INTERNATIONAL JOURNAL OF INTEGRATIVE AND MODERN MEDICINE

Professional Athletes' Perspectives on the Function of Sports Medicine Specialists in Treating Psychosocial Aspects of Sport-Injury Rehabilitation

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Annotation: Research from the perspective of sports medicine professionals (SMPs) indicates that these professionals are often required to address the psychosocial aspects of injuries during treatment. However, there is a paucity of literature investigating injured athletes' experiences with these concerns.

Objective

To explore the perspectives of injured professional athletes regarding the role of SMPs in the psychosocial aspects of sport-injury rehabilitation.

Design

Qualitative study.

Setting

Professional association football and rugby union clubs in Uzbekistan.

Participants

Ten professional male athletes, comprising football (n=4; 40%) and rugby union (n=6; 60%) players, with a mean age of 22.4 ± 3.4 years.

Data Collection and Analysis

Data were collected using a semistructured interview guide. The interviews were transcribed and analyzed following the guidelines of interpretative phenomenological analysis. Emergent themes were peer-reviewed and triangulated to ensure trustworthiness.

Results

The athletes in our study perceived injuries as an intrinsic aspect of their sports. Despite this normalization, athletes frequently reported feelings of frustration and self-doubt throughout the rehabilitation process. They perceived the role of SMPs in injury rehabilitation as primarily addressing physical concerns; any interventions aimed at psychosocial outcomes (e.g., motivation, confidence) needed to be subtle and indirect.

Conclusions

SMPs working with injured athletes in Uzbekistan need to understand the psychosocial principles underlying the sport-injury processes and the impact of psychosocial reactions on athletes. Additionally, SMPs must comprehend the self-regulatory processes that occur during injury rehabilitation and be capable of applying psychological principles in natural and subtle ways to enhance athletes' self-regulatory abilities.

Keywords: Athlete–sports medicine professional expectations, psychosocial rehabilitation, qualitative research, sport psychology.

Several researchers have suggested that sports medicine professionals (SMPs), such as athletic trainers and physiotherapists, who frequently interact with athletes during treatment, are ideally positioned to

address both the psychosocial and physical aspects of injury. SMPs are often the first responders to injured athletes, providing immediate care when pain and confusion are at their peak. Despite recognizing the importance of psychosocial strategies in enhancing injury rehabilitation, many SMPs feel inadequately trained to implement these strategies effectively.

Studies on the perceptions of injured athletes regarding the psychosocial support provided by SMPs are limited. Francis et al. found that both Australian physiotherapists and professional male basketball players acknowledged the importance of psychological aspects in rehabilitation, emphasizing communication and motivation. However, neither group found psychological skills like relaxation techniques and imagery particularly useful during rehabilitation. Similar findings were reported in other studies, with a majority of SMPs in the UK and the US believing that injuries affect athletes psychosocially. Common strategies employed by SMPs included varied rehabilitation exercises and short-term goal setting.

SMPs play a crucial role in managing athletes' psychosocial responses to injuries and influencing their overall recovery. Although access to sport psychologists is ideal, it is often limited outside professional sports, underscoring the need for SMPs to develop competencies in psychosocial injury rehabilitation.

Petitpas and Danish have reported that sports medicine professionals (SMPs) working with injured athletes must address both the athletes' physical and personal needs. Ray et al. highlighted that SMPs provide crucial emotional support during injury recovery and should utilize various psychosocial counseling techniques, such as goal setting and social support. Harris et al. emphasized that SMPs should be capable of recognizing and addressing a range of psychosocial reactions in injured athletes and refer them to specialists if necessary, especially in cases of clinical concerns like depression or substance abuse.

The Education Council of the National Athletic Trainers' Association has mandated that all athletic trainers understand the theoretical background of psychosocial aspects of patient care and be proficient in implementing psychosocial strategies and making necessary referrals. Given these competency requirements, it is crucial to consider the role of self-regulation in the psychosocial needs of athletes during injury rehabilitation. Self-regulation refers to the athlete's ability to manage thoughts, feelings, and behaviors to achieve long-term goals, which can be compromised by physical injuries.

Research indicates that athletic injuries cause stress, fatigue, and negative emotions, undermining self-regulation. Although self-regulation strategies like planning and goal monitoring benefit sports performance, SMPs need to understand how to apply these within injury rehabilitation programs. Given the importance of self-regulation in overcoming training-related pain and stress, it is vital to consider how athletes self-regulate during injury rehabilitation.

Despite the recognized role of SMPs in the psychosocial aspects of injury rehabilitation and the necessity for training programs to develop these competencies, there is limited evidence on injured athletes' expectations regarding SMPs' roles in this context. Not understanding athletes' perceptions of SMPs' roles in addressing psychosocial aspects can lead to three problems: (1) athletes may not see this as part of SMPs' roles, negatively affecting their relationship; (2) inappropriate use of psychosocial strategies may hinder rehabilitation and recovery; and (3) unnecessary training for SMPs in areas athletes do not expect from them.

