CORRESPONDENCE

THE BENEFITS OF AMATEUR BOXING – A RESPONSE

From: B. MAYDEW
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To the Editor,

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As a Physical Educationist I cannot allow Dr. Blonstein's annotation on 'The Benefits of Amateur Boxing' (BJSM Vol. 8 No. 4) to pass without comment, and whilst having every respect for what Dr. Blonstein is saying, it seems that there is much more to be said on this subject.

Aggression, as Dr. Blonstein so rightly points out, is inherent in us all; though in varying stages of latency. I disagree, however, with his statement that "the ideal way of getting rid of aggression in boys is by teaching them boxing". Surely many other individual combat sports can, and do, serve the same purpose, Judo, Kendo and Wrestling are but three examples. I am not saying that any of these sports are better in developing a boy's character than three rounds of boxing, what I am saying is that their potential in this respect is equal to that of boxing. The pre- and post-fight rituals of Judo and Kendo etc. are, it seems, especially significant, and parallel Dr. Blonstein's virtuous handshake at the end of a contest. Serving the same purpose, though on a different plane, the team game of rugby must rank high on any list of aggression-cathartic sports.

I am surprised that Dr. Blonstein makes no mention of the basic process of maturation when accounting for the increase in height and weight achieved by a group of boys. Although no ages were quoted for these boys, Tanner (1964), amongst many others, clearly indicates the rates of growth (i.e. height and weight) due to maturation.

Dr. Blonstein's statement that "young boxers do not become delinquents, roam the streets or beat up other boys... they are too well trained and disciplined mentally and physically to rebel against law and order," is far too dogmatic and, I feel, very naive. There have been several incidents reported in the National Press in recent years of young boxers being brought before the courts on charges of assault. I would accept the premise that 'young boys who are not delinquents will not necessarily become so as a direct result of learning the art of boxing'. But, having been involved with a large youth club (before moving to Orkney) I could not help noticing the type of boy who was attracted to boxing when we first offered it as an activity at the youth club (under expert coaching). If boxing attracts a large proportion of delinquents, or potential delinquents (as I believe it does), then the non-delinquent boys who are

also attracted to the sport must inevitably come under their influence; though what effect this subsequently has upon the latter group is open to conjecture. I have no research findings to support my premise, it is merely a matter of opinion, which I believe is held by a great many people.

That some (not "many") "boys derive psychological benefits from boxing" cannot be denied, but is that not also true of all other sporting activities? The statement that such boys "develop confidence and become more extrovert" presupposes that extroversion is both good and desirable – this is not necessarily so; though I realise that at this point one should begin to consider the desirability of varying degrees of extroversion (something which is beyond the scope of this paper).

Boxing is, of course, very well covered medically, but far from it being a virtue of the sport, it is a necessity. When a boy plays soccer, cricket, volleyball etc., or participates in track and field athletics he does not expect to get hurt or injured. The chances of a young boxer being hurt or injured (despite what Dr. Blonstein says) must surely be greater. Naturally boys do get injured whilst participating in other sports, but I suggest injury is not in the nature of the sport in the way it is in boxing. One does not expect to get hurt whilst playing soccer; but one must surely expect to get hurt whilst boxing! Further, I regret that expert medical attention is not always (in fact, hardly ever) readily available for other sports as it is for boxing, and in this respect boxing has much to commend it. But, I repeat that the very nature of the sport (i.e. receiving continual blows to the head, rib cage, solar plexus etc.) demands a stringent pre- and post-bout medical examination, and readily available medical attention whilst a bout is in progress.

One might argue (as many have done) that heading football is equally or even more dangerous than 'controlled' blow to the head in a boxing ring (see Sunday Times Nov. 3 and 10, 1974), and whilst not denying the potential danger of damage to the brain (and hair roots) as a consequence of heading footballs, I believe the risk is far greater in a boxing ring.

I find it surprising that the benefits of any sport activity have to be measured by the number of boys concussed or killed. Dr. Blonstein rightly points out that concussion and deaths can, and do, occur during

participation in other sports (in this case soccer and cricket are quoted), but, if one takes into account the number of boys who play soccer and cricket, and the number of hours they participate in these activities, then the percentage of concussions/deaths per 'man'-hour of participation falls into insignificance — though I readily concede that one death is one death too many.

Again, many other sports offer the chance for young boys to participate at various levels (e.g. local, regional and national), most sports provide an opportunity for

competition abroad, and *all* sports bring together "people of all sorts in the very best kind of comradeship" (Blonstein, 1974). In conclusion, it is my belief that amateur boxing has little more to offer to the 'average' schoolboy than any other sport.

Yours sincerely

B. Maydew

REFERENCES

- BLONSTEIN, J. L. 'The Benefits of Amateur Boxing' *British Journal of Sports Medicine*. Vol. 8 No. 4. December 1974.
- TANNER, J. M. *Education and Physical Growth*, Academic Press 1971.

To THE EDITOR

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Dear Sir,

I do wonder if the B.A.S.M. could do more for those members who are not doctors, in the way of weekend and Saturday courses to keep us up to date with present day theories on sports medicine.

Next October, November and December I am organising a course, fortnightly on Saturdays to train new cycling coaches at Sheffield. I would like one or two days of this course to be used for keeping existing coaches up to date and it occurred to me that perhaps the lectures could be open to other sports possibly with the help of B.A.S.M. Suggestions would be most appreciated.

Yours sincerely

Kenneth Jones

This sounds a good suggestion. If members are interested in such courses, will they please express their interest — direct to Mr. Jones if the time and place suits, or to Hon. Secretary B.A.S.M. if it is desired that other time and places be preferred — Editor.