

Apr 1st, 11:00 AM - 2:00 PM

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Gruenberg, Kurt and Beachy, Kurt D., "Psychological Readiness Effect on Return-to-Play in Collegiate Athletes" (2015). *The Research and Scholarship Symposium*. 15.

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Psychological Readiness Effect on Return-to-Play in Collegiate Athletes

Kurt T. Gruenberg & Kurt D. Beachy



ABSTRACT

Psychological readiness has been studied extensively over the past 20 years. It is becoming increasingly important to understand fully how athletes psychologically deal with a physical injury. Current research has identified specific intrinsic and extrinsic factors that have shown to present negative effects on athletes (Podlog, 2013). They have also identified specific psychological factors that play a major role in the rehabilitation process (Rees, 2011). However, current research has not studied the entire psychological experience of athletes and their determining factors. They also have not used surveys that allow for both qualitative and quantitative data to be collected. To identify the correlation between psychological readiness and return to play, surveys were distributed to NCAA universities within the state of Ohio. Athletic trainers then distributed the survey to all athletes who had missed sport related activities due to their injury. Quantitative results shows no statistical difference, but there were common themes found within the qualitative data. The qualitative results followed in line with previous results from other studies. Despite the amount of limitations in this study, the qualitative data will help further athletic trainers knowledge about how athletes react to athletic injuries.

INTRODUCTION

Psychological readiness and the affect that it plays on the return to play of athletes has recently begun to peak interest in those involved in the athletic population. Current research has consistently shown two sets of factors that directly affect the psyche of athletes after an injury that causes them to miss time from their sport.^{1,2,3,4,5,6} Those two sets of factors are intrinsic and extrinsic factors. The Webster's Dictionary definition of intrinsic factors are defined as a form of motivation to do something based on an internal reward, consequence, or feelings. They also define extrinsic factors are a form of motivation to do something based on external factors, such as the expectation of reward or fear of punishments. Currently, research has specifically looked at individual risk factors and the effect they have on the psychological return to play process.^{1,2,3} However, no studies have looked at both intrinsic and extrinsic psychological factors and correlated the athlete's responses to the extent of time they missed. The purpose of this study was to see what psychological extrinsic and intrinsic factors combined will do to the return to play of collegiate athletes.

PURPOSE

The purpose of this study was to see what psychological extrinsic and intrinsic factors combined will do to the return to play of collegiate athletes.

METHODS

Participants

The survey was distributed to every NCAA sanctioned institution's head athletic trainer in the state of Ohio. Those head athletic trainers were to distribute the survey to their athletes that met the inclusion criteria and distribute it to their assistants to also hand out the survey to those athletes who qualified. The inclusion criteria for this study was; they had to currently be a student-athlete, they must have missed at least 6 weeks of sport related activity due to their injury, and they must have fully recovered from said injury.

Sixteen student athletes from Division II and Division III institutions met the inclusion criteria for this survey. There were 12 males and 4 females who responded (Figure 1.1). Out of the 16 responses there were 13 Division II and 3 Division III athletes (Figure 1.2). The sports that were represented in this study was baseball, football, basketball, soccer, and track and field (Figure 1.3). Before participating in the study, all subjects read and signed an informed consent form approved by the University's Institutional Review Board for the Protection of Human Subjects, which also approved the study

