CHAPTER 6
DISCUSSION
Advanced clinical competence through specialization is essential for promoting high standards of practice and research that will benefit both the public and profession (Carr & Shepherd, 1996). In India, even though sports physiotherapy specialization has been in existence since late nineties, there is lack of recognition of the specialization by the stake holders of sports industry. Lack of awareness has been assumed as the reason for the lack of recognition to sports physiotherapists. Hence this research aimed to analyse the utilization and awareness about sports physiotherapy among various stakeholders of the Indian sports system.

The results of this research showed that the awareness about sports physiotherapy is low among the athletes in India. The utilization of the services of sports physiotherapist is low for all the competencies except for rehabilitation of major injuries. The athletes almost entirely depend on the coaches for injury prevention, minor injury management and advice related to performance enhancement. The athletes undergo all the intervention strategies of injury prevention-physical conditioning, strengthening, endurance training etc as administered by their coaches. Even the minor injuries are managed by the athletes themselves on the advice of the coaches, teammates and senior players. They approach the doctor or physiotherapist only when their management does not provide any relief or when their injury aggravates. It was found during the course of research that majority of the athletes consult the doctor or physiotherapist only on the recommendation of their coaches without paying much importance to their specialization and expertise in the field. Low awareness about sports physiotherapy may be the reason for lack of recognition. Non utilization or non availability of sports physiotherapy services might be the reason for low awareness in athletes. In addition, there exists confusion between sports physiotherapist and sports physician among most of the athletes. Also, the athletes assume the physiotherapists working in a sport set up as a sports physiotherapist, rather than a qualified post graduate specialist in sports physiotherapy.

Even though the coaches are well aware about sports physiotherapy, there is a less utilization of sports physiotherapy services by them for their athletes. Non availability of sports physiotherapist was stated as reason for the low utilization by the coaches. Even most of the coaches assume the physiotherapists working in a sport set up as a sports physiotherapist, rather than a qualified post graduate specialist in sports
physiotherapy. It was found that the coach doubles as a physiotherapist, trainer, nutritionist and psychologist for the athlete. The coaches exert their influence over the athletes to the extent that they decide the severity of any injury that require medical attention or even decide the fitness of the athletes to return to play after the injury. It was found during the course of research that the coaches do not want to loosen their grip on their players and there is a deliberate intention to keep the players within their sphere of influence.

The non availability of physiotherapist was cited as a major reason by the coaches for the low utilization of sports physiotherapy. The sports medicine centres are located in ten out of twelve regional centres of SAI in the country. It was found that none of these centres have sports physiotherapists. The athletes of these cities and nearby places utilize the physiotherapy facilities in these centres and undergo treatment for their injuries. The players of other places do not have access to such facilities. They had to visit private clinics for specialized care at their own cost or visit the nearby government hospital. Treatment under a specialist physiotherapist in the private clinics is perceived expensive and only few players could afford it. Also, it was found that the players give priority to nutrition and purchase of sports equipments rather than treatment under a specialist. Taking the financial background of the athlete into consideration, the coaches refer them to the nearby government hospital for the treatment, overlooking the importance of specialized care.

