Safeguarding in sports physiotherapy

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Abstract

Sports physiotherapists work in very close contact with athletes, both on and off the field of play. In this challenging sporting context, they often have to find a balance between pushing
the limits in rehabilitation/training and staying within the limits of a safe and ethical proper management of the athletes. Sports physiotherapists have also access to a unique perspective of behaviours not only of the athlete, but of all other individuals interacting with the athlete. Therefore, recognition of potentially abusive behaviours is an important component of education, as well as developing the communication skills to address issues appropriately. Mentored practice may be the best training for sports physiotherapists to acquire the necessary skills and behaviours in the complex sporting environment.

Résumé
Les physiothérapeutes du sport travaillent en contact très étroit avec les athlètes, tant sur le terrain de jeu qu'en dehors. Dans ce contexte sportif difficile, ils doivent souvent trouver un équilibre entre le fait de repousser les limites de la rééducation et de l'entraînement et celui de rester dans les limites d'une gestion sûre et éthique des athlètes. Les physiothérapeutes du sport ont également une position unique pour observer les comportements non seulement de l'athlète, mais aussi de toutes les autres personnes qui interagissent avec lui. Par conséquent, la reconnaissance des comportements potentiellement abusifs est une composante importante de la formation, de même que le développement des compétences de communication pour aborder les problèmes de manière appropriée. La pratique encadrée peut être la meilleure formation pour les physiothérapeutes du sport afin qu'ils acquièrent les compétences et les comportements nécessaires dans l'environnement sportif complexe.

Mots clés: contexte sportif, éthique, observation, communication, mentoring

Introduction
Safeguarding in its widest sense relates to protecting anyone who might be deemed vulnerable, regardless of age or any impairment.

Vulnerable individuals have been defined as

- Someone who is experiencing or is at risk of abuse, neglect or other kinds of harm
- Someone who needs for care and support (whether or not they are being met)
- Someone who as a result of those needs is unable to protect themselves against the abuse or neglect or the risk of it [1]

These definitions could apply to children and adults, with or without any impairments. The key point is that vulnerability is linked to the circumstances an individual finds themselves in, as opposed to any individual characteristics.

“While rightly, there is reluctance to say that every adult who competes in sport is vulnerable, when someone is in a team or on a pathway, vulnerability inevitably increases, as so much is
taken out of their control.”
(Baroness Tanni Grey-Thompson, Duty of Care in Sport Independent Report to UK Government, 2017)

Abuse or mistreatment in sport has been defined by the Swiss Sport Integrity as:

- Discrimination or unequal treatment
- Violation of psychological integrity
- Violation of physical integrity
- Violation of sexual integrity
- Neglect of duty of care [2]

Athletes, particularly those in a high performance system could be considered to be in environments which could put them at risk. These risks could relate to the physical environment, such as isolation from family support through extended travel or centralised programmes. They could also be linked to the culture within a specific sport or team, which might normalise negative behaviours. Similarly, that culture could facilitate a relationship imbalance between coach or manager and the athlete, leading to an abuse of power. Within those difficult situations, the athlete’s personal circumstances may well deter them from speaking up about these problems. This could include fear of losing their place in the team, or their funding, as well as the sense of identity as an athlete. [3]

Negative behaviours amongst peers in sport

Abuse or mistreatment can also come from peers. Much of the existing evidence around factors that might predispose to athletes exhibiting negative behaviours is in the anti-doping literature [4] but some of the issues have clear parallels with potential peer abuse or tolerance of negative behaviours. Some of these factors include attempts to either recover following injury or to improve rankings or place in a team. There is often a pressure to maintain a position and is linked to peer pressure. Whilst these factors have been shown to increase risk of doping, some of these factors could easily be viewed as changing tolerance to poor culture within a team.

Conversely, again in the anti-doping literature, there are factors that potentially protect from negative behaviours. These include the positive impact of good athlete support personnel, coaches or teachers, all of whom can help develop resilience, which is an ability to resist negative behaviours even in challenging circumstances. [5]

A particular risk that can increase vulnerability is around transition from youth to senior competitive sport. Some of these include a change in intensity of training and competition, alongside a pressure to keep up with more experienced new peers. This can lead to a reluctance to question amidst a different support style aimed at adults. Some of these talented young athletes may have also been dealing with a “child prodigy” label, often being the best in their age group and now moving into an environment where they may not be leading the field.

An important aspect when working in this environment is to potentially recognize any of these
pressures manifesting, as well as reporting or discussing any observed coercive behaviours. As physiotherapists we have a duty of care to our patients, which includes athletes we support in a sporting context. Some of the areas linked to the role are detailed in the Figure below.

A physiotherapist's professional code of conduct and subsequent role in sport has led to a position of trust, from both athletes and officials. Athlete welfare is the first priority and as a consequence of that perception, physiotherapists are one of a very small number of people who have access to all areas, including field of play. In doing that role they can observe different behaviours, often not seen in more public environments, as well as having access to an athlete during competition. The latter situation potentially makes physiotherapists a target for approaches to influence athlete behaviour or decisions on the field of play. As practitioners, physiotherapists often deal with a fine balancing act to drive or facilitate performance but managing this ethically and safely.

Duty of care in sport means:

- A responsibility for physical and emotional well-being of everyone in our care
- Providing a reasonable standard of care
- Any disclosure or medical & psychological information must be consensual
- A responsibility to speak up in cases of concern

However, there are some barriers to speaking up to protect athlete well-being, including both institutional and peer pressure. Normative conformity [6] can be a powerful coercion to adopt established behaviours to fit in with the existing culture, which might initially be innocuous but could lead to obvious rule breaking or ignoring potential abuse. Similar pressures about losing their place in a team, their employment etc mentioned in an athlete context could also
be applied to support staff such as physiotherapists.

**Addressing the issues**

– Education
  • Recognition of potentially abusive behaviour (including neglect and bullying) is an important component of education in this area and can be addressed through courses, whether online or face to face.
  • Developing the communication skills to address issues appropriately and proportionately could also be addressed through formal education but is more likely to need practical aspects such as working through case scenarios
– Mentored practice – where practitioners have an opportunity to develop skills through exposure to the specific environment, with positive support from peers. This is likely to be more effective to transfer skills and behaviours introduced in more formal education programmes. However, facilitating this option requires commitment from sports physiotherapists across the national or international community.

Sports organisations have collective responsibility for the dominant ethos and a duty of care, not just to individual athletes, but to sport as a whole. Identifying vulnerable athletes could facilitate strategies to modify the environment and culture around them to change perceptions on what is acceptable behaviour.

**Summary**

– Excellent ethical practice in a sport environment requires a delicate balance
– Our ethical responsibilities go beyond the legal safeguarding obligations
– Athletes are people first with differing motivations and challenges
  • Identifying vulnerable individuals or situations early could improve safeguarding.

We need to develop a supportive community of practice for physiotherapists to develop the skills needed to be effective in this complex environment. The planned E-learning platform by the “Health4Sport” working group is an important step in this direction.

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