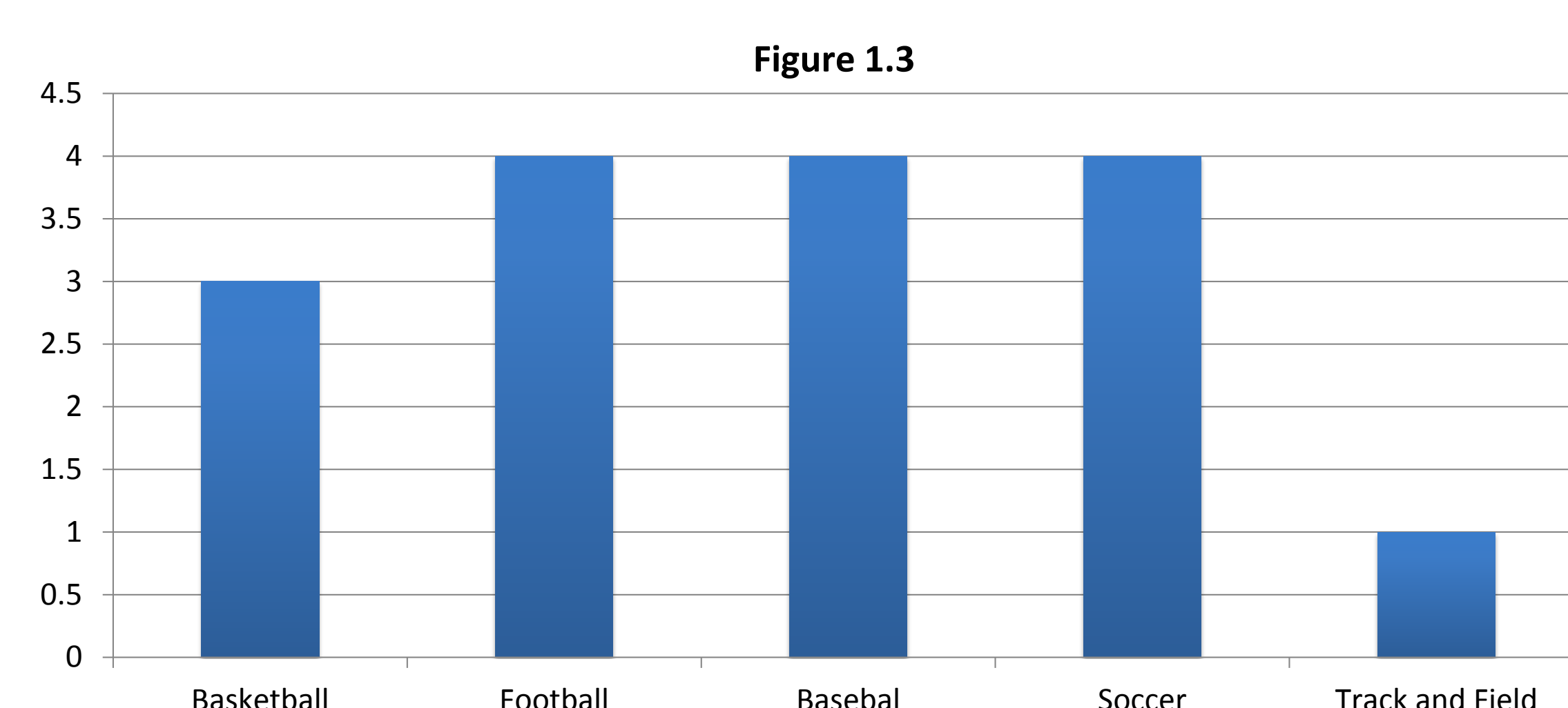
