

ELITE SPORT, IDENTITY AND MENTAL HEALTH: A NARRATIVE INQUIRY

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ABSTRACT

The issue of mental health in elite sport has been gaining prominence in recent years. As the demand for welfare support for athletes increases, psychotherapists and counselling psychologists are likely to be increasingly called upon to work in sports contexts. However, there is limited research aimed at practitioners working therapeutically in elite sport, or research offering in-depth understanding of the lived experience of elite athletes and others working in high performance sport who go through mental health problems.

Using narrative methodology, this study examines the experience of those competing and working in high performance sports contexts who have experienced mental health concerns. Specifically, this study investigates the construction of sports persons' identity within its subcultural context, to understand how it coexists with mental health problems and to identify how sporting cultures operate to support or silence mental illness/vulnerability stories and limit identity options.

Three elite athletes and one person who had worked in an athlete welfare role were recruited for this study. Interviews were conducted and analysed using narrative analysis which paid attention to both the individual's narratives and the contextual meta-narratives against which they were framed.

Findings centred around three domains: the relationship between mental health problems and sports person self-identity; the impact of sporting subcultures upon the experience of mental health problems and support-seeking behaviour; and the tension in the system between welfare and winning. The narratives in this study demonstrate the complex interplay between the individual and the local context in terms of both shaping sporting identity and the extent to which the experience of a mental health problem is a threat to that identity. They point to the importance of understanding local sports subcultures to appreciate the ways in which they variably operate around mental health issues. The cultural demand to conform to a hypermasculine ideal of mental toughness and denial of vulnerability was experienced as particularly problematic in the cultures where this applied. These stories demonstrate the tensions which operate within sport individually and culturally, between welfare and winning and suggest some ways in which these tensions can be understood and worked with. Recommendations and implications for therapeutic practitioners and organisations are discussed.

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CHAPTER ONE: INTRODUCTION

1.1 OVERVIEW OF STUDY

In recent years increasing attention has been paid to mental health within high performance sport. Although growing numbers of athletes have spoken publicly about their mental health challenges within the media, there is limited in-depth research to support practitioners with responsibilities for enhancing mental wellbeing in sports contexts. This project aims to contribute to the research through exploration of the lived experience of those competing and working in elite sports contexts and to understand the relationship between mental health issues and self-identity.

We live in a 'storied world' (Sarbin, 1986) and narrative is the means by which identity is constructed and maintained. I therefore explore these themes through listening to stories and investigating the culturally available narratives which are both made use of and resisted in the telling of mental health stories. This is with the aim of understanding the contribution of contextual and cultural factors to both the experience of mental health problems and to decisions around support-seeking in elite sports contexts.

1.2 RELATIONSHIP TO AREA OF INTEREST

The idea for this research arose after an encounter with an amateur boxer. I was practising as a psychotherapist at the time but had always had an interest in working in sports contexts. I had trained in Neuro Linguistic Programming for sport and was getting some experience working in this different way, offering mental skills coaching. The man who was referred to me was very apprehensive. He was used to being self-reliant, he told me. We met for a quick chat so I could tell him about what I was offering. He was worried it would be therapy. I assured him it wasn't. We scheduled a session and he didn't show up. This happened twice more. Then I had a phone call. He needed to talk and didn't know who else to turn to. It all came out. Loneliness, drugs, trauma, self-harm. He was scared of speaking about it, as though it would make it more true. He saw himself as a tough guy and boxing had reflected and reinforced that. Now, this version of himself didn't fit his experience and he was unable to reconcile one with the other. I gave him advice and arranged to meet, but of course again he didn't show up. He hadn't found a way to be both, to foster the idea of himself as both strong and vulnerable.

This wasn't the first time I had heard this kind of story. I'd been working with young offenders in a London borough for many years at this point. This was my full-time job and psychotherapy was a side-line. The young people I worked with were mostly gang members, busy presenting

an invulnerable version of themselves to the world, one that must be shown respect and didn't back down from a fight. They would rather die than look weak and some of them did. Three young people I had worked with there were stabbed to death. There was always a backstory: abuse, abandonment, some form of pain or other. I remember a session with one of the borough's so-called gang leaders. He was 16 and we were talking about trying harder in school, getting qualifications. 'What's the point?' he said. Tears started to roll down his face, 'No-one's going to want me.' He was a gang leader. He was a lost boy. A few months after I finished working with him, I heard he had developed psychosis and had been sectioned.

Interactions like this made me reflect on the different versions of ourselves and the difficulty in being vulnerable in cultural environments where this is not permitted. It had some resonances with my own life too. In psychotherapy training we were always being vulnerable, exposing our fears and anxieties. We had personal therapy and clinical supervision to help us process the material we were working with and understand how it might connect with our own histories. If you didn't show vulnerability in that training, *that* was the problem.

But at the Youth Offending Team, we were a bit like the young people we worked with; never admit to being scared or overwhelmed or that you could not handle it. We could deal with extreme things and not freak out. It was intense work which could be deeply upsetting. We had no clinical supervision or space to reflect on the trauma and chaos we were working with. We got on with it. I felt strong.

I lived both these identities and both felt 'me'.

These experiences together brought me to my thematic interest in the subject of identity and the ways in which cultures operate on those within them around what can be expressed and what must be silenced.

There are many contexts in which I could have explored this tension. In focusing on sports, I am also developing a professional identity in the field. This research enables me to broaden my understanding of this area to enhance my clinical practice working therapeutically with sports people and establish my credibility within the field.

There are also other stories I could tell about how I ended up here; about my lifelong love of sports (my dad was a sports journalist) or my own mental health as a young woman with debilitating anxiety. My arrival at this research topic is a convergence of multiple storylines and how I talk about the research - what I emphasise, what I omit - varies depending on who I am talking to. As narrative theory highlights, the stories we tell are reconstructed over time,

revised for our audience, with a purpose in mind. They can all be truthful (as opposed to a singular truth) and what gets spoken and what gets silenced is contextually mediated; it is as much about what can be heard within a particular space as what can be spoken.

In considering how these multiple truths connect I find Deleuze and Guattari's (1976) concept of the rhizome useful. The rhizome is defined as an 'underground root system, an open decentralized network, which branches out to all sides, unpredictably and horizontally, according to principles as: multiple entryways, multiplicity, connection, a-signifying ruptures, and cartography' (Loots, Coppens & Sermijn, 2013:111). This moves away from a linear understanding of connections towards a system with multiple entry and exit points and the possibility of movement in multiple directions at once: 'Every multiplicity grows from the middle' (Deleuze & Parnet, 2007:viii).

I also value this perspective in its application to the research process (whilst appreciating I am using it here in a limited way), inviting the researcher to enter 'the strange release from seeking to control research projects' (Clarke & Parsons, 2013:41) and be led by the research in unexpected directions and towards unanticipated connections.

1.3 RESEARCH FOCUS AND RATIONALE

Having outlined how I came to mental health in sport as a research theme, I will now go on to expand further on the rationale for this study.

In recent years there has been growing concern about the mental health of elite athletes. This arose in response to the suicides of Gary Speed and Robert Enke, alongside a number of high-profile athletes speaking out in the media or via autobiographies about their experiences of mental health issues (e.g. Marcus Trescothick, Mike Tyson, Kelly Holmes, Ian Thorpe, Victoria Pendleton, Kieren Fallon, Jonny Wilkinson).

The research literature has identified a number of challenges faced by elite athletes which render them vulnerable to mental health problems, particularly amongst those who present with high athletic identity - an exclusive commitment to the sporting role to the exclusion of other avenues for the expression of selfhood (Brewer, Van Raalte, & Linder, 1993). However, whilst research shows that the prevalence of mental health problems amongst athletes is broadly similar to that of the general population (Gorczyński, Coyle & Gibson, 2017), there remains a stigma within elite sport about speaking out and accessing support, (MIND, 2014).

These concerns have led to a number of initiatives at local and national level in the UK to tackle the causes of mental health problems, provide support and reduce stigma. Efforts have included players' unions providing access to confidential helplines, online learning tools and the provision of counselling. Additionally, the Sport and Recreation Alliance, in conjunction with the Professional Players Federation and with the support of MIND (a mental health charity), launched The Mental Health Charter for Sport in March 2015, which sets out how sport can address mental health and the stigma associated with it. In December 2015 the Government laid out its Sporting Futures strategy, which included the commission of a Duty of Care in Sport Review (published April 2017). This review, undertaken by Baroness Tanni Grey-Thompson, highlighted the importance of mental health training and awareness as well as provision of appropriate support.

In response, the Government has set out a Mental Health and Elite Sport Action Plan (March 2018) looking at how sport can improve mental health support. As such, mental health in elite sport has become a political issue, with questions being raised about 'whether the current balance between welfare and winning is right' (Grey-Thompson, 2017:4).

Whilst efforts are being made within elite sport to increase support and reduce stigma there is evident tension between welfare and winning. Sports culture is traditionally dominated by what is termed the 'performance narrative' (Douglas & Carless, 2006), characterized by a 'single-minded dedication to sport performance where winning is valued above all other aspects of sport and life' (Douglas & Carless, 2017:281). As such, those involved in elite sport who experience mental health problems often find themselves in a position of tension as their experience of mental health problems sits uncomfortably with their enculturated sporting identity and associated values such as mental toughness and singlemindedness. This study aims to explore this point of tension through the exploration of narratives.

