



Sports Injuries: Its Impact And Psychology Rehabilitation

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Abstract

The paper examines the post injury responses and effect of injury on athletes. Most of the time emotional responses of athletes towards injury. Accompanied by depression, tension, anger, low self esteem, mood disturbance, and sometime suicide isolation resulting running of sports carrier. The paper also explores the role of sports psychologist, when injury athletes are rehabilitating. Rehabilitation from sports injury involves not only physical but psychological consideration. The psychology of sports injury rehabilitation is a relatively new field. All through, psychology of sports injury has made a significant impact on sports medicine team, the practical aspect of how and when we refurb patient to psychologist need to be better understood. An appreciation of mind body interaction and how they function regarding stress and sports performance. Sports injury is fundamental to the acceptance of psychological techniques in the medical arena. The psychology of sports injury has emerged from several previously rehabilitation and sports psychology. The athlete attitude towards recovery social support and social and support from coaches and other teammates and effective communication between injured athletes and medical professionals are also discussed.

Keywords: Sports Injuries, Psychology, Rehabilitation

Introduction

Injuries, while hopefully infrequent, are often an unavoidable part of sports participation. While most injuries can be managed with little to no dispersion in sports participation and other activities of daily living. Some impose a substantial physical and mental burden. According to the national athletics trainer association, "in the last 10 years, college sports have flourished, athletes required to train and compete year round rather than seasonally, at the same time, are getting bigger, and stronger and more physical -- which lead to a greater risk of injury". In addition to the physical pain of an injury, an athlete struggles psychologically. Because psychological variables influence injury on set, duration, and recovery. When you researchers have conducted that rehabilitation from sports injury involved not only physical, but psychological consideration" (Crossman, 1997)

Athletes can be expected to experience a variety of emotional responses and stress upon being injured. They will attempt to interrupt injury relevant medical information, come to terms with being injured, and engage in coping responses. There is no predictable sequence of emotional reaction to athletic injury. For many athletes, exercise and physical activity served as primary coping mechanism and outlet for dealing with psychological issues. In those athletes, an injury may result in even greater emotional upheaval.

Emotional responses to injury include sadness, feeling of isolation, irritation, lack of motivation, frustration, anger, alteration in appetite, sleep disturbance and feeling disengaged. Problematic emotional reaction occurs when symptoms do not resolve or worsen over time, all the more so if the symptoms seem excessive relative to other injured athletes.

It is important for athletes trainers and team physicians, as well as athletes, coaches and administrators, to understand that emotional reaction to injury are normal. However, problematic reaction are those that either do not resolve or Worsen over time, or where the server of symptoms seems excessive. Some of problematic reaction or symptoms which commonly seen in athletes after injury are-

(I) Problematic Emotional Reaction

The emotional responses to injuries varies greatly among athletes. While it is apparent that some injured athletes struggle emotionally, not at all athletes experience an observable or miserable emotional disturbance and take injury in stride. Some researchers have attempt to generalize the emotional responses to injury. However, the post injury reaction of athletes are more complex and varied than original thoughts (Grossman,1977; Smith,1990)

Although reaction to injury vary, some emotional are more commonly reported than others. Frustration, depression, anger and tension appeared most often were the highest ranked emotions (Crossman 1997)

Athletes can be expected to experience variety of emotional responses and stress upon being injured. They will attempt to interpret injury- relevant medical information comes to term with being injured (Smith,1990). Among injured athletes college or Elite status, common responses to injury where dis brief, fear, rage. Depression, tension and fatigue (Weiss & Troxel, 1986). Johnston and Carroll (2000). Studied different between injured and uninjured athletes are reported that injured athletes disclosed greater negative effect lower self esteem and higher level of depression and anxiety. In congruence with Johnston and Carrol finding research on psychological consequences of athletic injury among high level competition reveal that injured athletes exhibit greater depression and anxiety and lower self esteem then control group immediately following physical injury and at follow up session (Leddy, et. Al. 1994). Injured athletes express sum of common reaction scenes in trauma victims outline by the United States department of veterans affairs and include fear, anxiety, avoidance anger, irritability, grief and depression (Foaet. Al.,2005)

Fear is another emotion prevalent among injured athletes. Athletes are fearful about injury and because of this fear, they may be reluctant to train with full intensity (Shure& Dietrich, 1997). Some athletes maybe reluctant to return to training at all as a result of the fear. Several researchers have investigated possible causes to the injured athletes emotional response to injury. Being an athletes require commitment, determination and most importantly, a passion. An athletes sport dictates their life and is a component of their personal identity. In the article "mind over matter" (Ross,2006), Dr. Aimer Kimball testifies, "a lot of time the sports is so important to the athletes, it is like they are losing a significant part of themselves". "Getting injured is a traumatic experience for athletes; what they have devoted too much time an energy to, can be suddenly, without warning, take away"(Grossman, 1997)

According to Little (1990), athletes are predisposed to neurotic illness when mandatory deprivation of exercises necessary because of a pre occupation with fitness or sports. Often Times an athletes will use physical activity to cope with stress. When athletes are injured and unable to engage in physical activity they may have difficulty dealing with their daily stress. Smith(1990) state that "the development of neurosis in fitness fanatics deprived of exercise at least partially because there life stress prior to injury or illness had been managed by physical activities rather than by articulation emotional concern". Further more, the injury can actually produced additional stress that may include emotional disturbance. Hardy(1992) suggest that, " the major sources of stress that have been reported by sports performer include fear to failure, concerns about social evolution by others, lack of readiness to perform and loss of internal control over once one's environment".