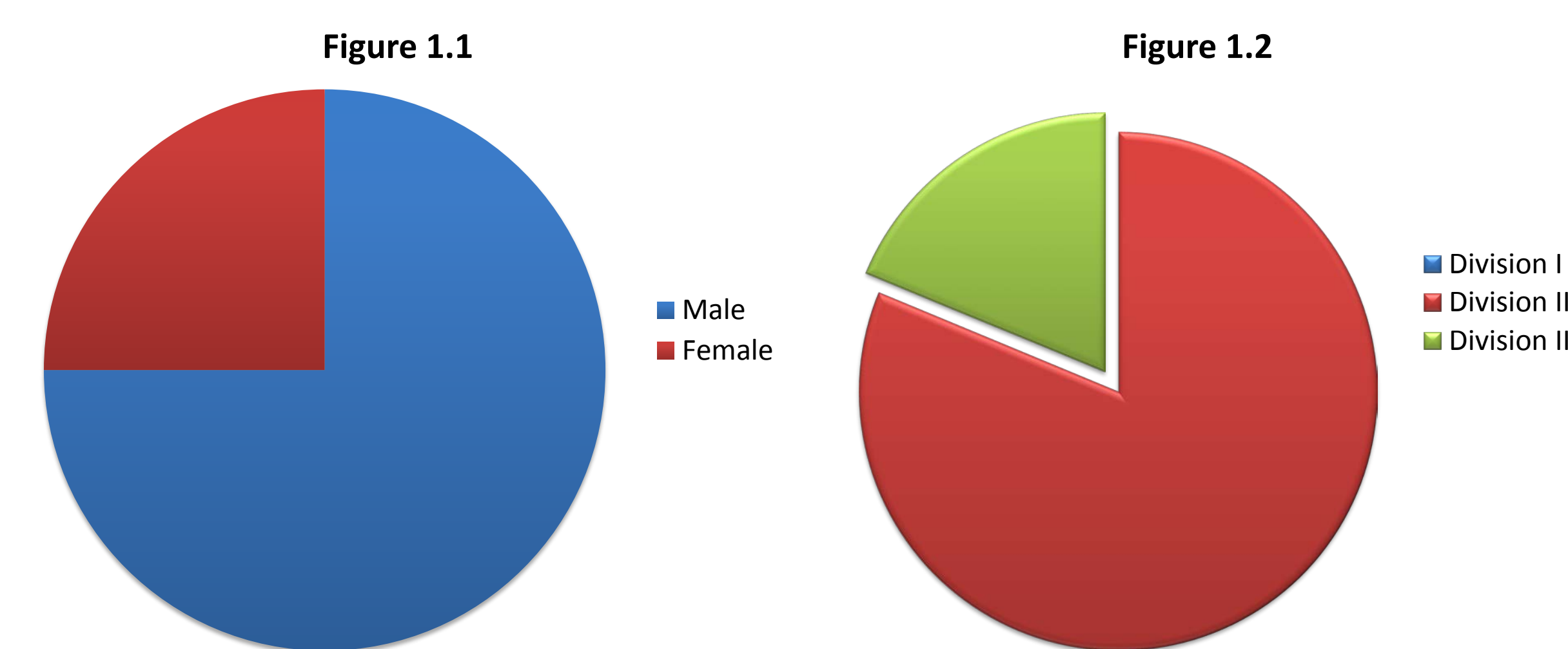
Instrumentation