The National Sports Federations (NSFs) are fully responsible and accountable for the management, direction, control, regulation, promotion and development of the sports disciplines. The utilization and recognition of sports physiotherapists can be analysed by the pattern of recruitment of physiotherapist by NSFs. This analysis has been done before and after 10.06.2011. The circular F. No 8-53/2010-SP-III dated 10.06.2011, issued by the Ministry of Youth Affairs and Sports (MYAS) on the partial modification of the norms of entitlement within the existing “Guidelines for Assistance to National Sports Federations” contains the upper ceiling salary of physiotherapist appointed by SAI based on the requirement of NSFs. The NSFs prepares a panel of coaches and supporting personnel including doctors, physiotherapists, psychologists, physiologists, scientific officers, masseurs etc. as a part of the Long Term Development Plan (LTDP) and submits to the Government once in four years. The funds are sanctioned to the NSFs based on the approval of
proposals in their LTDPs. The NSFs do not pay much importance in recruiting full
time physiotherapists for their teams. Even if they appoint one, no importance is given
for specialization and qualification. There is no transparent process in the appointment
of physiotherapist. The recruitment process is not advertised in the newspapers. At the
time of international tournaments, SAI deputes physiotherapists for the coaching
camps and tournaments from SAI centres or appoints physiotherapists based on the
recommendations of the NSFs. Before 10.06.2011, it was found that among the list of
physiotherapists engaged by the NSFs, only one is a sports physiotherapist. After
10.06.2011, there is an increase in the number of physiotherapists engaged by the
NSFs, but still non specialists occupy the list in large numbers. Lack of funds cannot
be the reason for not appointing a sports physiotherapist as MYAS has sanctioned an
upper ceiling of Rs 40000/- per month as salary for physiotherapists (Appendix L).
Non availability of sports physiotherapists may not be the reason as more number of
physiotherapists passes out every year. In spite of availability of many sports
physiotherapists in the country, engaging general physiotherapists for managing even
the elite athlete does not sound reasonable. Paying a very modest fee to a local general
physiotherapist, who has no experience of sports physiotherapy but who is recruited
on the basis of personal or family contact may be a cheap and easy way of appointing
a physiotherapist but it is unlikely to be in the best long term interests of the club or
the players (Waddington et al., 2001). These general physiotherapists cannot be
expected to provide specialized treatment that could instill confidence in the athletes
and coaches who could then feel the need of such sports physiotherapists in their
teams. A study by Beardmore et al (2005) on the evaluation of ‘Return to play’
practices in New Zealand found that organizational structure of support personnel and
their level of training and proficiency might be a factor influencing the adoption of
return to play criteria. The same point could well apply to the present study. The least
regard that the Indian sports system shows for the level of training and proficiency of
physiotherapist might be a factor influencing the awareness and utilization of sports
physiotherapists in India.

After the notification of the National Sports Policy 2001, the Government
notified revised Guidelines for Assistance to National Sports Federations (NSFs) in
August 2001 and issued subsequent guidelines from time to time, which are legally
binding on the Indian Olympic Association (IOA), and the National Sports
Federations (NSFs) if they are desirous of regulating and controlling sports in India, or using the name of India or representing India within or outside India, or availing themselves of various benefits and concessions, including financial benefits such as customs duty exemption or income tax exemption that are available to NSF (National sports development code, 2011). Although these bodies may be registered in different states under the Societies Registration Act or the Companies Act, their authority to function as NSF will be dependent on compliance with the government guidelines. Based on the recommendations, made by Shri T.S. Krishna Murthy committee, on the efficient management of coaching camps, selection of Athletes, etc., MYAS issued, vide letter No.F.49-3/2008-SP-II dated 1.09.2008, the procedure that has to be followed strictly. The national coach and assistant coaches are jointly selected by a Committee with president of the concerned NSF as its chairman, Director General (SAI), Executive Director (TEAMS), one ex-international player (preferably an Arjuna awardee or an international medal winner) to be nominated by the Government and a nominee of IOA as its member from a panel prepared by SAI. The national coach and assistant coaches are appointed by SAI after careful consideration of the name recommended by the Selection Committee. But the same transparent process was not followed in the appointment of physiotherapists. The support staffs like physiotherapists are selected and appointed by SAI based on the recommendations of the NSFs concerned (Appendix O). The MYAS which has sufficient control over the NSFs could prescribe the necessary qualifications and conditions even in the appointment of physiotherapists.

SAI, the apex body of sports administration, provides the necessary support to NSFs for identification, training and coaching of sportspersons, including provision of infrastructure, equipment and such other assistance as may be agreed to under the LTDPs. Further SAI is also responsible to release funds to NSFs against proposals approved by the government. For NSFs to be eligible for financial assistance and sponsorship, they must maintain their recognized status with the department of sports and should obtain the annual recognition on year-to-year basis. The government notifies guidelines from time to time to NSFs which are legally binding on them for their recognition and for availing various concessions or benefits from the government. The government which provides guidelines to the NSFs in appointing the coaches provides no such guidelines in appointing the physiotherapists. Even the
Government does not give importance in recruiting sports physiotherapists in their SAI centres. In the regional/ sub centers of SAI, none of the physiotherapists hold post graduate specialization in sports physiotherapy. For the recruitment of six physiotherapists for the commonwealth games, the minimum prescribed qualification was Bachelor of Physiotherapy (BPT). Moreover, information accessed through RTI act showed that in spite of many sports physiotherapists applying for the post, only one sports physiotherapist was selected.