Thus, our study aims to explore professional athletes' experiences and expectations of the psychosocial aspects of sport-injury rehabilitation, specifically focusing on their views regarding SMPs' roles in this process.

Methodology.

This study employed interpretative phenomenological analysis (IPA), a qualitative approach ideal for exploring participants' personal and lived experiences, examining how they derive meaning from these experiences through detailed case studies. IPA integrates phenomenology, hermeneutics, and symbolic interactionism, focusing on the meanings individuals assign to events through social engagement and

interpretation. This inductive method treats participants as experts of their own experiences, which are shared through storytelling.

We contacted officials from professional football and rugby clubs in Uzbekistan to recruit male players for the study. Ten professional athletes (four football players and six rugby players, aged 22.4 ± 3.4 years) who had recently recovered from severe sport-related injuries participated. These injuries included hamstring strains, broken thumbs, discectomy, broken legs, torn knee cartilage, and hernias, with an average recovery period of 19 weeks. At the time of the interviews, all participants had resumed their sports and were still receiving treatment from SMPs. None had received support from a sports psychologist during rehabilitation.

A semistructured interview protocol was developed to allow open-ended responses, encouraging participants to share their experiences and expectations. Initial questions focused on the athletes' sporting backgrounds, followed by their injury experiences and the role of SMPs. Pilot interviews with an international-level football player led to revisions for clarity and coherence.

The study adhered to ethical guidelines from the British Psychosocial Society and received university ethics committee approval. Participants received information about the research and completed a demographic sheet before the interviews. Conducted face-to-face, the interviews averaged 40 minutes and were audio-recorded. The researcher deviated from the guide as needed to explore important issues.

Analysis

Interviews were transcribed verbatim, and pseudonyms were used to ensure anonymity. Following IPA procedures, transcripts were thoroughly reviewed, and emergent themes were annotated. A master file of themes was created using MindGenius software, facilitating a visual representation of the data. Themes from all transcripts were compared, and supporting quotes were collated to identify superordinate themes. Themes lacking support were excluded. To ensure reliability, transcripts and themes were peer-reviewed and triangulated, with all analysts having postgraduate training in qualitative methods and specialization in sport or health psychology. Participants had the opportunity to review their transcripts, though none chose to do so.

Results

IPA Analysis and Commonalities

Our analysis revealed common themes in athletes' views regarding the role of sports medicine professionals (SMPs) in addressing psychosocial aspects of rehabilitation. Athletes generally accepted injuries as part of their profession. For example, Joe mentioned, "Being professional, it’s the job, and injury is part of the job." Similarly, Tony and Alex acknowledged that injuries are inevitable in sports.

Psychosocial Responses to Injuries

Despite accepting injuries as part of their sport, athletes reported emotional impacts. Robert, for instance, experienced initial shock and disbelief upon breaking his leg. Emotional responses varied from shock and disbelief to feelings of depression, frustration, and self-doubt. Four athletes used their injuries to reassess their careers, while three reported mood changes during recovery. The most recurrent emotions were self-doubt and frustration.

Self-Doubt

Many athletes expressed self-doubt about their ability to return to their pre-injury performance levels. Robert doubted he would be the same as before his injury, a sentiment echoed by other athletes who, despite accepting injuries, struggled with self-doubt.

Frustration

Frustration was another prominent reaction, often due to the repetitive nature of rehabilitation exercises and the inability to engage in desired activities. Tony described the boredom and frustration of repetitive tasks, while Daniel and Joe found it frustrating to be limited in their physical activities.

Athletes viewed SMPs as crucial for both physical and psychosocial rehabilitation. They expected SMPs to provide accurate diagnoses, effective treatments, and to facilitate their return to fitness. Ryan emphasized the importance of early diagnosis and appropriate treatment, while Tony appreciated SMPs' determination to restore his fitness quickly. Joe, Jason, Mark, and Daniel shared similar expectations, focusing on recovery over empathy.

SMP-Athlete Communication

Although athletes were open about their feelings and expectations, they rarely discussed these with SMPs, assuming that SMPs understood their emotional states. Alex, for example, mentioned his frustration but believed SMPs already knew.

Conclusion

Our study highlights the importance of SMPs in addressing both the physical and psychosocial aspects of injury rehabilitation for athletes in Uzbekistan. By understanding and managing athletes' emotional responses, SMPs can enhance the overall rehabilitation process.

Discussion.

