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Australian Army recruit training course length and recruit injury rates

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A photograph of Australian Army recruits in camouflage uniforms and helmets, marching in a desert environment. The image is overlaid with a semi-transparent yellow filter. The text is centered over the image.

Australian Army recruit training course length and recruit injury rates

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Aims and Hypothesis

- The longer the training period, the greater the risk of injury?

Aims

- Investigate the influence of lengthening training courses on injury rates
 - Profile injuries that occur.

Participants

- Participants:
 - Australian Regular Army recruits attending Basic Recruit training at Kapooka
 - Recruits were randomly selected for each course

Course	Number of Platoons	Number of Recruits	Male Recruits	Female Recruits
ASC	2	73	56	17
ARC	4	194	152	42
Total	6	267	208	59

Methods

- Data recorded during two different Army recruit training courses over 1 year period (2013)

ARC (80 d) / ASC (100 d)



- Injury Prevalence

Number of reported injuries / number of personnel completing respective course x 100

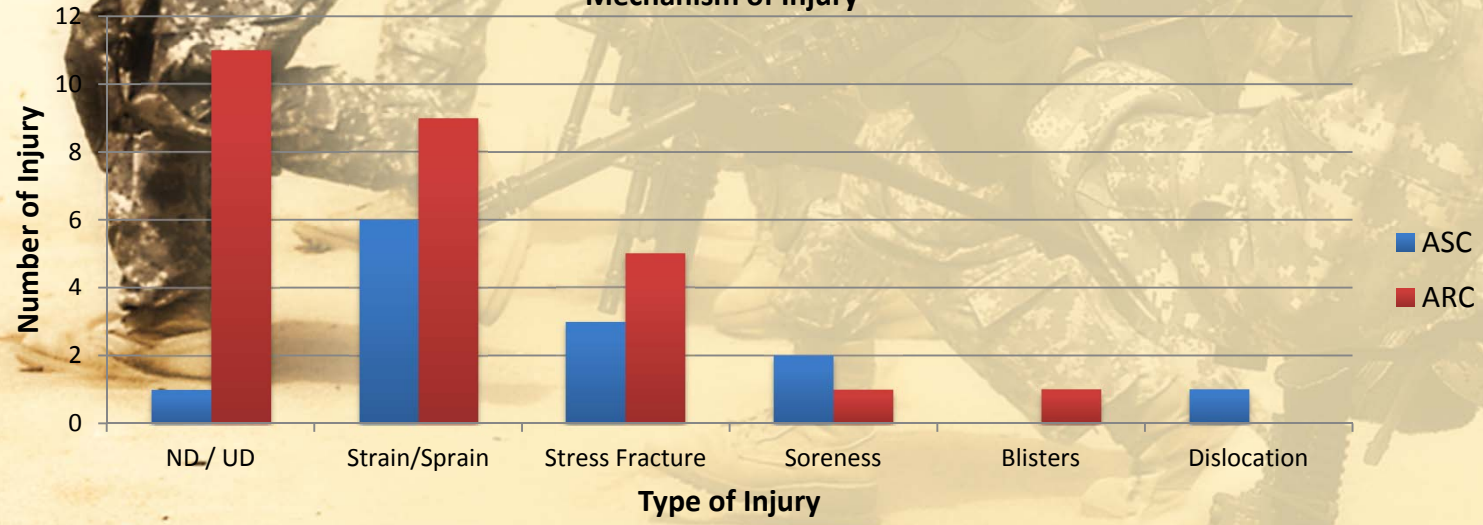
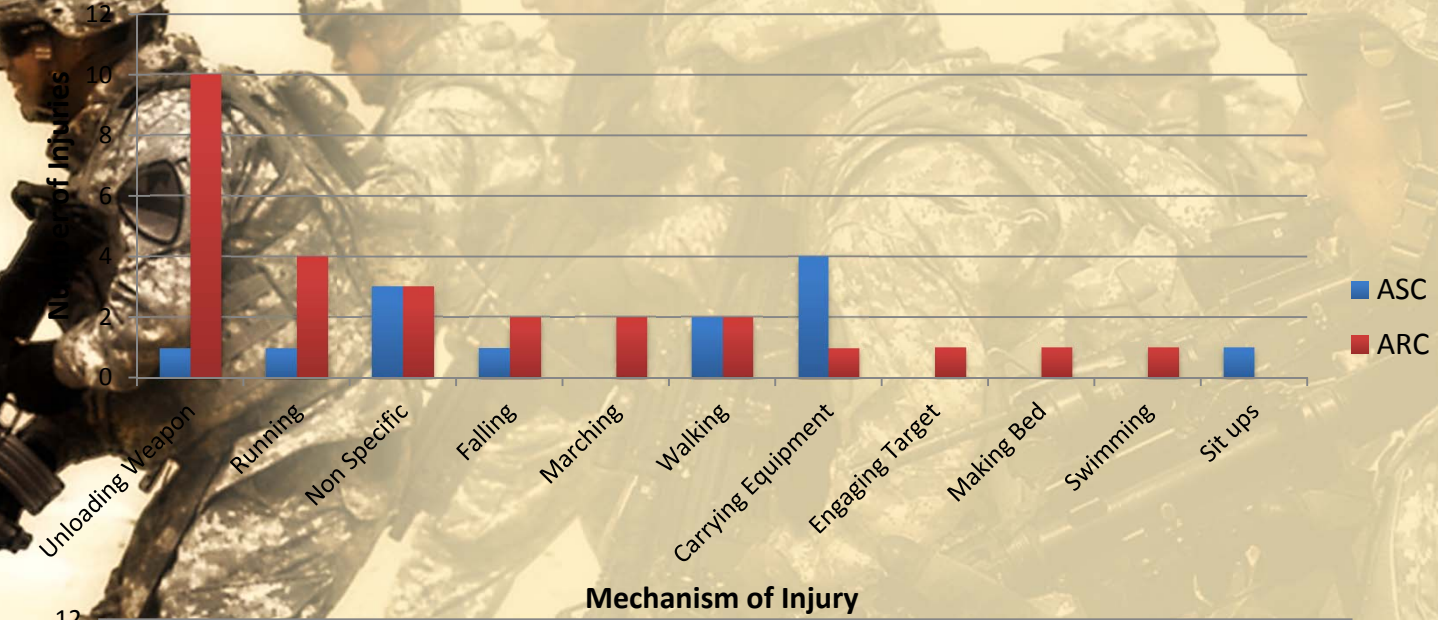
- Injury Incidence