Research into mental health in elite sport has emerged relatively recently and largely focuses on prevalence and points of vulnerability. Few studies explore the relationship between the athlete's experience of mental health problems and athletic identity, or the ways in which the dominant narratives within sport contribute to stigmatising attitudes, avoidance of help-seeking and exacerbating vulnerabilities.

Exceptions to this include the work of Douglas and Carless (2006, 2009, 2014), Carless and Douglas (2009, 2013a 2013b), Coyle et al. (2017) and Doherty, Hannigan and Campbell, (2016).

I also note that the focus of media, researchers and mental health initiatives to date has been the athlete experience. There is no research that I am aware of that specifically investigates the mental health challenges of coaches or others working in elite sports, though there has been associated research into coping, stress and burnout (Fletcher & Scott, 2010; Goodger, Gorely, Lavallee & Harwood, 2007; Lundkvist, Gustafsson, Hjälmsjö & Hassmén, 2012; Olusoga, Butt, Hays & Maynard, 2009; Olusoga, Butt, Maynard & Hays, 2010).

Whilst my initial intention was to similarly limit my focus to athletes, in the course of my study, the problematic aspects of sports culture which the participants storied as contributing to their mental health problems led me to a curiosity about systemic issues. To get a broader understanding of the narratives operating in sport culturally and politically, I expanded my focus to include a participant who was from a sports welfare background and able to offer insight into the narratives operating from a different space within the system. I think of this movement within the inquiry space as following the principles of the rhizomatic approach, in which the researcher is led by the research in unanticipated directions.

1.4 NARRATIVE AND IDENTITY DEVELOPMENT

Within narrative theory, identity is constructed and maintained through the stories we create and share about ourselves. According to Spence (1982:458): 'We are all the time constructing narratives about our past and our future; and that the core of our identity is really a narrative thread that gives meaning to our life'. Thus, meaning and sense making are achieved through the imposition of a storyline: 'We each seek to provide our scattered and often confusing experiences with a sense of coherence by arranging the episodes of our lives into stories' (McAdams, 1993:11). Narrative approaches do not see the self as an autonomous entity which can be 'discovered' in the process of therapy or research, but rather supports the idea of a 'community of selves' (Mair, 1977), with the possibility of multiple self-stories rather than a single, coherent self-story. According to McLeod (1997:46), 'The self can be seen as encompassing a multiplicity of narratives, attached to different situations and relationships, places and people'. This view of self-identity also implies a theory of change through accessing alternative stories. Thus, identity is not fixed, but can be reconstructed through relational processes and 'performed through story' (Etherington, 2004:76).

The content of our narrative accounts, and by extension, the identities we can claim are limited by the existing narrative forms and cultural plots available within our narrative traditions (Gergen, 1996). These traditions are seen as resources from which people can draw when telling their life stories to others. According to McLeod (1997:25):

The stories that, for the most part, construct our lives are 'out there', they exist before we are born and continue after we die. The task of being a person in a culture involves creating a satisfactory-enough alignment between individual experience and 'the story of which I find myself a part'.

Thus, the stories that are available within the sports world are mediated by what is culturally available or intelligible and as such, all identities claimed are revealing of the wider context as well as the individual.

That said, the possibility of change is offered through the development of 'counter stories' (Carless & Douglas, 2009; Douglas & Carless, 2006) or 'counter-narratives' (Bamburg & Andrews, 2004) which integrate broader aspects of experience and offer resistance to dominant cultural narratives.

Counter-narratives have a social impact, becoming accessible for others to draw upon in the construction of their own identity. In this way narrative research can give voice to marginalised or previously silenced stories (Spector-Mersel, & Knaifel, 2018), and serve as a vehicle by which others can tell their stories. According to Frank (2013:xi) suffering needs stories: 'to tell one's own story, a person needs other's stories'.

Carless and Douglas (2012) argue that all of those involved in sport have a role to play in supporting the accessing of alternative stories which are more closely reflective of athletes' lived experience, in order to counterbalance the dominant stories which can be detrimental to wellbeing. This also applies to researchers. As noted by Carless and Douglas (2012: 396):

Researchers also have a role to play as the assumptions, methods and language we employ shape understandings of sport...If we continue to only listen for and research 'performance as winning' then we too contribute to an impoverished narrative thread which limits future identity options.

This research has value for multiple audiences, exploring themes which sit at the boundary between counselling psychology, psychotherapy and sport psychology. Given the developments in the field and pending implementation of mental health strategies within sports organisations, counselling psychologists and psychotherapists will be increasingly called upon to work within sports contexts. However, the disciplines of psychotherapy and counselling psychology have made very limited contribution to the literature in relation to mental health in sport. This research aims to better equip those providing therapeutic input in sports contexts to understand the particular challenges within elite sport and the ways in which sporting

subcultures can operate both functionally and dysfunctionally in the lives of athletes and others in elite sports contexts, particularly as that relates to questions of self-identity.

CHAPTER TWO: LITERATURE REVIEW

Here I provide an overview of the relevant literature in the field. I start with studies which apply diagnostic criteria to determine the prevalence of mental health problems within the elite sport population and the particular stressors which contribute to mental health problems. I move on to explore athletic identity and the contributing social and cultural forces, paying attention to the narratives from which individuals make sense of their experiences and their impact on support-seeking. I note that the reviewed literature is limited to consideration of athlete experiences and does not include the experiences of others within the elite sport workforce due to an absence of research of this type.

2.1 PHILOSOPHICAL TENSIONS

It is of note that much of the existing research (particularly research establishing prevalence) is underpinned by a modernist, positivist philosophy which adopts a medical model perspective on mental health. Given that this study, by contrast, takes a post-modern, socially constructed perspective on mental health, it is important to briefly explore the tensions between these two epistemological positions and locate myself philosophically before proceeding.

The medical model is a disease model, with assumptions of norms which people deviate from and relying on diagnostic categories to understand distress (Woolfe, 2016). However, in contrast to physical health, mental health diagnostic categories are not 'well-bounded' and are the 'product of a form of contested discourse which privileges certain accounts of reality at the expense of others' (Woolfe, 2016:11). Having trained in counselling psychology with its humanistic value base, I take up a non-pathologising stance towards human experience and consider what we understand as mental illness to be culturally and historically contingent.

That said, I understand that the language of the medical model is the culturally dominant language we use to talk about emotional distress and that there is value in having a common language with which to engage in dialogue. When approaching potential participants or engaging in research interviews I have made use of the same language they have used when talking about their experiences, respecting that individuals hold their own truths and conceptualisations of their experiences. I therefore approach these tensions by thinking dialectically across traditional boundaries and engage with diagnostic categories whilst holding these constructs lightly.

2.2 PREVALENCE OF MENTAL HEALTH PROBLEMS IN ELITE SPORT

Research shows a high prevalence of mental health issues within elite sports across numerous disciplines and nationalities with a review by Reardon and Factor (2010) noting the most frequently diagnosed mental illnesses to be clinical depression, overtraining syndrome, and eating and mood disorders. In the UK, Foskett and Longstaff (2018) found that nearly half of the athletes recruited in their study showed signs of anxiety/depression (47.8%), and just over a quarter showed signs of distress (26.8%). Hammond, Gialloreti, Kubas and Davis's (2013) study of Canadian swimmers found 68% of the sample met criteria for a major depressive episode within the previous 36 months. Beable, Fulcher, Lee and Hamilton's (2017) study of New Zealand elite athletes revealed 21% meeting criteria for moderate symptoms of depression and 8.6% for a major depressive episode. Research relating to Australian athletes (Gulliver, Griffiths, Mackinnon, Batterham & Stanimirovic, 2015) found 46.4% were experiencing symptoms of at least one of the mental health problems they assessed, with the following breakdown: depression (27.2%), eating disorder (22.8%), general psychological distress (16.5%), social anxiety (14.7%), generalised anxiety disorder (7.1%), and panic disorder (4.5%).

A study of top-level Swiss footballers (Junge, & Feddermann-Demont, 2016) indicated mild to moderate depression in 7.6% of players and major depression in 3% of players. Other studies of footballers have found that around a quarter of professional footballers suffer from depression or anxiety rising to 39% amongst retired footballers (Gouttebauge, Aoki & Kerkhoffs, 2016). Amongst student athletes in the United States, research found the prevalence rate for clinically relevant depressive symptoms was 23.7%, with moderate to severe depressive symptoms reported by 6.3% (Wolanin, Hong, Marks, Panchoo & Gross, 2016).

Amongst Dutch elite athletes (Gouttebauge, Jonkers, Moen, Verhagen, Wylleman & Kerkhoffs, 2016) prevalence over a four-week period was found to be 45% for anxiety/depression among current athletes and 29% for anxiety/depression among former athletes. Gouttebauge, Kerkhoffs and Lambert's (2016) study of retired rugby union players in France, Ireland and South Africa found 25% presented with distress, 28% anxiety/depression and 29% sleep disturbance.

As noted by many of these studies, the incidence of mental health problems amongst elite athletes is broadly similar to that experienced by the general population in the nations from which the subjects were recruited (Heun, R., & Pringle, 2018; Rice, Purcell, De Silva, Mawren, McGorry & Parker, 2016; Junge & Feddermann-Demont, 2016; Gouttebauge, Jonkers et al., 2016). Indeed, a meta-analysis assessing whether a difference exists in depressive symptoms

between elite athletes and the general population (Gorczynski et al., 2017) looked at data from five eligible studies and concluded that high-performance athletes were as likely as non-athletes to report depressive symptoms.

