Granito et al. developed a performance enhancement group (PEG) for injured athletes with a two-fold purpose: (a) to provide social support (informational and emotional) “by encouraging dialogues with peers in similar situations” and (b) to enhance and “accelerate the rehabilitation process” by introducing injured athletes to performance enhancement skills. To accomplish these goals, Granito et al. organized a group of injured athletes, facilitated by a sport psychology intern and an athletic training student, which met on a weekly basis throughout the course of an academic semester. During these meetings, athletes were given an opportunity to share their injury experiences in addition to being introduced to performance enhancement skills. Despite evidence supporting the use of social support and performance enhancement skills during rehabilitation, recent literature has not expanded the work conducted by Granito et al. The purpose of this two-part report is to present guidelines and suggestions pertaining to the preparation, development, implementation, and facilitation of a PEG for injured college athletes. Part 1 will address the preparation and development phases, and Part 2 will focus on the implementation and facilitation phases.

**Preparation**

PEGs have the potential to provide a unique benefit to injured athletes. Prior to initiating any discussion about a PEG, the program coordinator (PC), ideally a member of the university’s sports medicine team (e.g., team physician, athletic trainer) or a member of the university’s sport psychology faculty/staff, needs to ensure the institution can meet most, if not all, of the following criteria: (a) appropriate space for PEG meetings at little to no cost, (b) available funds to cover the cost of supplies and materials used in the PEG, and (c) a large enough athletic program to ensure that an adequate number of injured athletes (8-10) can participate in the group during any given time period. PCs need to mobilize important stakeholders within the institution, because a coordinated effort is needed to successfully develop, implement, and facilitate a PEG. Stakeholders may include coaches, athletic administrators, the university’s faculty athletic representative, and/or the university’s counseling or health center staff. Prior to contacting stakeholders, PCs should meet with the institution’s Compliance Office to ensure that the services...
provided by a PEG are in compliance with the rules and regulations of the National Collegiate Athletic Association (NCAA). A prospective PC should also meet with the institution’s athletic and sports medicine administrators to briefly explain the rationale for creation of the group.

The primary purpose of an initial stakeholders meeting is to educate them about PEGs and the potential benefits for injured athletes. A key point is that psychological aspects of a sport injury should not be treated separately from its physical aspects. The meeting provides an opportunity to dispel any preconceived notions, stereotypes, or misconceptions about sport psychology and its utility for facilitation of injury rehabilitation. Stakeholders should be informed about the various performance enhancement skills taught within the PEG and the specific benefits injured athletes could derive from them upon return to sport participation and throughout their lives. The PC should provide stakeholders with a packet of printed information prior to the meeting, which will give them time to review the information and formulate any questions they may have about the initiative. Content could include the following: (a) a brief description of a PEG, (b) the goals of a PEG, (c) the services provided to a PEG, (d) advantages of using a PEG, and (e) a brief summary of research findings linking social support and performance enhancement skills to injury recovery.

The meeting agenda should include discussion of issues related to confidentiality, liability insurance coverage, and budgetary requirements. All involved parties need to understand that confidentiality boundaries will exist between the PC, PEG facilitators, and PEG group members. PCs should be covered by the institution’s liability insurance, but all practitioners should confirm that appropriate coverage exists. Budgetary requirements will primarily relate to printing and audiovisual resources (e.g., DVDs). If the PC is not employed by the institution, he or she would be entitled to compensation for the delivery of professional services. If a university’s athletic department is unable or unwilling to fund a PEG program, a prospective PC could apply for grant funding. Prior to development of a compensation agreement, a prospective PC should become familiar with institutional policies pertaining to payment for services that are not within the scope of his or her job description and terms of employment outside of contractual responsibilities, as well as tax related issues. Graduate students may receive academic credit for work as PEG facilitators, which would not involve compensation. Assuming that all stakeholder questions or concerns are adequately addressed and permission is granted to initiate a PEG program, a memorandum of understanding should be drafted and signed.

**Development**

Typically, PEGs are formed and maintained for the duration of an academic semester, but procedures can vary. A needs assessment should be conducted to determine the performance enhancement skills that would be most beneficial for a given PEG. A checklist of mental skills can be provided to the injured athletes for ranking in order of perceived importance during the injury rehabilitation process (Table 1). The educational content presented during the first few weeks should focus on an introduction to performance enhancement skills and the value of social support. Interactive activities can help to reduce resistance among group members, foster cohesion, build group identity, and facilitate the development of social support. Subsequent educational content could focus on reframing the role of each individual as an athletic team member while injured. This is especially important, because an athlete’s self-concept is deeply connected to his or her athletic identity.

Goal setting for recovery of athletic performance capabilities could be another topic discussed within the PEG. Setting goals can motivate injured athletes who crave challenges that would otherwise be presented by practice sessions and games. For goal setting to be effective, consistent communication must exist among

<table>
<thead>
<tr>
<th>Table 1. Checklist of Mental Skills</th>
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<tr>
<td>Rank the following skills in order of importance (1 MOST important to 9 LEAST important)</td>
</tr>
<tr>
<td>_____ Attitude</td>
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<tr>
<td>_____ Motivation</td>
</tr>
<tr>
<td>_____ Goals and commitment</td>
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<tr>
<td>_____ People skills</td>
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<tr>
<td>_____ Self-talk</td>
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<tr>
<td>_____ Mental imagery</td>
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<td>_____ Managing anxiety</td>
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<td>_____ Managing emotions</td>
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<td>_____ Concentration</td>
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members of the treatment team (i.e., athlete, athletic trainer, physician, sport psychology consultant, and PEG facilitator).

Dealing with the stresses of being a student athlete may also be addressed by PEG educational content. Disruption of a student athlete’s regular routine is likely to increase perceived stress. Stress management and coping strategies learned as a result of participation in a PEG may be utilized during rehabilitation and after full recovery. Teaching athletes how to manage the various emotions experienced during rehabilitation is another area that might be addressed by PEG educational content. The PEG provides a safe environment for injured athletes to disclose feelings about their injury experiences that others may also have experienced. Injured athletes often fear reinjury or worry that they won’t be able to perform at a preinjury level. Many injured athletes experience anxiety related to return to sport, which may be reduced by the use of imagery in injured athletes’ regular routine. Research evidence supports the use of imagery to improve the rehabilitation experience and rate of recovery.

Educational content presented during the latter stage of a PEG program should be focused on synthesis of previously developed knowledge and skills, regardless of sport participation status or continuation of rehabilitation for individual members of the group. For example, athletes who have fully recovered need to transition from the social support provided by the PEG to that provided by athletic teammates, whereas athletes who are still engaged in the rehabilitation process may need to transition to reliance on the support provided by a sport psychology consultant and/or athletic trainer.

PCs should be flexible in the progression through the educational content of a PEG, because individuals within the group may experience plateaus in progression through the rehabilitation process. Further, PCs are strongly encouraged to engage PEG members in activities that provide opportunities to practice the mental skills addressed by educational content. The second part of this report will focus on implementation of an effective PEG program.

References


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