




Sports and Exercise Therapists – working across the physical activity spectrum

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There is a growing recognition of the impact of musculoskeletal (MSK) conditions on people, employers, the health service and the economy. MSK conditions are now recognised as one of six major health disorders contributing to the burden of disease in England.¹ Interestingly, the Government in England is looking to resource MSK provisions via leisure and community settings, with an initiative using MSK Hubs.² It is an innovative idea but raises questions such as: Where will the workforce come from, and which practitioners have the expertise to deal with the prevention, treatment and rehabilitation of MSK conditions within a multidisciplinary team? With the mounting importance of high-quality MSK care to ease the burden on society, keeping as many people as possible physically active, Sports and Exercise Therapists can provide the solution.

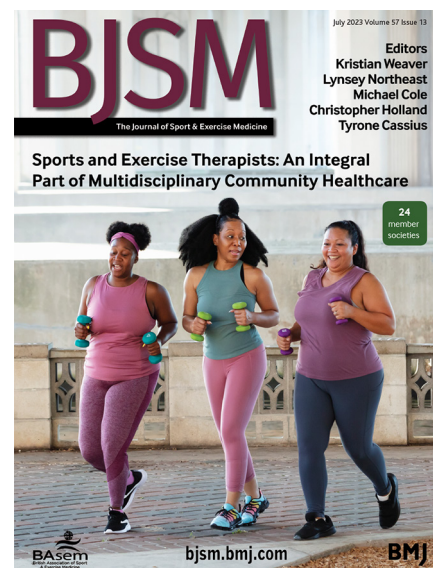
In this special edition, we highlight MSK research that Members of The Society of Sports Therapists (The SST) may face with their patients, within their local communities or with sports teams with whom they work. This may be through supporting patients by improving long-term prognosis and self-management strategies of injuries (*see page 884*), and consideration of biomechanical interventions that may alter joint loading (*see page 872*). Sport and Exercise Therapist's understanding continues to develop regarding the role of technology within knowledge translation (*see page 833*), the promotion of physical activity during a global pandemic (*see page 877*), and with ongoing comprehension of the longitudinal health and injury surveillance studies within sport (*see page 836*). Sports and Exercise Therapists must be versatile in their approach

maintaining up-to-date evidence-informed practice.

Since its formation in 1990, The SST has demonstrated continual development of a workforce that tackles MSK conditions across the physical activity spectrum. This can be evidenced through the ongoing collaborations and employment opportunities with the Ministry of Defence, Private Healthcare providers and National Health Service Trusts. Such abilities and skills to work within these environments to ensure optimum MSK care are underpinned by the five pillars of competencies: Prevention of Injury; Recognition and Evaluation of Injury; Management, Treatment and Referral; Rehabilitation; and Education and Professional Practice Issues.

Active collaborations with organisations, such as the Arthritis and Musculoskeletal Alliance and the Community Rehabilitation Alliance, have also supported the development and improvement of MSK therapy and fitness-related services. Through our conversations, and considering existing research, it is apparent that there is also a need to address health inequalities for marginalised groups across the physical activity spectrum, and work towards equitable access to, and outcomes from, multidisciplinary MSK services. With an increasing membership and collaborations with 32 institutions running undergraduate and/or master's degree courses, it is evident that The SST has a clear role in bridging the gap. Considering the current landscape, The SST has recently introduced a national mentorship scheme and an advisory group. The national mentorship scheme is specifically aimed at improving and supporting diversity within the profession. The pioneering Network for Engagement in Equity, Diversity and Social-Structural Strategy group aims to educate and promote social justice and equity within The SST, and across its membership and stakeholders.

As the recognition for the skills and competencies of Sports and Exercise Therapists continues to grow within wider healthcare settings, and while MSK health issues continue to increase, The SST will



undoubtedly see more opportunities to support and service the wider population both independently and as part of a wider multidisciplinary team.

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