However, diagnosis in elite sport has been complicated by lack of context specific mechanisms for understanding symptomology. It has been noted that over-diagnosis of mental health issues could occur as behaviours are deemed pathological which in a sporting context are adaptive (Lebrun & Collins, 2017). By contrast, others have suggested that mental health issues are under-diagnosed in sport with distress being interpreted through a physiological/performance lens and seen as reflective of over-training or burnout rather than mental health (Schwenk, 2000). Indeed, it is notable that research into coaches' experience of distress has largely explored stress and burnout, although content of the narrative accounts has included experiences of depression (Olusoga & Kenttä, 2017). Similarly, it has been noted that symptoms of trauma such as compartmentalisation, perfectionism and dissociation which can be beneficial in sports performance can mask underlying trauma and be overlooked as potentially indicative of mental health problems (Aron, Harvey, Hainline, Hitchcock & Reardon, 2019). Although there has been limited research into trauma within athlete populations, studies suggest trauma-related mental health problems within elite sport to be common, with prevalence rates possibly higher than that found within the general population (Aron et al., 2019; Thomson & Jaque, 2016).

Trauma symptoms have been found to be associated with injury (Shuer and Dietrich, 1997; Bateman and Morgan, 2019), concussion (Brassil & Salvatore, 2018), career termination (Wippert & Wippert, 2008) and abuse (Leahy, Pretty & Tenenbaum, 2002) as well as events unrelated to sports participation. Researchers have also found evidence of vicarious trauma in those witnessing sports injuries (Day & Schubert, 2012; Day, Bond & Smith, 2013).

As such, research broadly indicates that high-level sports participation does not protect against mental illness and may contribute towards it. Research findings, alongside published autobiographies, have challenged the widespread assumption within elite sport that mental health problems are infrequently experienced given only mentally strong athletes succeed at that level (Markser, 2011). Whilst the mental health benefits of physical activity are well established (Daley, 2008; Stanton & Reaburn, 2014), findings amongst elite athletes suggests that exercise at this level no longer serves an entirely protective function and instead, participation may contribute to mental health problems. This corresponds with findings from Newman, Howells and Fletcher's (2016) analysis of sports autobiographies which noted that whilst sport initially provided an escape from depressive symptoms, the demands of high-level

sport over time shifted from being facilitative to debilitating, resulting in an intensification of symptoms.

2.3 POINTS OF VULNERABILITY

Research suggests a number of key points at which vulnerability to mental health problems may be exacerbated (Hughes & Leavey, 2012; Reardon & Factor, 2010). These include retirement (Gouttebauge, Frings-Dresen & Sluiter, 2015; Reardon & Factor, 2010), competitive failure (Hammond et al., 2013) and injury (Gulliver et al., 2015; Putukian, 2016; Leddy, Lambert & Ogles, 1994). As well as particular points of stress within their careers, sports people are also found to be prone to eating disorders and body image concerns, particularly in sports requiring a lean body shape (Reardon & Factor, 2010; Rice et al., 2016; Schaal et al., 2011).

2.4 ATHLETIC IDENTITY

Research indicates vulnerability to mental health crises is particularly problematic amongst those with 'high athletic identity' (Brewer et al., 1993; Doherty et al., 2016). Athletic identity has been defined as the degree of strength and exclusivity to which a person identifies with the athletic role (Brewer et al., 1993). Subscribing to a singular notion of the self can lead to 'identity foreclosure' (Marcia, 1966). Athletic identity foreclosure occurs when other aspects of identity development are limited by exclusive commitment to sport before exploring other aspects of life (Brewer & Petitpas, 2017; Warriner & Lavalley, 2008).

Whilst athletic identity can be a source of self-esteem and meaning, it becomes problematic when things are not going well (Ronkainen, Kavoura & Ryba, 2016) such as during periods of injury or career transition such as retirement (Grove, Lavalley & Gordon, 1997; Kuettel, Boyle, & Schmid, 2017; Ronkainen et al., 2016; Willard & Lavalley, 2016). When the function of identity is removed athletes are vulnerable to experiencing psychological distress (Hughes & Leavey, 2012).

Whilst mental health problems are therefore linked to high athletic identity, it would seem that sporting cultures (particularly those which dominate the lives of participants from a young age) simultaneously promote the development of athletic identity through expectations of dedication and commitment to sporting goals above all else. This presents a problem within sport whereby the emphasis on athletic achievement can render an athlete vulnerable to mental health problems if their goals are not achieved.

2.5 NARRATIVES OF IDENTITY DEVELOPMENT IN SPORT

Whilst athletic identity is often regarded as a trait located within individuals, coming from a social constructionist philosophical perspective, I consider features of identity to be constructed culturally and therefore turn to narrative studies to further understand the mechanisms of athletic identity development within sport. Narrative studies to date have explored eating disorders (e.g. Busanich, McGannon & Schinke, 2012, 2014, 2016; Papathomas & Lavalley, 2006), identity development (Carless & Douglas, 2013a, 2013b), career transitions (Carless & Douglas, 2009; Gearing, 1999) and injury (Sparkes, 1998; Sparkes & Smith, 2002). A recent meta-study conducted by Ronkainen et al., (2016) analysed narrative studies on athletic identity and concluded that elite sport culture offers 'limited narrative resources or subject positions for athletes, and can endanger athletes' well-being if they are unable to comply with dominant ideals of being an athlete' (p.128).

In terms of identity development, the work of Carless and Douglas (Carless & Douglas, 2013a, 2013b; Douglas & Carless, 2006, 2014) highlights three possible narrative types available within elite sport from which athletes can story their experiences. They term these narratives *performance, discovery and relational*. Whilst the performance narrative represents a single-minded dedication to sporting goals, the discovery and relational narratives offer alternative ways of understanding athletic identity, with meaning derived from experiences and relational bonds.

Amongst these, the performance narrative is regarded as the dominant narrative type within elite sport, a view supported by subsequent studies (Busanich et al., 2014, 2016; Houltberg, Wang, Qi & Nelson, 2018; Hudson & Day, 2012; Papathomas & Lavalley, 2014; Ronkainen, Ryba, & Nesti, 2013).

Rigid adherence to a dominant narrative can become problematic when, '*The culture we live in supplies us with stories that do not fit experience, and experience that does not live up to the story,*' (McLeod, 1997:100). As such, when a performance narrative fails to match the experience of the athlete due to, for example, injury, performance failure, unexpected endings etc., narrative theory suggests this would be experienced as threatening to self-identity and wellbeing.

Research also suggests that the loss of identity that can accompany injury or retirement from sport can be experienced as traumatic by athletes (Wippert and Wippert, 2008) and represent a form of 'social death' (Rosenberg, 1984) in which athletes can no longer access established social relationships and face the end of their athletic role.

Carless and Douglas (2009) point out that those who do not subscribe to the dominant narrative experience narrative wreckage if they are unable to create a story which matches their lived experience, and identify three reasons why telling of alternative stories may be impossible for athletes:

a) an absence of alternative narrative templates, (b) the de-valuing or disbelief of alternative stories, and (c) tellers of alternative stories being construed as “failures” and therefore “worthless” (Carless & Douglas, 2009:227).

2.6 IMPACT OF SPORT SUBCULTURE

Athletic identity is developed culturally and as such immersion in a sporting subculture can operate as a mediator for the development and expression of athletic identity. In thinking about elite sport culture, I am mindful it is not a unitary concept. Whilst there may be common narrative threads that link elite sports, there is also significant variability.

As noted by Tibbert, Andersen and Morris (2015) athletes are under pressure from those in power positions within sports organisations (e.g. coaches, administrators) to adopt the locally prevalent values and cultural ideals in order to gain acceptance. In becoming enculturated into a particular sporting environment, athletes perform expected identities. The extent to which these ideals support mental wellbeing is highly variable and research has shown numerous examples of sporting cultures which promote mental toughness and denial of vulnerability.

The tendency for athletes to compromise their identities to conform to standards of mental toughness is explored by Lee Sinden (2013), who argues that athletes are persuaded to consent to conforming their emotionality to fit the norms within their sport and uses Foucault's theories to understand how this occurs, with reference to the relationships of power within sports environments, such as coach/athlete.

Similarly, research into subcultures around mental toughness within the Australian Football League (AFL) found it to be closely tied to hyper-masculine ideals (Tibbert et al., 2015, Coulter, Mallett & Singer, 2016) involving ignoring injury, denying vulnerability and sacrificing individuality, which operated as ideals that had to be lived up to in order to gain acceptance and approval from teammates and staff. Coulter et al. (2016:109) noted the social benefits associated with mental toughness: 'Labelling a player as mentally tough branded him with social status at the studied club, a mark of his identity as someone trusted to conform to ideals linked with the term'.

Cultures characterised by hyper-masculine ideals of mental toughness have been found to limit expressions of emotion and experience which do not conform to this ideal and deter acknowledgement of vulnerability and support-seeking (Steinfeldt & Steinfeldt, 2012). Manley, Roderick and Parker (2016) explored the theme of silence within a UK football academy, noting that silence represented an attempt to conform to a professional ideal and display a version of 'self' that legitimised one's position in the organisation. Similarly, a recent study by Brownrigg, Burr, Bridger and Locke (2018) on addiction amongst professional footballers in the UK found club culture to be key to understanding the players' problems, noting that 'a harsh, unsupportive psychological environment combined with expectations of manliness resulted in a culture of silence in the face of personal difficulties' (p.238). Day (2018) notes similar limitations in relation to trauma stories in sport, and suggests such stories are silenced by norms and values within sport that prohibit speaking out.

