Injured athlete support group: Evaluation of a pilot program

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Background

- Athletes require increased support following injury (Yang et al., 2010).

- Good psychological functioning in athletes is associated with appropriate utilization of, and benefit from, physical rehabilitation (Lampton et al., 1993; Levy et al., 2008).

- Return-to-sport concerns are also associated with higher levels of negative affect and self-esteem levels following injury (Podlog et al., 2010).
iREP: Injury Recovery Enhancement Program

• One-year pilot program funded by the Department of Athletics at Stanford University

• 8 weekly group meetings
  – the “athlete identity”
  – introduction to cognitive behavioral therapy
  – effective communication skills
  – building resilience
  – sadness/shame
  – anxiety/fear
  – social support
  – goal setting.
Research Methods

• Online questionnaires completed before and after group participation
  – Assessed domains of interest using standardized measures
  – Qualitative assessment of goals, satisfaction, perceived benefits

• 100% of students participating in iREP consented to participate in our study

• Significant barriers to participation in iREP
Participants

• 7 participants (4 women, 3 men)
• Mean age $18.7 \pm 0.82$ years
• All participants were from team sports
• Range of injuries: soft tissue, fractures, and concussion
• Trainers were most common referral source
Results: Baseline Assessment

• Most difficult part of the recovery process:
  – “Not being able to play or contribute to the team.”

• Top priority for participation
  – Most common responses included finding a sense of community and improving coping skills
Results: Post-Group Assessment

• No pre-post differences in standardized measures

• Satisfaction with group:
  – 66% of participants identified that they were “completely” or “very” satisfied

• Athletes rated that 89% of their goals for group participation were accomplished
## Results: Post-Group Assessment

<table>
<thead>
<tr>
<th></th>
<th>Made things a lot better</th>
<th>Made things somewhat better</th>
<th>Made no difference</th>
<th>Made things somewhat worse</th>
<th>Made things a lot worse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coping with my injury</td>
<td>33%</td>
<td>67%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Increasing social support</td>
<td>67%</td>
<td></td>
<td>33%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Helping with effective</td>
<td>33%</td>
<td>67%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>communication</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Alleviating low mood</td>
<td>33%</td>
<td>50%</td>
<td>17%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Managing anxiety</td>
<td>67%</td>
<td>33%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Goal setting</td>
<td>50%</td>
<td>17%</td>
<td>33%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Preparing for recovery</td>
<td>33%</td>
<td>50%</td>
<td>17%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>
Implications

• Athletes met most of their goals for participation, were very satisfied with the group, and would recommend it to a friend.

• The need for this type of services was emphasized by depression and anxiety scores in the moderate range

• Revisions to group structure and format may increase access to services and increase beneficial impact of group
Future Directions

• Potential revisions
  – Format:
    • Drop in or rolling admission format
    • Shorten duration of group (e.g., 4 meetings)
  – Content:
    • Emphasize social support aspects and group process
    • Handouts, tools will be provided when relevant topics are raised by group members.
    • Create an online resource board
Thank you

We are grateful to the support of the NCAA for funding this research initiative.

Questions?
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