



ATHLETE IDENTITY AND COMMON BENEFITS AND BARRIERS TO SPORT PARTICIPATION AMONGST ADOLESCENT SLED HOCKEY PLAYERS

Jonathan Napolitano MD, FAAPMR^{1,2}; Daniela Iliescu MD²; Jessica Hoehn PhD³; Theresa Berner MOT, OTR/L, ATP⁴; Carlie Meyer S/OT, MS, ATC⁴; Kristen Jackson PhD²; Erika Kemp OTD, MS, OTR/L, BCP⁴

¹ Nationwide Children's Hospital, Division of Sports Medicine, ² The Ohio State University, College of Medicine, Department of Physical Medicine and Rehabilitation, ³ Nationwide Children's Hospital, Department of Psychology and Neuropsychology, ⁴ The Ohio State University, College of Medicine, Department of Health and Rehab Sciences

Background: The physical, psychological, and social benefits of sports participation in adolescents have been well reported in the able-bodied population. However, those with physical disabilities encounter many barriers to participating in sports, which limits access to these benefits. Additionally, due to their disabilities, these individuals are often not viewed as athletes by the general population and therefore may not identify as one themselves.

Purpose: Our study seeks to use qualitative research techniques to identify the themes influencing adolescents' participation in sled hockey and determine their identity as athletes.

Methods: Cross-sectional qualitative interview. Our IRB approved study recruited athletes at sled hockey practices and tournaments where interviews were moderated and transcribed. Transcriptions were coded according to common themes mapped in Figure 1.

Results: We surveyed 19 youth sled hockey players (range 10-24 years old, mean 15.3) with multiple physical disabilities, the most common diagnosis being spina bifida (14) (Table 1). Our qualitative analysis identified the most prevalent themes that influence participation in adaptive sports to be: social factors, intrapersonal factors, motivators to start sport, access, physical and mental health, and athletic identity (Figure 1).

Initial motivators to start involvement included encouragement from parents, role models, adapted sports organizations, healthcare providers or personal interest in the sport itself. Despite the perceived medical and financial barriers, support from teammates and funding assistance in purchasing equipment facilitated continued involvement.

Our population also reported many perceived benefits to continued participation in adaptive sports, each reporting "having fun" while playing a sport they "love". Other benefits were connecting with friends of similar disabilities and capabilities, who encourage them, serve as role models, and make them feel included. Furthermore, the mentorship the coaches provide, pushing the athletes to achieve, creates an atmosphere of competitiveness and a feeling of physical and mental wellbeing. Ultimately, this competitive environment allows for formation of an athletic identity, reported by 18 out of the 19 interviewees.

Conclusions: Despite encountering barriers to participating in a team sport that requires expensive equipment and travel and negotiating the limitations of physical disabilities requiring frequent medical procedures and time away from sport, the overpowering benefits of participation allow majority of our adolescent population to thrive and to identify as athletes. Among the main facilitators to continued involvement are mentorship and support from

coaches and parents, comradery and competition, all which lead to physical and mental wellbeing and feeling of inclusiveness and accomplishment.

Figure 1: Coding map illustrating the results of analysis: Themes and subthemes that influence participation in adaptive sports.

