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Injured Athletes: Appraisal, Coping, Optimism, Rehabilitation Adherence, and Rehabilitation Engagement

A thesis presented in partial fulfilment of the requirements for the degree of

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i. Abstract

The relationship between optimism, appraisal of injuries, coping processes, engagement with the rehabilitation program, and injury rehabilitation adherence, in injured athletes has not been extensively examined. These factors have been examined extensively individually and some of the factors have been extensively investigated together, but these factors have not been examined in detail as a complete process (Albinson & Petrie, 2003; Chang, 2002; Gustafsson & Skoog, 2012; Walker, Thatcher, & Lavallee, 2007).

A group of 23 injured athletes participated in this research. Data collection was undertaken across a period of 8 weeks, with questionnaires being administered online through links sent out via email. The questionnaires were examining demographics, optimism, cognitive appraisal, coping, rehabilitation adherence, and rehabilitation engagement. The optimism, cognitive appraisal, and coping questionnaires were completed prior to or as soon as possible after the athletes first treatment session. The rehabilitation adherence and rehabilitation engagement questionnaires were completed at the end of each week for a period of eight weeks after the initial questionnaires were completed.

Psychometric evaluations found an acceptable level of internal consistency for the measures. Correlation analysis found relationships between rehabilitation adherence and rehabilitation engagement. The initial status and rate of change for rehabilitation adherence and engagement were examined. Suggesting that; injured athletes that are high in rehabilitation adherence at the beginning of their rehabilitation treatment become less adherent at a slower rate than injured
athletes who are initially low in adherence, athletes who are initially high in rehabilitation engagement become less engaged at a slower rate than injured athletes who initially are low in rehabilitation engagement, and that injured athletes who are becoming less adherent will become less engaged at a faster rate as time passes from when the injured athlete suffered their injury. Limitations and implications for future research are discussed.
ii. Acknowledgements

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This project has been reviewed and approved by the Massey University Human Ethics Committee: Northern 14/018.
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