Injured athletes in our study regarded injuries as inherent to their sport, viewing them as "part and parcel" of their professional experience. Despite this acceptance, athletes frequently expressed feelings of self-doubt and frustration, indicating a disconnect between their emotional responses and their perceived importance of these feelings. These emotional responses can significantly affect both physical and psychological recovery, necessitating SMPs to understand and address the range of emotions involved in injury rehabilitation.

There exists a stigma around seeking psychological help during rehabilitation, with athletes often expected to remain mentally tough. This stigma can impede holistic treatment approaches, which integrate both physical and psychological care. SMPs must develop skills to address psychological processes subtly and nonthreateningly to support comprehensive rehabilitation.

Self-regulation, crucial for managing thoughts, feelings, and behaviors towards long-term goals, is often challenged by physical injuries. Effective self-regulation is hampered by negative emotions like self-doubt and frustration. SMPs can facilitate self-regulation through goal setting and social support, enhancing rehabilitation outcomes by addressing both physical and emotional aspects.

Good communication is vital, yet athletes rarely discussed their emotional concerns with SMPs, assuming these professionals already understood their feelings. SMPs should proactively engage in dialogues about both physical and psychosocial processes, helping athletes navigate cognitive and emotional barriers that might hinder rehabilitation.

Athletes found systematic goal setting beneficial during rehabilitation. Goal setting aids self-regulation and fosters communication and trust between athletes and SMPs. Additionally, different types of social support (emotional, informational, tangible, and motivational) should be integral to rehabilitation, enhancing athletes' motivation and adaptive coping responses.

Athletes' emotional responses, such as self-doubt and frustration, can influence rehabilitation adherence and outcomes. SMPs must maintain open communication to identify and address these psychosocial barriers effectively. Understanding the causes of frustration and tailoring interventions accordingly can mitigate negative emotions and support successful rehabilitation.

The study's qualitative nature limits the generalizability of findings. The experiences of athletes receiving daily rehabilitation from club SMPs might differ from those attending private sessions.

Additionally, the study's cross-sectional design did not allow for data collection throughout the injury life cycle, focusing instead on retrospective accounts. The types of injuries studied were primarily acute bone and tissue injuries, which may not compare directly with other injury types.

Recommendations

Based on our findings, SMPs should:

1. Integrate Goal Setting: Use systematic goal setting to aid self-regulation and facilitate communication.
2. Enhance Social Support: Provide various forms of social support tailored to individual athletes' needs.
3. Improve Communication: Establish open dialogues about physical and emotional aspects of rehabilitation.
4. Address Stigma: Subtly incorporate psychological support to overcome the stigma around mental health in sports.
5. Understand Emotional Responses: Recognize and address the emotional impacts of injuries to enhance overall rehabilitation effectiveness.

By adopting these strategies, SMPs can better support athletes through comprehensive and holistic rehabilitation processes.

Conclusion

The study reveals that while professional athletes in Uzbekistan view injuries as an inherent part of their sports, there is a notable disconnect between their emotional responses and the perceived importance of addressing these feelings. Common emotional reactions such as self-doubt and frustration can significantly impact both the physical and psychological aspects of injury rehabilitation.

The stigma surrounding psychological support in sports further complicates the holistic treatment approach needed for effective rehabilitation.

The research underscores the critical role of sports medicine professionals (SMPs) in recognizing and addressing the psychosocial dimensions of injury recovery. Effective self-regulation, facilitated through strategies like goal setting and social support, is vital for successful rehabilitation. Good communication between SMPs and athletes is essential, yet often lacking, necessitating proactive engagement from SMPs to discuss both physical and emotional challenges faced by athletes.

Implementing systematic goal setting and various forms of social support can enhance athletes' motivation, self-regulation, and adherence to rehabilitation programs. Addressing emotional responses and understanding their impact on rehabilitation processes is crucial for SMPs to provide comprehensive care.

To conclude, SMPs must integrate psychosocial strategies into their practice, fostering open communication and addressing the stigma around psychological support. By doing so, they can better support athletes through a holistic approach to injury rehabilitation, ultimately improving recovery **outcomes and helping athletes return to their sports effectively.**

Conclusion

Our study found that all athletes experienced psychosocial responses to sports injuries, yet the stigma surrounding seeking help for these issues influenced their willingness to address them. It is crucial for sports medicine professionals (SMPs) working with injured athletes in Uzbekistan to understand the psychosocial principles that underpin the sport-injury process and the significant impact these reactions can have on athletes.

SMPs should apply psychological principles naturally and subtly within their rehabilitation practices. They need to grasp the concepts of self-regulation and how these influence rehabilitation and recovery.

By understanding and incorporating goal setting and social support, SMPs can enhance athletes' self-regulatory capacities, providing psychosocial support as an integrated and seamless part of the rehabilitation process. This approach can help mitigate the stigma and improve overall rehabilitation outcomes, supporting athletes both physically and psychologically.

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