Number of injuries / number of recruits completing the respective course / course length in days

Results

- ASC
 - 73 recruits, nil excluded
 - 13 recruits injured (17.8%)
 - 38.5% females
- ARC:
 - 194 recruits, 23 excluded
 - 27 recruits injured (13.9%)
 - 35% females
- Injury prevalence:
 - ASC: 17.8 per cent
 - ARC: 13.9 per cent
- Injury incidence:
 - ASC: 17.8 / 100 soldiers / 100 days
 - ARC: 17.4 / 100 soldiers / 100 days

Injury Profile



Anatomical sites of injury

- Collectively the highest anatomical injury sites:
 - Ankle/foot: 20 per cent (n=8)
 - Back/torso: 12.5 per cent (n=5)
 - Lower leg: 12.5 per cent (n=5).
- NSC:
 - Back/torso: 30.7 per cent
 - Ankle/foot 15.4 per cent
 - Shoulder 15.4 per cent
- ARC:
 - Ankle/foot 22.2 per cent
 - Lower leg 14.8 per cent



Discussion

- ASC had notably higher prevalence of injuries compared to ARC
- However when looking at cohort size and exposure to training, both courses had similar incidence rates

In contrast to previous studies, the current study revealed much lower prevalence and incidence rates

- Havenetidis et al (2011):

- 233 male Greek army recruits, 7 week course
- 28.3% prevalence

- Connor et al (2000):

- 480 Marine Corp officers, 6 week course
- 60.7% incidence
- 3.9 injuries per 1,000 person hours of physical training

Discussion

- Most common anatomical sites of injuries:
 - Current study:
 - **Sprains and strains**
 - **Stress fractures**
 - These injury types were also found to be the most common type in studies conducted by Havenetidis et al and O'Connor et al.

Conclusion / Take Home Message

- While the ASC had a higher prevalence of injury when injuries took into account exposure, incidence rates were virtually identical
- When considering the ASC against the ARC recruits are no more likely to be injured on one course over the other
- **When investigating injuries based on time periods, exposure to the risk needs to be taken into account**

References

- Caine, D., Caine, C., & Maffulli, N. (2006). Incidence and distribution of paediatric sport-related injuries. *Clinical Journal of Sport Medicine*, 16(6), 500.
- White, C. P., Harries, M., & Williams, C. (Eds.). (2005). *ABC of sports and exercise medicine*: BMJ Books
- Turnock, B. J. (2009). *Public health: What it is and how it works*: Jones & Bartlett Learning.
- Pope, K., Herbert, R., Kirwan, J. D., & Graham, B. J. (1999). Predicting Attrition in Basic Military Training. *Mil Med*, 164(10), 710-714.
- Rose, R.A., Alsopp, A. Stress fractures in Royal Marines Recruits. *Journal of Military Medicine*. 2002;167(7):560-5.
- Australia Co. *Fitness in the ADF 2013* [cited 2013 10 October]. Available from: <http://www.defencejobs.gov.au/fitness/>.
- Smith S. *Army Basic Training PFT: Military Advantage*; 2013 [cited 2013 10 October]. Available from: <http://www.military.com/military-fitness/army-fitness-requirements/army-basic-training-pft>.
- Prigg SK, Jones DD, Kolonel LN, Warfe P, Colgrave N. Developing injury prevention strategies for the Australian Defence Force. *Journal of Military and Veterans' Health*. 2000;19(3).
- Knapik JJ, Darakjy S, Hauret KG, Canada S, Marin R, Jones BH. Ambulatory Physical Activity during United States Army Basic Combat Training. *International Journal of Sports Medicine*. 2007;28:106-15.
- Trank TV, Ryman DH, Minagawa RY, Trone DW, Shaffer RA. Running Mileage, movement mileage and fitness in male US Navy recruits. *Journal of the American College of Sports Medicine*. 2000:1033-8.
- Milgrom C, Giladi M, Stein M, Kashtan H, Margulies JY, Chisin R, et al. Stress fracture in Military Recruits. *Journal of Bone and Joint Surgery*. 1985.
- Sheehan KM, Murphy MM, Reynolds KR, Creedon JF, White J, Kazel M. The Response of a bone resorption marker to Marine Recruit Training. *Journal of Military Medicine*. 2003;168(10):797-801