A 27-question survey was created to distribute to every NCAA school within the state of Ohio. This survey was created through a survey distributing website called qualtrics.

Procedures

Upon the athletes reception of the survey they were asked to read the copy of the consent form. After they read and understood the risks and benefits of this study they then started the survey declaring that they had understood everything mentioned in the consent form.

The survey consisted of both qualitative and quantitative questions. The reason for both types of data was because it is important to get quantifiable data such as frequencies and percentages, but more importantly the authors believed it was important to give the athlete the ability to express their experience. By allowing the athletes to describe their experience we were able to gather qualitative evidence such as common themes.



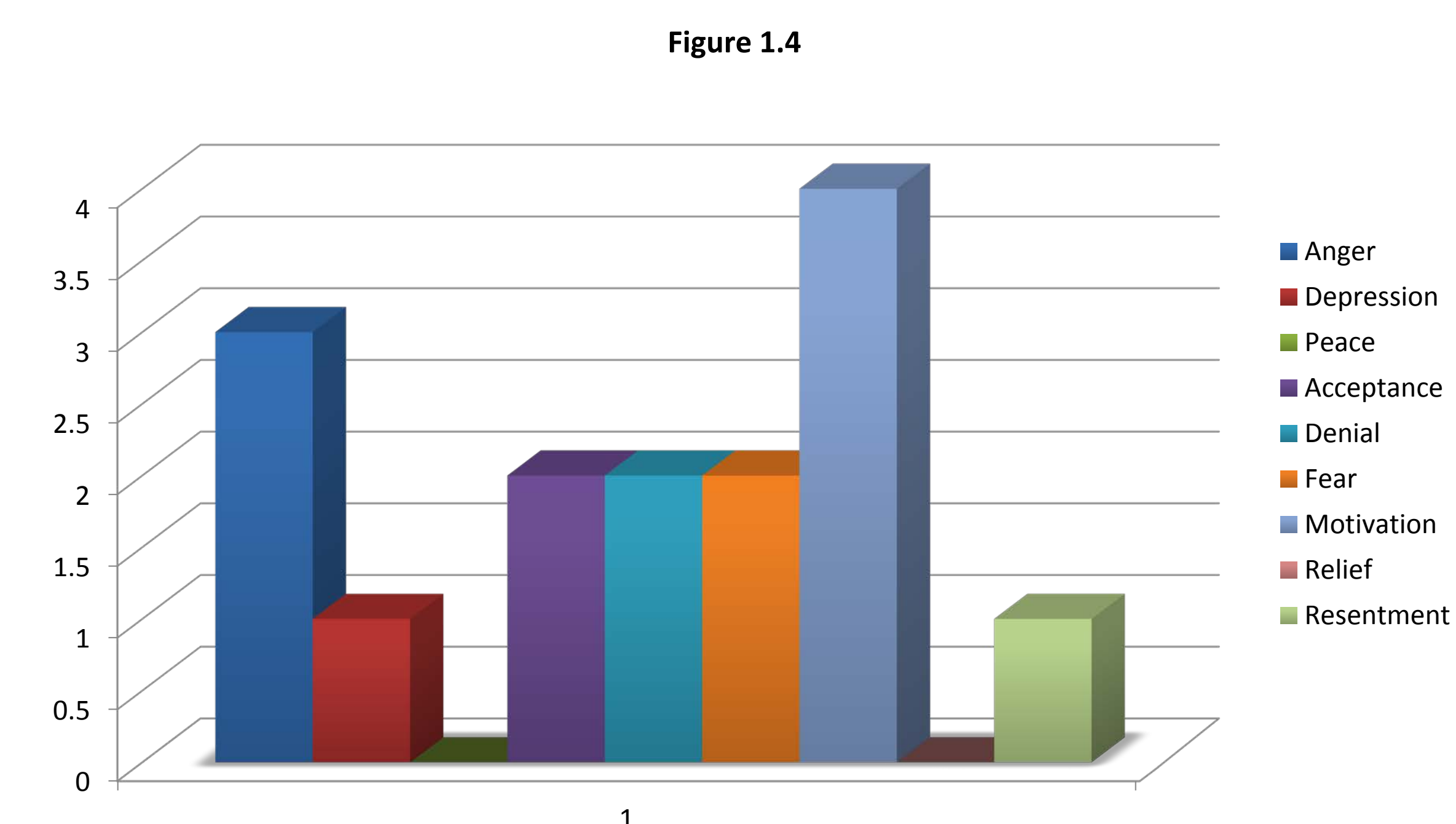
STATISTICAL ANALYSIS

With the data that could be quantified a chi square test was run to test for statistical significance. With this data a prior alpha level was set at less than .05%. This study contained two groups: gender and level of participation. Gender and level of participation were compared to the Athletic Identity Measurement Scale (AIMS) and also to each quantitative question using the chi square test. A qualitative data analysis was conducted to discover common terms and phrases to identify similar themes within their responses.

RESULTS

When comparing gender and level of participation to the AIMS there was no statistical difference. When comparing the gender and level of participation to the remaining quantitative questions there was no significant differences.