Research exploring burnout amongst elite coaches conducted by Olusoga and Kenttä (2017) also identified a cultural expectation to perform an identity which precluded expression of vulnerability, with the coaches in the study presenting with the need to be perceived as 'superman', with vulnerability understood as a sign of weakness (p.28). This work is suggestive that the imperative to display a hyper-masculine version of mental toughness operates on others working in elite sport as well as athletes.

These concerns have led some to question if mental toughness and mental health are seen as contradictory in elite sport. Bauman (2016) suggests that seeking help for mental health problems may be detrimental to the career of an athlete due to perceptions that this is suggestive of not being mentally tough. As such, there is a disincentive to support-seeking to avoid appearing 'mentally weak'.

The link between perception of toughness and support-seeking is explicated further by Newman et al. (2016), who note that behaviours are inaccurately labelled as mentally tough or resilient and are often at odds with academic definitions of mental toughness which actually include support-seeking (Jones, 2002). I understand what Newman refers to as the 'macho heroic myth' of mental toughness as a kind of narrative, a culturally located script, not dissimilar to the performance narrative, which promotes hyper-masculine ideals and the denial of vulnerability.

2.7 MENTAL TOUGHNESS AS SOCIAL CONSTRUCTION

Whilst there is research and theory which provide definitions of mental toughness and locate it within the individual psyche (such as Gucciardi, Hanton, Gordon, Mallett & Temby, 2015;

Jones, 2002), how it is defined theoretically seems less important than what it means subjectively to the person or team operating under the demand of it. Tibbert and Andersen (2015) observe that mental toughness is not made up of a set of characteristics contained within the individual but is instead a socially agreed construct, amounting to what a sporting subculture says it is.

I therefore find looking at mental toughness as 'social product' rather than psychological characteristic more useful in revealing the norms and ideals valued in sporting subcultures (see Coulter et al., 2016). This moves away from looking at the psychological characteristics of mental toughness towards understanding how the narrative of mental toughness makes itself felt in the culture in which it operates, noting that this will be locally negotiated and communicated.

2.8 STIGMA AND SUPPORT-SEEKING

In general, the literature outlined above suggests local sporting culture to be a determinant of the extent to which mental health problems and support-seeking are stigmatised. The evidence would suggest that disclosure of mental health issues or other expression of vulnerability is seen as presenting weakness within sporting cultures which place high value on masculine ideals and mental toughness. Indeed, Steinfeldt and Steinfeldt's (2012) study of male American Football players noted that those presenting with highest conformity to masculine norms reported significantly higher levels of stigma towards help-seeking than those identified as non-conforming. Stigma is a known barrier to mental health support-seeking in the general population (Clement et al., 2015) and research within elite sport reveals stigma to be particularly problematic (López and Levy, 2013), alongside poor mental health literacy and negative past experiences of help-seeking (Coyle, Gorczynski & Gibson, 2017; Gulliver, Griffiths & Christensen, 2012). Research specifically into stigma and support-seeking amongst athletes has found student-athletes in the US to be more reluctant than non-athlete peers to use counselling services (Brewer, Van Raalte, Petipas, Bachman & Weinhold, 1998; Leimer, Leon & Shelley, 2014; Watson, 2006) with the fear of being stigmatised by teammates, coaches and fans a factor in their reluctance (Watson, 2005). This research supports the notion that stigma and a perception of weakness is a significant barrier to support-seeking amongst athletes and the adoption of masculine norms to be implicated within this.

2.9 OVERVIEW AND CONTRIBUTION

In totality, existing research has largely focussed on the prevalence of mental health disorders and the points of vulnerability within sporting careers. Additional studies have explored the

impact of 'athletic identity' in relation to vulnerability to mental health problems, and the dominant 'performance narrative' which limits identity options and contributes to mental health problems when athletes are unable to live up to the demands of this narrative. Research shows sporting subculture to act as a determinant of the ideals, values and identity which is expected in any particular setting, frequently centring around the performance of masculinity and mental toughness. Research in this area has noted the ways in which athletes conform their expressions of emotion in the service of gaining acceptance and status within an organisation, and sports culture can operate to silence, limit and prescribe an identity or expected performance of the self that can stigmatise expression of vulnerability such that it is silenced. Finally, research has demonstrated stigma to be a barrier to help-seeking in athletic populations, particularly in those which subscribe to a hyper-masculine ideal.

However, there is limited research which directly explores the lived experience of those competing and working in sport who go through mental health problems during their sporting careers. Whilst a number of narrative studies focus on athletes' experiences which contribute to mental health problems, such as identity issues, injury, retirement etc. (see particularly the work of Douglas and Carless) and which incorporate discussion of mental health as a feature, I have come across limited studies to date which directly focus on the experience of mental ill health during a sports career.

Those studies which do attend specifically to the experience of mental health (such as Doherty et al., 2016) do not make use of a methodology which enables in-depth analysis of individual cases. As such, this study aims to make a unique contribution to existing research through the use of narrative to explore in depth the lived experience of athletes and others in sport who experience mental health problems in their careers and the impact upon their self-identity, paying attention to how the experience of mental health issues are variably lived with, resisted, or incorporated into a sporting identity. This study builds on research relating to the enculturation of athletes, looking both towards the inner world of the individual and also out into the culture, generating a contextual understanding of how the tension between winning and welfare co-exist and are held individually and also organisationally. Insights will assist sports organisations (and those working within them) to understand the implications of their own culture in terms of how this supports or limits athletes and staff in gaining help, such that a wellbeing-oriented culture can be promoted. In including the experience of a non-athlete working in high-performance sport, this research also considers the impact of sports culture on the elite sports workforce more broadly. This is a timely contribution to the literature given sports organisations are increasingly required to demonstrate duty of care for athletes alongside performance goals.

Additionally, other than studies relating to the provision of student-athlete counselling in the United States (see Heird & Steinfeldt, 2013), there is limited research directed towards therapeutic practitioners working in sports contexts. In directly linking research to practice recommendations, this study aims to better equip therapists to understand the particular practice challenges of working in sports contexts.

2.10 RESEARCH QUESTION

My research question therefore asks: What is the impact of mental health issues on self-identity in sports contexts, and what are the implications of this for support-seeking and service provision? Using narrative methodology, I aim to examine the lived experience of professional sports people and those working in sports contexts who have experienced mental health concerns, to explore the construction of identity within its subcultural context, to understand how it coexists with mental health problems, and to understand how sporting subcultures operate to support or silence mental illness/vulnerability stories and limit identity options.

CHAPTER THREE: METHODOLOGY

3.1 WHY NARRATIVE INQUIRY: PHILOSOPHICAL CONSIDERATIONS

'If we understand the world narratively...it makes sense to study the world narratively.'
(Clandinin & Connelly, 2000:17)

My choice of narrative inquiry is due to a combination of a social constructivist epistemological position and a narrative understanding of meaning-making processes. My methodological choices were also closely related to my view of the 'self,' which I see as multiple and contextual. Therefore, I am drawn to methods which seek to understand the construction of these 'selves' rather than aim to be revealing of the modernist 'autonomous, bounded self' (Cushman, 1995).

This social constructed philosophical position is therefore incompatible with alternative analytic methods which are rooted in a positivist philosophy, such as traditional forms of grounded theory (Glaser & Strauss, 1967), with associated assumptions of an objective reality that does not acknowledge researcher subjectivity. Furthermore, approaches originating from positivist philosophy do not take account of language and words as constitutive, rather seeing them as representational of experience (Willig, 2013).

Other methodological approaches which were considered which share compatible philosophical assumptions were interpretative phenomenological analysis (IPA) and discourse analysis. IPA (see Smith, 2004) shares commonalities with narrative research in terms of attending to lived experience and an understanding of narrative as a subjective and culturally situated process (see Griffin & May, 2012). However, narrative analysis was favoured due to its emphasis on the function as well as content of participant stories, enabling insight not only into individual experience, but into the cultural storylines and sociocultural frameworks which are drawn upon to make sense of experience. Narrative methodology is therefore revealing of both the individual and the available meta-narratives against which personal narratives are framed (Spector-Mersel & Knaifel, 2018) as well as the ways in which language and story can be used to achieve social aims and enable the performance of identity. As such, it lends itself well to a study which is specifically exploring issues of identity in context, and seeks to inform our understanding of sports culture as well as individual experience.

Further, methods such as IPA break interview content into chunks for analysis and the generation of categories and themes, also a characteristic of more recently developed constructivist forms of grounded theory (Charmaz, 2006). This fragmentation and

decontextualization of the text means that sequential and structural features of the story are lost (Griffin and May, 2012). In my view, a holistic analysis such as that undertaken in narrative research allows attention to be paid to the way a storyline evolves, the points of narrative tension and how shifting themes and self-positions relate to each other and therefore honours the complexity of experience and identity.

Discourse analysis was also considered given it shares philosophical similarities with narrative in terms of the constructed and constituted nature of discourse and language, the understanding of discourse as (re) produced in social practices and in the view of self-identity as a discursive construction (McGannon, 2016). However, this approach focusses on the ways in which discursive resources are made use of to achieve 'social and interpersonal objectives' (Willig, 2013:117) and pays limited attention to the meaning-making function of story and was therefore also discounted in favour of narrative inquiry.

As such, narrative is both the method and the subject of the study (Clandinin & Connelly, 2000). When understanding narrative as subject, this leads rather inevitably to narrative as method, which specifically attends to the storying of experience and goes beyond an investigation of the content of stories to the construction of stories to enable an exploration of how identities are claimed and negotiated.