Separation from the team take an emotional tool on injury athletes. Athletes enjoy camaraderie among teammates and they rely on each other for support. Consequently, " an injury that even temporarily halts participation cause tear in the fabric of well- being through which uncomfortable or unacceptable feeling may emerge" (Deutsch, 1985). Wilkerson and Dodder(1982) believe it is through sports that the individual seek to reunite with the collective consciousness. A disturbance to the full film and that need causes an anxiety and maybe traumatic in the extreme.

Psychological rehabilitation and role of sports psychologist

A recent survey of 20 medicine physician indicated high degree of psychological or behaviour concern occurring in conjunction with sports injuries, and an increase interest in the service of clinical sports psychologist.

Several studies have revealed that athletes are hesitant to seek out psychological counselling. Athletes are reluctant to seek help for several reasons. Many view emotional disturbance as a weakness. Smith (1990) suggests that athletes make prefer the physical discomfort occurring with injury to any emotional discomfort. As said by Crossman(1997)," while many athletes spend hours and much energy each day physically preparing for competition, more often than not they are unprepared psychologically to handle the stress associated with an unforeseen or unexpected injury". Athletes have access to resources for physical rehabilitation, but often the psychological distress caused by injury goes untreated. According to Smith et al. and Chan(1990)," emotional disturbance does occur post injury and injured athletes should be given the opportunity to discuss their feelings". In fact, patients express relief at being given the opportunity to confide concerns privately, away from the presence of person who may have a vested interest in their athletic performance. Injured athletes treated with a comprehensive rehabilitation program that includes addressing issues experience less stress. Also some studies have suggested the use of psychological strategies such as goal setting, positive self statements, cognitive restructuring, and imaginary visualisation is associated with faster recovery.

However, rehabilitation maybe affected by problematic emotional reactions, the most common of which are loss of Identity, fear and anxiety, and a loss of confidence. Warning signs characterizing poor adjustment to injuries include:

- ❖ Unreasonable fear of re-injury.
- ❖ Continued denial of injury severity and response to recovery.
- ❖ General impatience and irritability.
- ❖ Rapid mood swings.
- ❖ Withdrawal from significance others.
- ❖ Extreme guilt about letting the team down.
- ❖ Dwelling on minor physical complaint.
- ❖ Obsession with question of return-to-play.

The level and type of emotional reaction experience also change your time; from the initial onset of injury, through rehabilitation, to return -to- play.

A number of factors should be considered when treating injured athletes. This factors includes;

- Building trust and rapport with the injured athletes

Injured athletes often experience a range of emotion that make it difficult for athletic care network members to established rapport and build trust , listening to athletes is particularly important, not only to make a medical diagnosis but also to access and monitor there emotional state.

- **Educating the athlete about the injury.**

Injured athletes must understand and process injury relevant information, often at a time when they are experiencing emotional upheaval. It is critical that explanation of injury be presented in terms and the injured athletes can understand. An effective methods to access this understanding is to ask the athlete to provide their interpretation of information given to them.

- **Identifying miss information about the injury**

Injured athletes often obtain in accurate information from a variety of sources (e.g. parents, coaches, teammates,internet) which may contribute to confusion and emotional upheaval.

➤ Preparing the athletes and coach(only with athletes permission) for the injury recovery processes

The injury recovery and rehabilitation processes is variable due to characteristics of the injury, treatment provide, presence of complication and psychological issues. Therefore, the athletes and coach should be educated that an injury is best manage on an individual basis. In addition, coaches should be encourage to help the injured athlete avoid isolation from the team.

➤ Encouraging the use of specific stress coping skills.

Injured athletes can experience considerable stress to all the injury and rehabilitation processes. Psychological as well as physical strategies will enhance the recovery process.

Selected techniques for coping with stress

Cognitive Based Techniques	Somatic Based Techniques	Cognitive Behavioural Techniques
<ul style="list-style-type: none"> ▪ Thought stopping ▪ Thought replacement & imagery ▪ Positive self-talk 	<ul style="list-style-type: none"> ▪ Slow, deep or countered breathing ▪ Progressive muscle relaxation ▪ Biofeedback training 	<ul style="list-style-type: none"> ▪ Goal setting. ▪ Stress management training

It is essential, that team physician:

- ❖ Recognise psychological factors play a role injury rehabilitation.
- ❖ Understand athletic injury irrigation program should incorporate psychological as well as physical strategies.
- ❖ Coordinate a comprehensive rehabilitation program that address physical and psychological issues, including provision of psychological support service as needed.
- ❖ Co-ordinate graduate return to practice and play to promote psychological readiness.
- ❖ Assess an athletes social network.
- ❖ Educate athletes, parents, families, friends and others about the importance of supportive social network.

Psychological Issues & Return-to-play

Psychological readiness is one criterion for return to play. Emotional reaction, including a lack of confidence, apprehension and fair fear, may accompany an athletes return to play. These reactions may become problematic, interfere with performance and increase the probability of re- injury. The team physician should access not only physical factors, but emotional reaction, when making the return to play decision. In conjunction with with medical care, the supportive social network can help reduce the emotional upheaval and stress accompanying an injury and its rehabilitation.

It is essential the team physician understand:

- ❖ Physical clearance to return to play may not correlated to psychological readiness.
- ❖ It is desirable, the team physician:
- ❖ Co-ordinate the athletic care network to monitor the psychological readiness of athletes who are preparing to return to play or have returned to play.
- ❖ Coordinate effort to maintain the athletes contract with the team to enhance psychological readiness.
- ❖ Co-ordinate psychological support services as needed.

Conclusion

Psychological factor has been soon to be an important antecedent to the onset athletic injuries and also play an important role in injury rehabilitation and ultimately successful return to play. Team physicians must considered psychological as well as physical factors when treating and coordinating care for injured athletes.

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