Qualitatively we found many common themes regarding multiple questions where the subject was given the opportunity to respond. The athletes who claimed to not follow what their athletic trainer told them to do was because they claimed to have done more that what was cleared by their athletic trainer. Athletes who stated that they did not feel at their preinjury level of participation attributed this feeling to the fact that they never felt completely healed and no longer possessed the same power and explosiveness. Subjects were also asked if their coach pressured them to return to their sport sooner than they felt comfortable with. The common theme to this question was that their coach did not have a good understanding of what the injury was and the severity of the injury. They also said that their coach needed more players and pushed for them to return. When the athletes were asked how they knew they were ready to compete again they responded by saying that they knew they were ready because they could, for the most part, remain absent minded from their injury while they were competing. They also stated because they trusted what they did with their athletic trainer and trusted their athletic trainers judgment in allowing them to return to participation. When asked how they felt psychologically when they were cleared to play most stated that they were always anxious or nervous about reinjury, worried about whether or not they would be as good as they were before, or even if they would be accepted by their team again. The others said that they were extremely excited and ready to return to their sport again. When they were asked to explain overall how their rehabilitation process went the majority proclaimed of having an overall good and successful experience. Almost all claimed of having days that were harder than some, but they are glad to be better again and are happy with the work they put in to get better. Finally, when athletes were asked to select which feeling and emotions were most prevalent when they first acquired their injury (Figure 1.4) motivation was shown to be the most common response.



DISCUSSION

The purpose of this study was to identify and compare gender differences and level of competition difference between a complete survey which looks at all aspects of psychological readiness which included quantitative and qualitative questions.

The results of our quantitative data were inconclusive. This can be attributed to the lack of responses and the lack of participation from both females and from Division I and Division III schools. However, there were some notably interesting results from the qualitative data.

When athletes responded as to why they did not follow the exact protocol that was given to them they explained it was because they wanted to do more in order to get back to participation sooner. Overadherence to rehabilitation protocols is a common issue among athlete's who extremely identify themselves with their sport (Podlog, 2014). This identity is found because of their need to be involved in sport (Podlog, 2014). They feel that without their sport they have lost who they are and how other people see them (Podlog, 2014).

The athletes who felt that they could not return to their pre-injury level of participation was due to their lack of explosiveness, power, and coordination. It has been shown that a fear of reinjury results in both a physiological and psychological change that impacts performance and ultimately increases the risk of reinjury (Ogu, 2013). This underlying physiological and psychological fear of re-injury may be prohibiting the feeling of power and explosiveness even though they are physiologically capable of their previous abilities.

Coaches were also said to have been pressuring athletes to return to their sport faster than they were cleared to and faster than the athlete felt. Athletes said they felt their coach had a lack of understanding and knowledge of the severity and seriousness of their injury. Social support has been shown to be a contributing factor in the success of an athlete with suffering an injury (Reese, 2010). Athletes found that the social support from their athletic trainers were more satisfying, available, and contributed most to their overall well-being (Reese, 2010). However, social support from family, teammates, and coaches have been found to have a negative effect on the rehabilitation process (Clement, 2011) (Podlog, 2006).

When athletes were asked how they psychologically knew they were ready to return there was a plethora of different responses. Responses ranged from feeling anxious, nervous, relieved, and excited. Research has shown that a factor dealing with athlete outcomes is their attitude towards the rehabilitation process and their motivation for getting healthy (Podlog, 2010). Those athletes who feel that they are returning to sport to meet personal aims and objectives has shown to have a positive outcome and experience when they could return (Podlog, 2010). Whereas, those who presented with more autonomous reasons showed doubt and anxiety when the time to return to their sport came (Podlog, 2010).

A limitation of this study was the lack of responses from all athletes. It was too difficult to get the survey to the athletes who met the criteria. There were no responses from Division I schools and only 3 responses from Division III schools. Future research can continue off this current research and look into more depth of the differences between divisions in school. They could also compare and contrast the differences between professional athletes and collegiate athletes as well.

CONCLUSION

Athletes will continue to struggle with psychological readiness. It is our job as athletic trainers to be able to identify those who are more predisposed to psychological injuries. Athletic trainers need to be aware that both males and females struggle with this issue but in different ways. They need to know the different pressures that each gender is undergoing. It is also important to know the demands that are being placed on your athletes depending on the division. Athletes who are competing at a higher competitive level will receive more pressures to return quickly and perform at a higher level than before. Psychological readiness will continually be a problem that athletic trainers will face, and it is our responsibility to be well trained and invested in our athletes' lives and recovery process to help encourage and identify psychological problems in our athletes.