That said, narrative research is not a unitary concept and there is wide variety in both research and cultural contexts as to how narrative is understood. Narrative arose from both humanist and poststructuralist traditions which have some divergence theoretically and therefore have given rise to wide variability in how researchers conceptualise and study narrative.

Given my social constructionist philosophical orientation and view of the self as multiple rather than singular and unified, I am drawn to approaches which see narratives as culturally located rather than as located within individual subjectivity. This moves me away from approaches deriving from Labov (1972) and his representational view of the story, towards those which pay attention to contextual issues and the constructed nature of any account (Patterson, 2013). I appreciate the 'experience-centred' approach as noted by Squire (2013:48), which involves an assumption of narratives as:

- Sequential and meaningful
- Definitively human
- 'Re-presenting' experience, reconstituting it, as well as expressing it
- Displaying transformation or change.

This can include narratives that are about turning points in life and is not limited to events from the past, but also realisations, hopes for the future and imaginary events (Patterson, 2013). Narrative methods emerging from this tradition locate identity in a social, cultural, political and historical context and by extension, in relationship with the prevailing 'grand narratives' of our time and place. Additionally, I appreciate narrative approaches focus on 'local knowledge' which leads to an avoidance of generalisations, paying attention instead to difference and diversity. This moves away from essentialist, objectivist versions of reality towards a subjective, relativist version. This also differs from positivist approaches which seek to formulate rules in order to predict, instead seeking to increase understanding of a phenomena through exploration of individual cases.

3.2 CO-CREATION OF NARRATIVES

Narrative implies a relationship with others, implies a listener, and is inherently participatory involving the 'joint construction of meaning' (Mishler, 1986, 1999). The way in which the narrative is performed - not just what is told but how and why - implies something about the teller: 'How individuals recount their histories – what they emphasize and omit, their stance as protagonists or victims, the relationship the story establishes between teller and audience - all shape what individuals can claim of their own lives' (Rosenwald & Ochberg, 1992:1). As such, researchers must acknowledge the part they play in the co-creation of the narratives which emerge in the research context.

As a psychotherapist sympathetic to hearing mental health stories, I am likely to elicit different stories than if I was a coach more aligned with a performance narrative tradition. Who we are telling not only changes how the story is told but also the self-construct which develops as a result. Additionally, I will bring my own interpretations to the story which will also be uniquely mine, so not only is the story told differently depending on the audience, but it is also heard differently and open to infinite reinterpretations.

3.3. WHAT IS NARRATIVE ?

Within a research context, there are competing versions amongst theorists of what constitutes narrative, ranging from broad definitions from which little is excluded, to restricted definitions which require common structural properties (Riessman, 1993). I take a broad view of story and consider the interview conversation in its entirety to reflect a 'storyline' in which what is both said (including speech acts which do not fit a conventional story structure) and what is unsaid contribute. I work with Riessman's definition of narrative, as 'talk organised around consequential events' (Riessman, 1993:3). This captures both the discrete bounded stories

which occur within conversation, which follow predictable storytelling elements (such as Labov, 1972) as well as talk which sits outside of 'story' (such as offering an explanation or evaluation) in a structural sense but nonetheless contributes to the message that the speaker is seeking to convey through the story.

3.4 NARRATIVE INQUIRY PROCESS

As noted by Speedy (2008), Etherington (2004), Mishler (1999) etc., there is no one version of narrative inquiry. Narrative inquiry involves the collecting and analysing of stories (Etherington, 2004:75) with narrative being both 'phenomena under study *and* method of study' (Clandinin & Connelly, 2000:4). Inquiries aim to understand how participants use story to make sense of their lives and experiences. As a method, the process involves paying attention to the way the story is constructed, the cultural and linguistic resources drawn on and the mechanisms by which it 'persuades a listener or authenticity' (Riessman, 1993:1-2).

As noted, while other approaches fracture the text in a way which can decontextualize it as part of a narrative sequence (Riessman, 1993), narrative approaches allow for a full account of the story. In terms of understanding athlete identity, narrative inquiry enables understanding of how identity is constructed through story-telling and within the context of time, place and with reference to the internal and external world. This holistic analysis is central to narrative research:

Isolating parts of the narrative – either variables, as in statistical analysis, or categories, as in grounded theory – contests the holistic epistemology, that maintains that various aspects of experience are intertwined in the narrative, hence cannot be understood separately. (Spector-Mersel, & Knaifel, 2018:303).

In terms of the stages of the inquiry process, I appreciate Riessman's (1993) 'stages of representation'. These range through attending to experience, telling, transcribing, analysing and reading. Attending to experience involves the question of what is attended to (and what is left out) and also locates that in the history and context of the individual. Telling involves the reconstruction of events in the form of a narrative performed to others. In the interaction with others, the narrative changes again, paying attention to different meanings and possibilities. This also impacts on the self-construct as the story is depicted in a way which portrays the teller in a way they seek to be seen. The transcribing of experience is another stage in which further interpretation of the story emerges. The analysis of the text which follows involves the reshaping of the story by the researcher, which will be influenced by the values, theoretical approach and context of the researcher. Finally, in the reading, the reader also becomes a co-

constructor of the story, bringing their own meanings and interpretations. All these stages are collaborative, interpretive processes and meaning arises through the interactions at all stages of representation. In this sense, meanings are not fixed, but remain open to new interpretations.

3.5 PARTICIPANTS AND SAMPLING

In recruiting participants for this project, I sought those who had experienced mental health problems during their careers in elite sport and therefore my definition of 'elite' and 'mental health' had a bearing on inclusion/exclusion criteria. Swann (2015) points out the variability in definitions of 'elite' used in research and proposed four domains ranging from 'semi elite' to 'world class elite'. All of these domains suggest a primary dedication to sporting goals and therefore I took the view that recruiting from any of these domains was appropriate.

In regard to mental health concerns, I did not embark on the study with defined criteria with regards to what is included/excluded. In the event, the participants all reported experience of depression or anxiety though were not sought on this specific basis and I offer some reflections on the prevalence of depression stories in my reflections chapter. Given my humanistic value base, I was more interested in participants' subjective experience of distress than whether it met a set of diagnostic criteria, and therefore a formal diagnosis was not a requirement.

My decisions regarding sample size were guided by consideration of achieving depth and richness of narrative material. Narrative research often relies on very small participant numbers (Holloway & Freshwater, 2007) with an emphasis on the 'information-richness' of the selected cases rather than quantity (Patton, 2002:245). Narrative research in sport similarly typically focusses on in-depth analysis of a very small number of participants (see Carless & Douglas, 2009, 2013a; Douglas & Carless, 2006, 2009; Olusoga & Kenttä, 2017).

My intention was to conduct five interviews, making the judgement that this would be sufficient to achieve the requisite richness of description and interpretation, with the aim of achieving depth rather than generalisability (Guetterman, 2015). Unlike grounded theory (for example) narrative research does not require saturation as those involved are regarded as unique accounts which share contextual commonalities (Holloway & Freshwater, 2007) revealing of 'knowledge-in-context' (McLeod, 1999:13). Having undertaken five interviews, one of the participants was subsequently discounted for ethical reasons (see ethics section). Nonetheless, having commenced my analysis, I was satisfied subsequently that the inclusion of four narratives was sufficient, given the richness of data and depth of analysis which was achieved.

I adopted a purposive sampling strategy for the recruitment of participants. I used online searches to identify athletes who disclosed mental health problems and approached them through their clubs, agents, LinkedIn profiles, or email addresses where public. I additionally made use of contacts to make approaches on my behalf. Three interviews with athletes were generated through personal approaches and a further participant was introduced through a contact. The athletes were drawn from different sports, enabling examination of the locally determined nature of sports subcultures, and how they variably impact on those within them.

In parallel with making approaches to individuals, I sought to broaden the potential range of participants through seeking the support of national governing bodies (NGBs), players unions and organisations providing counselling to athletes. This was unsuccessful and most of my enquiries were met with no reply. However, at a later stage during the research process I joined the network of counsellors for Sporting Chance Clinic and they very helpfully distributed a participation invitation on my behalf to a selection of people who had made use of the counselling service. Although this yielded no response, it highlighted the benefits of developing relationships in facilitating access to hard-to-reach participants.

As such, my attempt to recruit through enlisting the support of sports organisations was unsuccessful and I wondered if this was a reflection of ambivalence in the field regarding the subject. Although in the event I recruited sufficiently through personal approaches, the recruitment of participants was a significant challenge of this study and the vast majority of my approaches both to individuals and organisations received no response. Those who chose to take part seemed motivated by a desire to raise awareness and contribute to cultural change. This speaks to the ways in which research participation can be a political act and means of challenging existing discourses in intentional ways.

Having commenced my analytic work whilst still recruiting, I was mindful that the athlete narratives pointed to the hidden nature of mental health problems within sport and systemic cultural issues which operated to silence. I was mindful that this silence in the field was being replicated in the research and wondered how to make sense of a subject that no one wants to talk about. I therefore sought other perspectives which could offer insight into the wider cultural and political dimension of mental health in sport and help me understand the silence which operates around this subject. As such, I approached someone by email who had been in an athlete welfare role. He responded to my email invitation and took part in the study.

The inclusion criteria therefore evolved from my initial strategy and was guided by responding to the emerging analysis and the questions that arose from this. In this way, the sampling

process had characteristics of the rhizomatic approach, allowing research to go where it leads and develop in multiple directions finding unlikely connections, rather than a linear fashion.

