IS AUSTRALIA’S APPROACH TO INJURY PREVENTION ADEQUATE?

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FOCUS

- Community sport
- Population-based approaches
- Getting, and keeping, more people involved
- Sports safety rather than injury prevention
- Research perspective
- Evidence-informed policy and practice
- Translation of research knowledge
TRADITIONAL, AND MOST COMMON, APPROACHES TO SPORTS INJURY PREVENTION
TRADITIONAL APPROACHES

• The sports injury domain has been governed by advances in clinical sports medicine (prior to mid 1990’s, mostly since then)

• This has led to a focus on
  – improved diagnosis, treatment and rehabilitation of injuries
  – elite or high performance athletes
  – intrinsic risk factors
  – a focus on individuals
BUT!
QUESTIONS

• Wouldn’t it be better and cheaper to prevent injuries from occurring in the first place?
• Isn’t sport delivery targeted at community participants and children, as well as the relatively few elite/professional athletes?
• Shouldn’t we be concerned about safety for the very large numbers of community and recreational participants?
• Doesn’t the sports delivery context impact on safety too?
CURRENT STATUS OF PUBLIC HEALTH SPORTS INJURY EFFORTS IN AUSTRALIA
CURRENT STATUS

  – no specific mention of sports safety, implied

• No national sport-focused safety policy

• No partnership between lead health and sport agencies

• No infrastructure for coordination or implementation efforts
THE SAME IS LARGELY TRUE ACROSS ALL STATES AND TERRITORIES
WHAT DO WE NEED TO DO?
CURRENT EVIDENCE BASE

- Very little formal evidence that most measures work
  - but equally little evidence that things don’t work
- Largely based on common sense and practice
  - does this matter?
  - can’t we still use this information?
- Best buy for sport and physical activity safety “risk management plans” (NIPAC, 1999)
- Guidelines/resources available (e.g. Smartplay)
- How much evidence is enough evidence?
PREVENTION AND RESEARCH LINK

- To prevent injuries, prevention measures need to be:
  - acceptable
  - adopted
  - complied with

- Only research that can be adopted in practice will prevent injuries

Source: Finch, JSAMS 2006
NEW RESEARCH FRAMEWORK

Translating Research (into) Injury Prevention Practice

Source: Finch, JSAMS 2006
THE TRIPP FRAMEWORK

TRIPP

1. Injury surveillance
2. Establish aetiology and mechanisms of injury
3. Develop preventive measures
4. “Ideal conditions”/scientific evaluation
5. Develop implementation strategies
6. Evaluate effectiveness of preventive measures in implementation context

Counting injuries
Injury causes
What could be done
What works
Implementation
Prevention

Source: Finch, JSAMS 2006
HOW CLOSE ARE WE TO THIS IN AUSTRALIA?
AUSTRALIAN PUBLISHED SPORTS INJURY RESEARCH ACCORDING TO TRIPP STAGES

2001-2006
AUSTRALIAN SPORTS INJURY RESEARCH
2001-2006

% of all sport-specific studies

Australian football 35
squash
netball 30
rugby union 25
rugby league 20
surfing 15
basketball 10
boxing 5
field hockey 5
military 5
soccer 5
triathlon 5
CLEAR GAPS AND FUTURE DIRECTIONS

- **Community sport**
  - only 39% of all research (mostly competitive)

- **Children’s sport**
  - only 12% of all research

- **Female sport**
  - only 10-20% of all research
WHAT ARE WE DOING WELL?

- Adults
- High performance athletes
- Male dominated sports
- Australian football

- Counting injuries
- Identifying risk factors
IS AUSTRALIA'S APPROACH TO INJURY PREVENTION ADEQUATE?
SOME WAYS FORWARD
A MAJOR CHALLENGE

INCREASING PARTICIPATION

SAFETY PROMOTION
LINK SAFETY AND PARTICIPATION
PROMOTION ACTIVITIES

INCREASING PARTICIPATION

SAFETY PROMOTION

INCREASING PARTICIPATION

SAFETY PROMOTION

NOW

FUTURE
POWER OF INSURANCE

• Survey of all Victorian LGAs (n=48 responded)
  – 24 had ground checklists (20 of these included CMP-developed guidelines)

• 4 Victorian SSAs
  – all used insurance developed match day checklists
  – one had central storage of records and could show direct link to injury reductions

Otago et al, 2007
ENHANCE AND DEVELOP NEW PARTNERSHIPS WITH THE INSURANCE INDUSTRY

- Incentives (cost saving imperatives)
- Can influence safety practice
- Data – for problem identification and monitoring
- Sport + Insurance + Research
SUCCESSFUL PARTNERSHIPS

- **Squash**
  - VSF + research partnerships since 1996
  - identified barriers to PE use and developed and trialled strategy to promote it
  - Roll-out of program across the State
  - $5K DHS + $10K SRV + $122K NHMRC

- **Australian Football**
  - AFL Victoria + research partnerships since 2000
  - effectiveness of headgear and mouthguards ($176K VicHealth)
  - identifying game development needs for junior football ($15K SRV, $15K NSWSIC, $40K AFL)
  - preventing knee injuries ($1,066K NHMRC)
  - ground conditions ($28K SRV)
FACILITATE REAL-WORLD SPORTS SAFETY RESEARCH

- Partnerships between sport and researchers
- Focus on implementation – why will/will not something work in practice
- Real-world context for identifying priorities and prevention
- Translation of research into sporting practice
- Engagement of researchers with sports bodies
- Potential for additional funding
SOME USEFUL WEBLINKS

- Links to a variety of sports safety resources at Sports Medicine Australia: http://www.sma.org.au/information/sportsafe.asp