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S121

Netball injuries in Australia: A review of insurance data from 2011 – 2019

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Background: Netball has maintained a reputation as a high-risk sport for injuries. Understanding netball injuries and how these may change over time can help evaluate existing injury prevention strategies, while providing information to support future efforts. This study provides a longitudinal evaluation of Australian netball injuries via a national register of insurance claims.

Methods: Insurance records for netball player insurance claims in Australia from 2011 to 2019 were obtained. The age, date, activity (i.e. match/training), anatomical location, surface/weather conditions, and the quarter of injury were extracted. Anatomical location and type of injury were coded using OSICS-10, and reported as frequencies and proportions of total injuries. The relative odds (RO) (\pm 95% confidence intervals) of claims being made within descriptive categories (i.e. age, quarter, court setting, court type, activity type and weather) across anatomical injury locations and types were calculated.

Results: 12,205 injuries were identified. The majority of claims were for knee (n=5,006; 41.0%), ankle (n=3,875; 31.7%) and wrist/hand (n=1,127; 9.2%) injuries. Joint injuries (n=7,017; 57.5%) and fractures (n=1,788; 14.6%) were the most common injury types. For anatomical location and type together, knee and ankle joint injuries were the most common (n=4,027; 33.2% and n=2,618; 21.6%, respectively), followed by wrist fractures (n=830; 6.8%) and ankle tendon (n=750; 6.2%) injuries. The proportion of injuries across anatomical location and type remained stable over time. Knee and joint injuries had a higher probability of coming from 15-17 (RO=1.043 [1.018,1.068] and RO=1.036 [1.018,1.054], respectively) and 18-24 (RO=1.034 [1.010,1.059] and RO=1.052 [1.034,1.070], respectively) year age groups. Lower leg (e.g. calf) injuries had a higher probability of occurring in the 35-44 year age group (RO=1.453 [1.315,1.601]). Head injuries had a higher probability of a concrete court description (RO=1.135 [1.013,1.266]) and coming from the 10-14 year age group (RO=1.136 [1.008,1.274]).

Discussion: The prominence of knee and ankle joint injuries suggests national netball injury prevention strategies should remain focused on this area. Certain injuries were more likely to include specific descriptors (i.e. knee joint injuries in 15-24 year olds; lower leg injuries in 35-44 year olds; head injuries in 10-14 year olds and on concrete courts). Tailoring injury prevention strategies towards these may be an impactful way to reduce the nation-wide netball injury burden.

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Leveraging physical activity to engage men in mental health promotion: Informing future directions for lifestyle interventions

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Background: Men's mental health promotion presents unique challenges and opportunities that demand novel approaches to prevention, treatment, and management. Community-based lifestyle interventions targeted at healthy behaviour change (e.g., physical activity) have been identified as a promising avenue to engage men in mental health promotion as these settings may reduce barriers to help-seeking. However, research is needed to identify strategies for designing and delivering relevant intervention content that supports men's mental health. The aim of this study was to develop intervention content and distil recommendations for the development of gender-tailored interventions that engage men in mental health promotion.

Methods: This study included an iterative multi-phase participatory design process with Australian men (18+ years) and stakeholders with frontline experience working in men's health. In Phase 1, five focus groups (n=43 men; 16 stakeholders) were conducted as part of a pre-design consultation process to examine men's experiences and perspectives of mental health promotion, and the role that physical activity may play. In Phase 2, a sub-sample of participants (n=4 men; 2 stakeholders) attended a generative design workshop where ideas, insights and concepts identified during Phase 1 were further explored to inform intervention design and development. In Phase 3, intervention content and activities were developed and a sample of men (n=21) who registered to participate in a lifestyle intervention were invited to provide feedback on the prototypes during a one-on-one semi-structured telephone interview.

Results: Inductive thematic analysis identified two overarching themes and related subthemes from the participatory design process; (1) Communicating mental health and well-being, revealing acceptable language and approaches for discussing mental health with men including the use of colloquial masculine language, analogy and association, and strength-based calls-to-action, and (2) Intervention content and activities, detailing participant generated intervention content and activities designed to create buy-in and foster spaces for open frank discussions, target multiple behaviours (e.g., physical activity and mental health) through action-oriented approaches, and include opportunities for personalisation and autonomy.

Discussion: As emergent programs and services are developed to augment traditional clinical services, it is imperative that evidence-based strategies are utilised that engage and retain men in mental health promotion. Findings provide vital clues for how men's interest in sport and physical activity can be leveraged to directly and indirectly engage men in mental health promotion. These findings have direct relevance to community programming and may be embedded within existing interventions or used to inform new mental health promotion programs for men.

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