3.6 PROCEDURES FOR DATA COLLECTION

I appreciate the view of Clandinin & Connelly (2000:94), who refer to data as ‘field texts’ in the understanding that ‘they are created, neither found nor discovered, by participants and researchers in order to represent aspects of field experience’. Their view asserts that field texts are both interpretive and contextual, in that the researcher and interviewee make choices about what is included, shaped by their own areas of interest. This supports a reflexive approach to research, such that the researcher’s decisions regarding inclusion and exclusion can be made explicit.

Field texts in my study were generated by undertaking interviews with participants. Interviews are often favoured by narrative researchers in sports contexts due to an ability to produce in-depth stories which are revealing of the wider stories available in culture (Ronkainen et al., 2016). Making sense through talking also aligned with my work as a therapist. In my clinical work I was already in the habit of gathering ‘data’ with talk being the medium for interpretation, taking in both what is said and my reaction to what is said including counter-transference responses; this therefore represented a comfortable space for me.

That said, whilst it made sense to me to rely on interviews, I also became aware as the process progressed that my choice was reflecting conventional methodology in the work I’d been exposed to and something of a reflection of my unreflexive embeddedness in the conventions of research. The fact that interviews were widely used, which to me justified their use, also pointed to the limitations inherent in doing more of the same (Honan, 2014). Arts.-based methods of data-gathering which have been made use of in narrative research in sport include expressive writing (Hudson & Day, 2013) and mandala drawings (Blodgett, Schinke & McGannon, 2017). Such methods could have been fruitful in provided access to dimensions of experience which are difficult to express (Blodgett et al. 2013).

3.7 THE RESEARCH INTERVIEW

My approach to the research interview was to begin with a question designed to elicit storytelling: *Can you tell me about when you first became aware you weren’t okay?* I followed up with further questions seeking elaboration, paying attention to the sequence of events, character and plot. My style was conversational rather than relying on a list of previously determined questions, providing a forum for the ‘joint construction of meaning’ (Mishler, 1986).

Although I had no planned questions beyond the opening, I had a number of themes that I wanted to cover relating to my research interests and typically found that these emerged naturally in the course of the dialogue. Where this was not the case, I asked questions which oriented towards those themes directly.

I entered into these research conversations with considerable pre-existing knowledge about the stressors faced by elite athletes, the points of vulnerability to mental health problems and the barriers to support-seeking as explored within existing research. In addition, I also had some familiarity with the stories of those participants who had already spoken publicly about their experiences. Although I attempted to bracket my assumptions in this regard, it is inevitable that my assumptive world was part of the intersubjective process between us. To monitor this, I made use of a reflexive journal. I also shared my analyses with my supervisors (in addition to my Metanoia research supervisor I sought additional consultative support from someone with extensive experience of narrative research in sport), who also functioned as 'critical friends' who could 'react to your work as you go.' (Miles & Huberman, 1994:14). This was particularly helpful in ensuring that my analysis stayed close to the data rather than moving into pre-existing knowledge.

The interview approach shared some features with my work as a psychotherapist, particularly around expressions of empathy, attentive listening and seeking elaboration of the meanings, thoughts and feelings attached to an experience. However, there were also some differences. The conversational style meant I was more inclined to express my own perspectives, which Etherington (2004:77) describes as 'reflexive interviewing' which incorporates the idea that 'the interviewer also notices and/or shares personal experience of the topic and comments on the unfolding communication between both parties'. This approach acknowledges that how the story is told and heard will be greatly impacted by the listener and acknowledges that in a different context with a different interviewer, a different version may be told.

I was also mindful that whilst in a psychotherapy session I may move 'towards' discomfort and seek to venture carefully into spaces of emotional vulnerability, within these interviews I was conscious of being more backed off and rarely challenged participants' defences. Although I found myself wondering if the interviews lacked richness due to this, I was also mindful to respect the participants' need to maintain emotional safety and not to rupture sustaining life stories (Clandinin & Connelly, 2000). I also had the sense that participants were doing me a favour of sorts and wondered whether my gratitude at the favour being done perhaps meant I trod rather carefully.

Interviews took place over Skype. Where geographical differences permitted, participants were offered the opportunity to meet face to face (three of the four interviews). When one participant expressed a preference for a face to face interview, it proved difficult to find a suitable location close to the participant's home where confidentiality could be achieved. We ultimately agreed to a Skype call as the participant's concern for the potential inconvenience to me appeared to be causing discomfort. Meeting over Skype was also a way of reducing barriers to participation and meant I did not have to trouble participants around suggestions of suitable venues or require them to travel somewhere to meet me. Making it as easy as possible for participants was a reflection of the paucity of potential participants. I found that securing involvement already felt rather fragile and I did not wish to introduce further barriers.

I was personally very comfortable with videocall as I undertake much of my psychotherapy practice online. Skype is increasingly made use of in qualitative research in sports contexts (see Schinke, Blodgett, McGannon, & Ge, 2016; Blodgett, Ge, Schinke & McGannon, 2017). That said, I am mindful of the potential limitations. The most relevant of these to my mind is around awareness of non-verbal cues. Bayles (2012: 578), in relation to Skype, argues that 'we lose the full range of postural, gestural, and expressive movement that the body conveys, as well as the intentionality that is carried and expressed in that movement'. Thinking about the embodied nature of communication, it is my experience that something of this is lost in a videocall. However, not being 'seen' so clearly, can also act as a buffer in which clients can feel less prone to emotional overwhelm. Not being able to make use of the full range of non-verbal communication, I found myself in the research context less emotionally attuned than I anticipate I would have been in a face to face encounter. This may have also impacted on the development of rapport. The limited continued interaction post-interviews left me questioning if this was a reflection of a poorly established relationship which I may have been less sensitive to in Skype communication. Indeed, in my online psychotherapy work I at times find the relationship less well established than is typical of face to face work, and I have noticed an increased tendency for sudden endings.

3.8 POWER DYNAMICS

Another distinction between therapeutic work and the research interview related to the purpose of the encounter. Etherington (2001) highlights the reversal of roles which occurs in the research interview in which it is the researcher who is seeking something from the participant rather than the other way around. This felt particularly pronounced in this research given the difficulty I experienced in recruiting. Whilst my academic training and preparation for this project had frequently alerted me towards the unequal power

relationship between interviewer and participant (Kvale, 2006) and led me to anticipate the power dynamic to be an asymmetrical one in favour of the researcher, I experienced the operation of power within the project as complex and shifting.

In working with elite participants, they were typically very busy and it was apparent that they were fitting in the interview whilst having many other demands on their time. My efforts to engage with participants after the initial meeting was met with a limited response and only one participant commented on the analysis that I sent for review. My sense was that participants were motivated to take part due to their belief in the importance of the subject matter and a spirit of generosity in sharing their experiences. However, the interview was the end in itself, rather than the start of an evolving collaboration, the result of which was, at least during the recruitment/interview phase of the research, that I did not feel as powerful as I was expecting to feel - quite the opposite.

However, once in the transcribing and analysing phase of the research I was aware of power operating in the other direction. Now having sole ownership of the co-constructed dialogue, I was mindful of my power to interpret and shape the resulting analysis (which may not support the 'message' that the interviewee had sought to transmit). Even in putting substantial text on the page as is the case in narrative work in an effort to 'give voice' to participants, as noted by Honan (2014) it remains a power-laden process: 'We choose the words, we choose the placement of the words on the page, we choose the moment to capture, we guide the gaze of you, the reader, into the moment when the subject reveals 'all' (p.11).

To redress this imbalance (to the extent that it can be redressed) my intention was to invite participants into a collaborative relationship in which they would have the opportunity to read what I had written about them and respond to it. However, three of the four participants did not get back to me with comments on the analyses and I therefore found myself 'thinking for' my participants, imagining how they might react to what I had written and what they may retrospectively wish they hadn't said. One participant told me he had to be careful what he said, before proceeding to be very uncareful. When he didn't engage with my follow up, I found myself being careful on his behalf. This resulted in omitting aspects of the interview which I felt could compromise him. Whilst done in the spirit of protecting him, I was also silencing him (which paralleled his story). I would have valued an ongoing dialogue to enable us to negotiate this territory together. This was not an easy tension to resolve and required much discussion with my supervisors. I found myself as a researcher with the privilege of having someone else's words from which to deepen understanding of the subject matter, but also in a position of responsibility to do no harm. I struggled with the tension between giving voice and silencing,

ostensibly in the interests of the participant, but without always quite knowing what their interests were.

In discussion with my supervisor and in attempt to resolve this dilemma, I chose to present some of this interview in poetic form. This was a method of capturing the emotional charge of the participant's words without the surrounding text which would compromise anonymity (more of which below).

3.9 RECORDING AND STORAGE

Initial interviews ranged between 49 minutes and 78 minutes. One participant took part in a follow-up interview of 26 minutes. All interviews were conducted via Skype videocall and the audio content was recorded using a recording program installed on my computer. All files were stored in a password-protected folder.

3.10 ANALYSIS OF DATA

Having conducted the interviews, I then set about transcribing them before embarking on a close analysis of the texts. However, this process was somewhat more 'messy' than I had anticipated. Having spent considerable time exploring narrative approaches to analysis (which were frustratingly non-prescriptive - as a novice researcher I wanted to be told what to do!), I developed a layered approach which paid attention to the narratives both holistically and thematically around my research questions.

I was mindful that in practice analysis began before - and continued after - the formal operation of analysis had taken place. The analysis began during the interview process, in terms of a developing sense of the participant's worldview, points of tension and my own contribution to the narrative that emerged. After each interview I noted my initial impressions, feelings and thoughts, in a reflexive process similar to Interpersonal Process Recall (Kagan, 1980, 1984). This tracking was expanded further through multiple listenings through the process of transcribing. This immersive process meant that during the formal analysis using the transcription I could easily bring to mind the emotional tone and texture of the interviews.