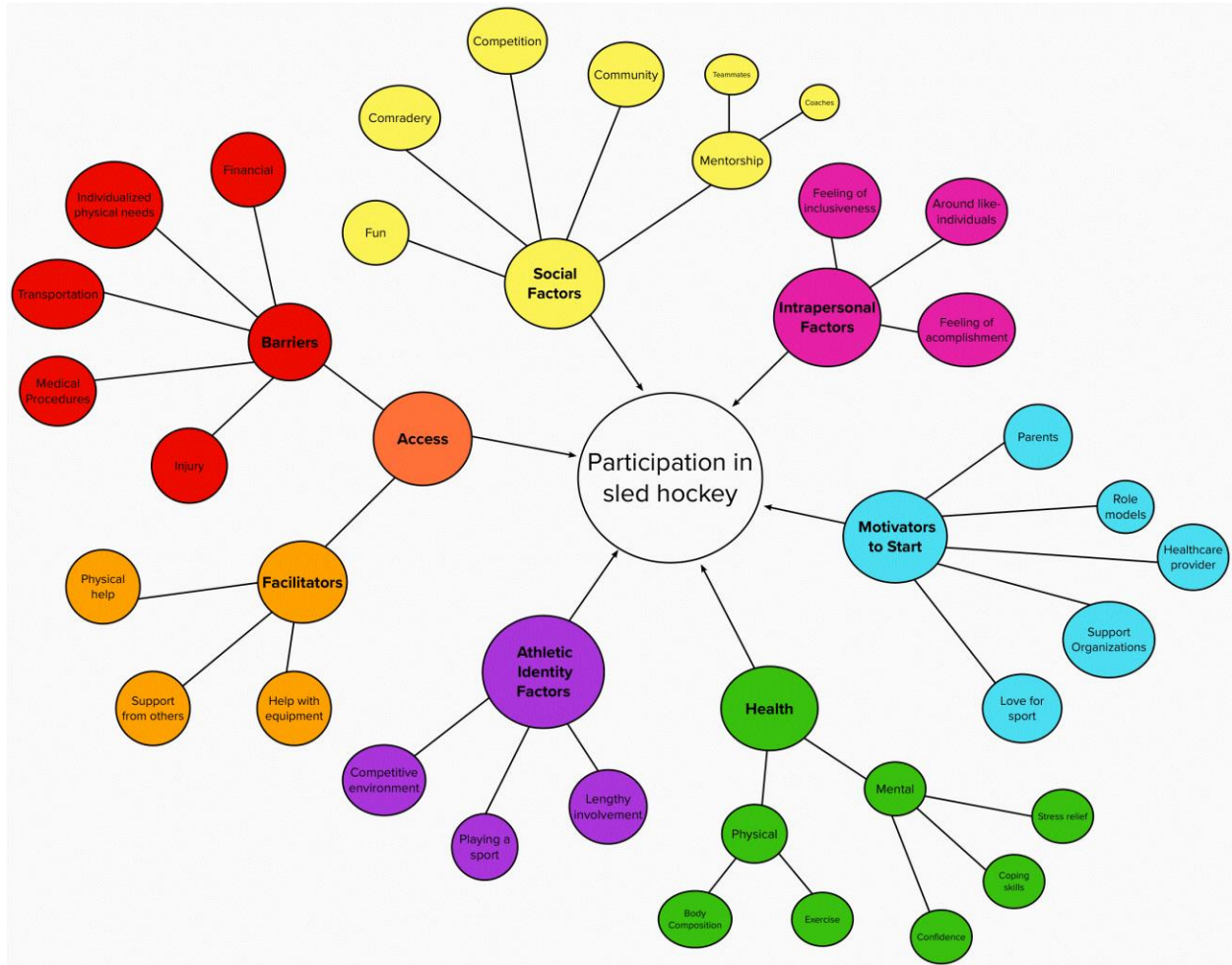


Table 1: Participant Characteristics

Age	Gender	Disability Diagnosis	Number of Years Playing Sled Hockey	Number of Sports Currently Involved In
23	M	spina bifida	17	2
11	F	spina bifida	2	2
10	M	spina bifida	1	2
10	F	spina bifida	1	1
12	M	spina bifida	7	2
24	M	spina bifida	2	1
16	M	transverse myelitis	7	3
14	F	spina bifida	6	1
14	M	spinal cord injury	3	2
15	M	spina bifida	9	1
18	M	spinal muscular atrophy	6	1
19	M	acute disseminated encephalomyelitis	6	3
17	M	spina bifida	6	2
21	F	spina bifida	3	1
12	M	spina bifida	7	2
16	M	spina bifida	4	4
13	M	spina bifida	2	2
14	F	hereditary spastic paraplegia	1	1
12	F	spina bifida	4	1
Mean			Mean	Mean
15.3 yo	6F/13M	14 spina bifida	5.2 years	1.8 sports