



Leadership in Health Services

Constructing professional and organisational fields: Lessons learned from the Australia Sports Medicine Federation (ASMF), also known as SMA
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Constructing professional and organisational fields

Lessons learned from the Australia Sports Medicine Federation (ASMF), also known as SMA

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Professional
and
organisational
fields

111

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Abstract

Purpose – The purpose of this paper is to fill an apparent gap in the literature addressing issues of leadership and change – the development and activities of constructing and leading sports sciences and medicine professions, and similarly, the construction and leadership of multidisciplinary/inter-disciplinary organisations that practice sports sciences and medicine.

Design/methodology/approach – This study incorporated explorations through conducting both interviews and survey questionnaires with members of Sports Medicine Australia (SMA). The interviews (qualitative) were semi-structured and asked questions addressing what changed, why change and how change was implemented.

Findings – The health sciences and medicine professions moving to specialised sports sciences and medicine disciplines and SMA, evolved through forces driving the need for change (legitimacy, resource dependency, positioning and core competencies).

Practical implications – The knowledge developed from understanding activities of change that traditional professions conducted to become specialised Disciplines and parallel changes in a single Discipline organisation evolving to an umbrella organisation (SMA), comprised a membership of specialised Disciplines, can act as a catalyst for inquiry by other professional and organisational groups.

Originality/value – The findings of this study contributes to the literature investigating change in professional and organisations fields. More specifically, this study promotes inquiry into leadership practices of sports sciences and medicine, as contributors to the field of health services.

Keywords Change, Leadership, Organisational fields, Professional fields, SMA, Sports sciences

Paper type Viewpoint

Sports sciences and medicine has a connection to health services through our knowledge that many health service practices promote clinical activities of providing sports sciences and medicine services. The current literature published in accredited journals on sports sciences and medicine seems to focus on clinical and applied research. Therefore, the purpose of exploring this issue is to fill an apparent gap in the literature addressing leadership and change – the development and activities of constructing and leading sports sciences and medicine professions, and similarly, the construction and leadership of multidisciplinary/inter-disciplinary organisations that practice sports sciences and medicine activities.

It has been argued that to understand the developmental changes in the field of sports medicine we need to investigate changes in sport, changes in the structures of sports and



changes in the structures of medical practices in sports (Waddington, 1996). However, this approach neglects the need to study changes and leadership in the development of sports medicine Professions/Disciplines and changes in sports medicine organisations.

The literature in sports medicine has been mainly confined to research work involving advancements in theoretical and clinical developments of science and medicine that are of interest to researchers and practitioners in the field. Recent literature in sports medicine has demonstrated multidisciplinary clinical approaches to treating injured athletes (Medvecky *et al.*, 2007). Changes in the emerging directions of sports medicine have been reported (Whitehead, 2002) and claim that networks and alliances of scientists and clinicians will enhance the clinical services of sports medicine. The change in organisational paradigms from independent providers to teams of providers will result in partnerships to address the prevention, treatment and management aspects of sports medicine (Miller *et al.*, 1999). The American College of Sports Medicine (ACSM) report that they have effectively developed an organisation that illustrates interactive activities among diverse Disciplines constituting their membership of sports medicine and exercise science (Whitehead, 2002). The interactive activities are in the form of multidisciplinary conferences, networking and research work and incorporating contributions from multiple disciplines. "ACSM as a science, but without medicine and other clinical and health practice is a diminished ACSM" (Whitehead, 2002, p. 4).

A Sports Medicine Australia (SMA) publication describes two main changes in the development of sports medicine in Australia (Vamplew, 1989). First, sports medicine in Australia has evolved through actions of Australians participating in sports and the practices of sports medicine clinics treating athletes. Second, the historical growth and development of the Australian Sports Medicine Federation (ASMF) may be observed through descriptions of the structures of membership, organisational designs, communications and community education practices. The historical growth of Australians participating in sports has evolved from participation in recreational activities to mass participation in organised sports and achievements of excellence in sporting events on the international stage. Sports-related injuries that accompanied the increase in sports participation were addressed through the development of sports medicine clinics that provided medical leadership and management to sports participants. The current profile of the ASMF, available for public knowledge, illustrates a membership that has evolved from a single Discipline of medical dominance to a multidisciplinary approach, with representation from various health sciences and medicine professions. The ASMF profile also illustrates that the organisation has evolved to include multidisciplinary approaches, with expanded inter-disciplinary activities of networking and sharing of professional knowledge. However, there is limited information addressing historical activities, characteristics and processes of change with respect to the development of Discipline Groups in the ASMF. Furthermore, there is a lack of information concerning historical activities, characteristics and processes of change that lead the ASMF to multidisciplinary and inter-disciplinary approaches.

Sports medicine is difficult to define because it is not a single discipline specialty, but a field that is a collection of medical and allied health practitioners, researchers and educators from a variety of Disciplines. Sports medicine organisations such as the Australian Sports Medicine Federation (ASMF, also known as SMA) and ACSM

exist as membership associations, with multiple Disciplines within their membership. The ASMF portrays characteristics of an organisation, through mission statements that indicate it is a multidisciplinary organisation with inter-disciplinary approaches in terms of leadership, membership and professional activities.

During the years of 2004-2009, the author conducted a comprehensive research study (PhD dissertation) which involved conducting interviews and administering survey questionnaires with members of SMA. The interviews (qualitative) were semi-structured and asked questions addressing what changed, why change and how change was implemented. The interview data were analysed using sequential methods of open coding, ocular scanning, axial coding and selective coding. The quantitative investigations of constructing survey questionnaires were developed from themes and sub-themes of the analysed interview data. The survey questionnaires were administered to the members of the SMA. The quantitative data were analysed using descriptive statistical analysis.

A brief note of the dissertation findings are as follows: the health sciences and medicine professions moved to specialised sports sciences and medicine Disciplines, and the SMA evolved from a single dominant Discipline (Medical) to a multi-disciplinary/inter-disciplinary approach. Both the Disciplines and SMA acted through forces driving the need for change (legitimacy, resource dependency, positioning and core competencies). The processes of change included transformation, shift, shifting logics and strategic change. The change in the health sciences and medicine professions was directed by a small group of interested members and supported by the leadership of their respective parent bodies and the SMA. The changes in the SMA were orchestrated by SMA – members, senior staff and the Board.

The knowledge developed from understanding activities of change [...] traditional profession's initiatives to become specialised Disciplines and parallel changes in a single Discipline organisation evolving to an umbrella organisation (SMA), comprised a membership of specialised Disciplines, can act as a catalyst for inquiry by other professional and organisational groups. The research study contributes to the literature investigating change in professional and organisations fields. More specifically, the study works to promote inquiry into leadership practices of sports sciences and medicine, as contributions to the fields of health services.

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Further reading

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Gurney, R. (2015), "Constructing professional and organisational fields: lessons learned from the Australia Sports Medicine Federation (ASMF), also known as Sports Medicine Australia (SMA)", *Navigating for Success*, Edmonton (Publication in progress).

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