After transcribing, I undertook four distinct readings of the material. This process was inspired by the Listening Guide (Gilligan, Spencer, Weinberg & Bertsch, 2003) and was a means by which to find different layers of interpretation and richness as outlined below:

1. Attending to themes and plot and from this constructing a summary of the interview. This involved listening with an emphasis on 'what' happened, to who and under what circumstances.
2. Attending to construction of identity and the ways participants draw upon (or resist) culturally available 'grand narratives'.
3. Attending to points of contradiction, tension and narrative incoherence.
4. Attending to the co-constructed element of the narrative, my contribution to the development of themes and stories both during the interview and through pre-existing ideas.

This process enabled the development of key themes, and a sense of an overall storyline, plot and story genre as well as enabling a close analysis of the construction of athlete identity.

However, the analytic process continued beyond this systematic method and did not occur in a time-bound way. A further layer of analysis occurred in a process of 'revisiting' which was enhanced by the prior immersion in the interviews. When I read an article or saw an interview with a sports person talking about mental health, I was often put in mind of things the participants had said and new connections formed as a result. Similarly, new readings of the material emerged in light of subsequent knowledge and research interviews. This was a dialogic and interpretive process continually 'on the move'. I tended to think of this stage of the process as 'voices talking to each other' and experientially was not bounded by application of a methodology.

When I found my analysis escaping the confines of my formalised method, I had a sense of getting it wrong. The rhizome concept was again useful here and captured my lived experience of the research analysis in the ways it resisted linearity and went off in multiple directions. Ultimately embracing this aspect of the analytic process also helped me to resist seeking neat or clear conclusions and allowed me to sit with the complexity of what emerged.

3.11 RELIABILITY, TRUSTWORTHINESS AND REFLEXIVITY

Traditional methods of establishing validity are not applicable in studies of narrative, which do not purport to represent an objective reality but rather represent a constructed truth. As such, neither the data itself nor interpretations of that data can be held to be objective and are themselves 'located in discourses' (Riessman, 1993:64). Rather than depicting historical truth, narrative inquiry attempts to understand the point-of-view position adopted by the narrator, in terms of the many possible ways of rendering the story and what this reveals of their values and interests.

Thus, issues of reliability are more concerned with 'trustworthiness' rather than 'truth', (Riessman, 1993:65). Trustworthiness pays attention to the integrity of the process. Rather than being an accurate mirror on to the world, narratives are seen as 'constructed, creatively authored, rhetorical, replete with assumptions and interpretive' (Riessman, 1993:4-5). Such accounts are arriving at what Spence (1982:31) terms 'narrative truth', which he defines as:

...the criterion we use to decide when a certain experience has been captured to our satisfaction; it depends on continuity and closure and the extent to which the fit of the pieces (of the story) takes on an aesthetic finality... Once a given construction has acquired narrative truth, it becomes just as real as any other kind of truth.

With the intention of establishing rigour I submitted my analyses to my supervisors for their reflections. Additionally, I invited 'member reflections' from participants (Smith & McGannon, 2018). This is in contrast to 'member checking' (Lincoln & Guba, 1985), an extensively drawn on method of establishing rigor within qualitative research which was rejected as it makes the assumption that validity is implied by agreement between author and participant as to accuracy of the interpretations, suggesting that there is a reality or truth to be accessed (Smith & McGannon, 2018).

In the event, one of the participants (Sara) responded to the final analysis of her interview. In a phone conversation Sara expressed that she had found my analysis very interesting and it appeared to have given her cause to reflect further.

However, I do consider the limited engagement of the other participants beyond the interview phase to be a weakness of this study and a missed opportunity to develop further the stories that emerge from it.

I am also conscious that whatever 'trustworthy' rendering of the story emerges, it remains contained within the particular moment of telling and interpretation that follows. I note that as the researcher I will inevitably bring my own experiences to my interpretations and that the research interview is a co-created dialogue 'between aspects of ourselves and aspects of our participants' (Josselson, 2011:42). I therefore adopt a reflexive approach to research in which I aim to be explicit about my contribution to the process, and the ways in which my own experiences and contexts inform the inquiry (Etherington, 2004).

Further, the positions that we take up as researcher and participants are not static (Hydén, 2013) and as we have new experiences could take up different angles of interpretation (Andrews, 2013), or story an experience in a different way. As such, we are not arriving in

narrative work at a 'final' rendering of a story and our conclusions remain provisional. Whilst in some respects this can be seen as problematic, it also speaks to the vitality and creativity within narrative research which remains open to new meanings when viewed from different vantage points and points in time (Hydén, 2013).

3.12 MANAGEMENT OF ETHICAL ISSUES

With regards to ethical issues I have considered issues of informed consent and the right to withdraw, as well as confidentiality, avoidance of harm and procedures for dealing with distress. I take an 'ethics as process' approach and adopt the principles outlined in the British Psychological Society (BPS) Code of Human Research Ethics (2014) from the perspective of conducting ethical research with 'informed moral reasoning, founded on a set of moral principles' (BPS, 2014:7). These are specified as: 'Respect for the Autonomy and Dignity of Persons; Scientific Value; Social Responsibility; Maximising Benefit and Minimising Harm' (BPS, 2014:7).

I obtained consent through providing an information sheet (see appendix) outlining the purpose of the research as well as potential advantages and disadvantages of taking part and confidentiality and its limitations. Within narrative research, given the unique nature of individual stories, a participant may be identifiable to those familiar with their story, therefore anonymity cannot be guaranteed in a study of this type. This was highlighted in the information provided to participants and revisited at the start of the interview itself.

Participants were provided with the information sheet/consent form once they had expressed an interest in taking part, and asked to review it before reaching a decision. Participants were then asked to sign and return the document. In accordance with British Association for Counselling and Psychotherapy (BACP) guidelines (2004), participants were informed of their right to 'modify or withdraw their consent at any point during the research, including following the completion of data collection and analysis' (Bond, 2004:12). This was important given it is not always possible to anticipate the direction the research may take, bringing into question the extent to which consent can be 'informed', a tension noted in the BACP ethical guidelines (Bond, 2004). I paid attention to the suggestion that best practice sees consent as a process requiring review at stages within the study and gave participants the opportunity to view what I had written about them prior to inclusion in my final work.

As noted, one participant was excluded from the study. The participant had not remembered to complete this document prior to our interview (though confirmed it had been read and understood) and stated he would send it later. I proceeded with the interview, obtaining verbal

consent, but the written agreement was not forthcoming. Whilst audio-recorded verbal consent is often the norm with research undertaken online (Deakin & Wakefield, 2014) and met the requirements of the BPS code of human ethics (2014), there was an understanding between us that the written consent would follow and in failing to provide this, I felt that consent was ambiguous and the interview was therefore excluded from the study. The interview was with someone whose story was already in the public domain and therefore I thought it unlikely that the content of the interview was problematic. My sense was that this was more likely a reflection of an ambivalent engagement with the process but, as noted by Josselson, (2016:23) '*all interviews are interventions*' and there was some discomfort in not knowing the impact the interview had.

Whilst several of the participants had already spoken publicly about their mental health, it was nonetheless important that I continue to hold awareness of what can happen when a story moves from one domain to another (Hydén, 2013). Approaching those who had already spoken out was recommended in my Programme Approval Panel discussion as a means of minimising the risk of harm to participants. However, in practice, this was problematic as those whose stories were in the public domain were potentially recognisable from their stories. Whilst some of what they told me had already been part of a public story, other elements had not and these potentially sensitive pieces would now run the risk of being attributable to them.

Consequently, issues of anonymity required considerable reflection and discussion with my supervisors and participants. All participants were sent the analyses relating to their interviews and provided with further opportunity to review their position on anonymity. In practice this meant that in one case I changed the sport in question (and other minor identifying features of the story) whilst remaining faithful to the events and circumstances of the individual's experiences. Whilst this is a limitation in that the study cannot provide sport-specific recommendations, anonymising in this way has value in enabling stories to be told which would otherwise have been silenced.

3.13 POETIC REPRESENTATION

As noted earlier, I also made use of poetic representation to address issues of anonymity in another case in which I had omitted data for confidentiality reasons. I will detail further the rationale for this decision within the section relevant to the specific participant (Peter). However, here, I will briefly outline the process by which I composed the poetic representation.

In composing a poetic text, I was guided by the work of Douglas and Carless (in press), Miller (2018) and Richardson and St. Pierre (2005). My engagement with poetic inquiry was

undertaken in the spirit of experimentation and in the hope of adding something meaningful that was not accessed through conventional analysis. I acknowledge that I am making use of poetic inquiry in a limited way and also acknowledge my limited skills in poetry. Given my trepidation at working with poetry, my supervisor suggested I consider not so much is this a 'good' poem than, what is it good for? My hope here is that it will be good for expanding and enriching understanding of this participant's emotional experience. As noted by Galvin and Prendergast (2015: xv):

Here understanding is never simply cognitive: thinking is never alone, feeling is also there – a personally recognisable connection or resonance that makes possible an experiential 'to be struck by' something. It is in this spirit that an aesthetic and poetic sensibility opens up the possibilities of relational engagement with poetic renderings and through which we can come to understand something freshly and deeply.