The limited qualifications and experience of many general physiotherapists engaged or appointed by the NSFs and SAI are a matter of concern. Use of scientific means is crucial for an athlete to reach a level of high performance. Ziemainz and Gulbin (2002) supported this notion by defining talent identification as the “screening of children and using selected tests of physical, physiological, and skill attributes in order to identify those with potential for success in a designated sport.” The scientific means are not only essential for talent identification but also for injury prevention, injury management and fitness management. With the increasing demands placed on athletes to win medals for their country, it would seem reasonable to engage specialist physiotherapists in athlete development. The British Council in Delhi commissioned a consultancy project on behalf of the Government of India’s Ministry of Youth Affairs and Sports (MYAS) and SAI to examine proposals for large scale investment in sports medicine and sports science infrastructure. Three senior members of staff at Leeds Metropolitan University and an Emeritus Professor from Loughborough University made up an experienced team to evaluate the proposal. The team visited number of sites in the country and reported:

“What was even more disturbing was the lack of evidence for a true and effective engagement of science with sport....The tour of the laboratories, with two exceptions, revealed that, in general the equipment was too old for effective for effective service or simply irreparable and so unused...there is an urgent need to develop and adopt a blue-print for an ‘athlete-centred’ focus of the sports science support team...there are some signs that a culture of ring-fencing the domains of science and sport continues to exist i.e. ‘scientists in their labs’ and athletes in the field’... there is a need to update basic equipments in science and medicine but the need to sharpen the focus of the team is even more urgent.”(Appendix N)
Even in the fellowships provided by SAI or MYAS, sports physiotherapy did not find a place as a discipline. Recently, the MYAS has revised the existing ‘Scheme relating to Talent Search and Training’ to include fellowship programme, R & D projects and publication proposals for financial assistance. The revised scheme will focus on the academic and intellectual side of sports management to improve the expertise of sports scientists and sports medicine specialists. The Fellowship will be offered for advanced/specialized Master’s level courses/ specialized short duration courses and Doctoral programmes in the following nine disciplines. (i) Biomechanics (ii) Sports Nutrition (iii) Kinesiology (iv) Anthropometry (v) Exercise Physiology (vi) Sports Psychology (vii) General Theory & Method of Training (GTMT) (viii) Sports Medicine (ix) Anti-doping. Unfortunately sports physiotherapy did not find a place in the list.

The Ministry of Youth Affairs and Sports, Government of India has constituted an Expert Group on “Sports Science” to examine various aspects of Sports Sciences and Medicine including Sports Nutrition vide Order Nos.1 -9/2011/ID dated February 28, 2011 and March 17, 2011. The committee has been mandated to look at the gaps in the existing Sports Science set up in SAI as well as the requirements in the sports sector as a whole, to enhance performance of our sportspersons and support excellence in sports (as part of National Sports Policy) along with suggestion of measures to address them. In order to focus on high quality research, study and practice of sports science and medicine, while producing sports champions who will spearhead the Indian challenge on the world sporting stage, proposed to set up a National Institute of Sports Science and Medicine (NISSM) at the Jawahar Lal Nehru Stadium Complex, New Delhi. The NISSM will have seven Departments under the rubric of sports sciences namely, Physiology, Psychology, Nutrition, Biochemistry, Biomedical, Anthropometry; the Department of Sports Medicine will cater to the prevention and treatment of sports related injuries. Again physiotherapy is not explicitly mentioned. The committee, analyzing the existing staff strength and future requirements, failed to include physiotherapists in its analysis.

It is well established that there is a lack of initiative on the part of the government to involve experts or specialist sports physiotherapists in the process of development of athletes. Any initiative for efficient and effective utilization sports
physiotherapy should start from the government as they possess wide range of powers to control the NSFs.

**Recommendations**

In the light of our findings, we recommend the following for the optimal utilization of sports physiotherapists in India:

1. All the vacancies for sports Physiotherapists in SAI and NSFs should be publicly advertised in leading newspapers.
2. Possession of a specialist qualification in sports physiotherapy should be specified as a desirable qualification of candidates applying for all vacancies of SAI, NSFs and other sports medicine centres.
3. Government should emphasize the specialist qualification in sports physiotherapy as a mandatory requirement while recommending the list of physiotherapists for tournaments or a part of the LTDP by the NSFs.

**Limitations of the Study**

Even though every possible effort has been made to obtain a reliable information from the tier 1 and 2 subjects some amount of subjectivity do exist from their responses.