, education interventions been shown to be successful in influencing attitudes and behaviours amongst sports coaches (Zakrajsek & Zizzi, 2008), SIRPs (Clement & Shannon, 2009), nurses (Patterson, Whittington, & Bogg, 2007), and medical students (Kuhnigk, Strebel, Schilauske, & Jueptner, 2007).

The theory of planned behaviour (Ajzen, 1985, 1988) can be used as a framework to explain how education might influence attitudes and behaviour. The central component to the theory is intention, which is thought to have a direct effect on behaviour. The theory

suggests that the stronger an individual's (e.g. SIRP) intentions are towards a specific behaviour (e.g. use of sport psychology), the more likely they are to engage in that behaviour. Intention is determined by three factors: attitude, subjective norm and perceived behavioural control; all of which can potentially be influenced by education. Attitude toward the specific behaviour is the product of the individual's beliefs about the consequences of engaging in the behaviour (behavioural beliefs) and the evaluation of those consequences (Carron, Hausenblas, & Estabrooks, 2003), both of which can potentially be enhanced through education.

One way to evaluate the potential effectiveness of sport psychology education on SIRPs is to compare the attitude or behaviours of a group of professionals who have received such training to a group that have not. This approach was used in a study by Hamson-Utley, Martins, and Walters (2008) who examined the perceptions of athletic trainers and physical therapists in the USA towards the use of psychological skills during sport injury rehabilitation. Athletic trainers are required by the National Athletic Trainer's Association to demonstrate competency on the psychological aspects of sport injury, whilst physical therapists are not (Hamson-Utley, Martin, & Walters, 2008). It was found that athletic trainers reported more positive attitudes than physical therapists towards the use of psychological skills during sport injury on the majority of survey items. These differences were largely related to controlling pain, positive self-talk and goal-setting. Interestingly, there appeared to be no difference between athletic trainers and physical therapists in relation to their attitudes toward mental imagery (Hamson-Utley et al., 2008). The authors attributed this to less knowledge of mental imagery compared to other techniques. which supports the findings of other researchers such as Arvinen-Barrow et al. (2010).

Hamson-Utley et al. (2008) study examined North American SIRPs. To date no similar study has been conducted to examine UK SIRPs and no study has compared different levels of exposure to sport psychology education (e.g. short duration education compared to long duration education). Heaney et al. (2015) suggest that only a limited number of studies have investigated the impact of psychology of sport injury education on SIRPs and have called for further research. The purpose of this study was to compare the sport psychology related attitudes and behaviours of UK SIRPs who have studied the psychological aspects of sport injury to those who have not. The hypotheses are stated below.

Hypothesis 1. SIRPs who have been exposed to psychology of sport injury education will have significantly higher 'attitude towards sport psychology' scores than those who have not.

Hypothesis 2. SIRPs who have been exposed to psychology of sport injury education will have significantly higher 'use of sport psychology' scores than those who have not.

Hypothesis 3. *SIRPs* who have been exposed to psychology of sport injury education will have significantly higher rates of *referral of an injured athlete to a sport psychologist* than those who have not.

2. Materials and methods

2.1. Participants

The participants (n = 94) were UK physiotherapists (n = 54) and sports therapists (n = 40), qualified to a minimum of undergraduate level, who had been working in sport for at least one year prior to participating in the study (range = 1-34 years, mean = 9.22 years, SD = 7.72 years). Forty-eight of the participants (51%) were qualified to postgraduate level (42)

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