I followed the guidance offered by Richardson and St. Pierre, (2005: 974), who suggest:

Experiment with transforming an in-depth interview into poetic representation. Try using only the words, rhythms, figures of speech, breath points, pauses, syntax and diction of the speaker. Where are you in the poem? What do you know about the interviewee and about yourself that you did not know before you wrote the poem?

In crafting the poem, I began with highlighting segments of the transcript that were particularly evocative. During Peter's interview he spoke extensively about the experience of athletes and others working in performance sport as well as his perspectives on the detrimental effect of sports culture. However, he also spoke about the impact of his work upon his own mental health. These were the more emotionally laden aspects of his narrative, but ones I was also unable to include in depth as to do so would have brought in wider context that would compromise anonymity.

As I went through the transcript noting the sections which had emotional impact, I noticed the shift in the way I was engaging with Peter's words. When speaking to me, there was the sense of rushing through his story, getting it all out. There was little chance to interject or ask questions. Working with a poem had the effect of slowing Peter down. Indeed, as noted by Miller (2018:384), 'poetry encourages a slower, multisensory, and almost visceral engagement'. 'Lifting' the resonant phrases from the page in this way brought richness to Peter's experience and allowed for an emotional connection.

Two lines struck me as coming to represent the central dilemma of the poem. 'I have to be careful' and 'I can say what I want', and brought the tension between silence and speaking out into sharp focus. I came to think of these as representing different 'voices' or self-positions. At this point I had already completed my formal analysis and found the 'voices' a good fit for the rescuer and victim of the drama triangle that I had spoken about in my analysis (see below). I separated these voices on the page into different columns to create a visual representation of the contrast. Putting Peter's words on the page in this way was with the aim of bringing to life the movement between these identities, one ready to fight the system, the other alone and vulnerable.

In crafting the poem, I maintained the chronology of Peter's words – Peter had told his story in a chronological form in any event- and then edited the lines for the purposes of rhythm. Mostly this meant the removal of pronouns.

The final line of the poem was placed centrally to visually demonstrate an integration or dialogue between the two self-positions. This line was a response Peter had given to a question he'd been asked in another context: If the self of 2018 could write a letter to the self of 2013, what would he say? In that sense, it was a dialogue between different selves and used similarly here.

Finally, I gave the poem a title: 'The fight', which represented the internal and external conflict between competing self-positions as well as his fight against 'the system'.

I gave the poem to several people to gauge its impact. Those who read it strongly identified with the experience of isolation and loneliness and it caused them to reflect on their own stories. One reader talked about the different responses to exclusion - defiance or being 'beaten down' and turning against the self. She noted how at times of exclusion she fluctuated between these positions, as they similarly co-exist in Peter's story. Another reader questioned the risks of fighting back in terms of deepening isolation. One reader said Peter should 'toughen up', adopting a familiar stigmatising attitude towards mental health issues and expression of vulnerability. Emotional responses aren't only empathic but can also be resistant and dismissive. I would suggest that such responses are also valuable in connecting readers with their own conscious and unconscious beliefs about mental illness.

I took the view that including the poem was an important addition to the work in enabling a closer resonance with the emotional experience of Peter and helping us to recognise the cost to him of working in elite sport in terms of his mental wellbeing.

CHAPTER FOUR: ANALYSIS

In the following sections I present each of the participants' narratives in turn. I begin with Peter, who has worked in a welfare role within sport. His narrative offers a broad picture of the sports context which operates as a frame for what follows. The further three narratives are presented in the order the interviews were undertaken. All names have been changed in relation to participants and others who are mentioned. Where an organisation is named where it would be revealing of the participant's identity, this has also been omitted.

At the outset of each interview I have briefly recounted how the participant came to be involved in the study and the context of the interview, as well as some of my impressions and responses which are not captured by the text. I have not provided details about my participants in terms of age, ethnicity etc. in the interests of confidentiality.

I have presented the interview data through summarising parts in my own words, along with – at times extensive – extracts from participants. As is usual in narrative research, my intention was to minimise fracturing of the text in order that the narrative could be analysed holistically. The analysis retains the chronology of the interview, the back and forth between themes which build upon each other and integrates thematic, structural and performative elements as they relate to the experience of mental health problems and the construction and performance of identity. This may create a sense of messiness to the analyses but this mirrors the experience of meaning-making which is negotiated, meandering and incomplete.

4.1 PETER

I contacted Peter having heard an interview with him in which he'd spoken about his experiences working with elite athletes in a role which concerned athlete welfare. We met via Skype. He was in his parents' house. Moments after we began, he stopped to close the door so they couldn't hear what he was saying. He had a warm, amiable manner though there was also something a bit 'no-nonsense' about him. He told me he had to be careful what he said, but wasn't very careful as far as I could tell. It seemed that something about my identity as researcher and psychotherapist invited trust.

I had already spoken on the phone to Peter prior to our call so we had something of a rapport already established. I began our conversation asking how Peter was doing and recapping on the confidentiality arrangements. We segued naturally into the research topic as the discussion around confidentiality led to Peter talking about his experiences in sport in terms of the consequences for himself and others of speaking out.

Speaking and Silence

Peter began our conversation expressing his frustration about the controversial World Anti-Doping Agency (WADA) decision to reinstate Russia to international competition, which coincided with the timing of our interview. He questioned why those in positions of power within sport had not opposed the decision and interpreted this as a consequence of the lack of genuine independence between different organisations within the field. Peter painted a picture in which no-one could say anything for fear of upsetting someone else who they needed for some other purpose. Peter told me how being outside of the system now (he'd left his job recently) meant he was able to speak more freely:

P: So one of the things that's been a great help to me recognising that being able to speak comes with a degree of responsibility is that I can say what I want, because I'm not limited by the bloody funding model.

Peter went on to tell me about the ways that athletes are silenced, which he linked to their lack of employment rights which prevents them from speaking out for fear of bringing the sport into disrepute and potentially losing funding:

P: There is then a 38 page funding agreement the athletes sign. Now the athletes are very good at doing what they do, they're not very good at reading 38 page legal agreements, but the bit that's in it that they will pick up says that if you do anything that we believe brings our sport or sport into disrepute your funding is at risk [mmm]. So that's why they're not going to speak out and when the system says, 'Oh so and so is only speaking out now because he's been kicked off the programme' it's because they had no employee rights and because they were fearful of losing their funding.

Here, Peter talks about the distribution of power and the ways in which the system operates to silence those within it. He presents a narrative in which the 'system' is pitted against the 'athletes'. The system controls the athletes through funding, rendering athletes unable to express their concerns. When they speak out, they are undermined and discredited by the implication that they are disgruntled. Peter expresses that it is only by being outside the funding model that both himself, and athletes can express themselves freely. In making this assertion he suggests that power lies within the system and positions himself and athletes as operated upon by the system rather than being themselves part of the system.

Good Guys, Bad Guys

Peter went on to tell a story in which he acted as mediator on a selection dispute between an athlete and selection committee which resulted in a resolution enabling the athlete to qualify for the Olympics.

P: ...and I came out of the this meeting, I'd only ever met this guy four hours previously and I couldn't, I couldn't, didn't want to get him off me because he was in floods of tears [mmm] 'I don't know what I'd have done without you, Peter' which, other people could have done it, but he couldn't have done it without some intervention. This guy went on to be a GB number one within a month, because the pressure had gone, he made the long list in February and he can forever, ever, ever, call himself an Olympian because he got picked.

Here, in conveying the power dynamics in operation, Peter employs the 'drama triangle' (Karpman, 1968) as a narrative device. The drama triangle model is often used in psychotherapy to understand conflict dynamics and positions people as victim, perpetrator and rescuer. In Peter's narrative, the 'system' is positioned as the perpetrator, the athlete as vulnerable victim and Peter as the rescuer. Here and throughout, the version of 'athlete' that Peter talks about is vulnerable rather than embodying the 'superhuman' qualities often emphasised in media portrayals.

Peter persuades the audience of the credibility and authenticity of his account through quoting direct speech and the positive opinion of the speaker. Peter suggests a causal link between the intervention of the 'rescuer' against the system in the improved performance of the athlete who goes on to achieve a dream of being an Olympian, the significance of which is underscored by the repeated use of the word 'forever, ever, ever...'

Peter went on to tell me about his attempts to build relationships with NGBs and other organisations within the system in the service of athlete welfare, which was met with resistance:

P: The system thought it was brilliant cos it's just won loads of medals [mmm] and the system thought it was brilliant and had done this without our help so the approach to us was varied from some of the good guys... 'Peter, I think it's very important that the athletes have got somebody to turn to, you'd be very welcome' but the majority were, 'You're who? From what? Bang! Phone down.

Peter presents the system as (largely) concerned only with medal success and continues to convey his narrative in terms of good guys and bad guys, those who are concerned for athlete wellbeing and those who aren't. The person who agrees with Peter's input is conveyed as 'one

of the good guys' developing the idea that Peter himself is one of the good guys, pitted against the 'bad guys' of the system.

Peter underlines this further in telling me about his attempts to address some cultural problems which had come to his attention but was met with resistance on the basis that the sport in question was very successful in terms of medals. Peter goes on to tell me about a period in which there was an escalation in numbers of people seeking his support:

P: I go on holiday, I come back the phones ring and they don't stop ringing for two weeks...now I've got 30 athletes in two sports making systemic allegations about harassment and bullying and discrimination and of course the system, was.... 'Aren't we great' and 'We're gonna go again in Tokyo' and all that bollocks.

Again, the system is presented as being concerned only about medals, with little consideration for the personal costs to athletes. Peter also draws attention to the effect of success on the way the system (and by extension those within it) think of themselves, the pride and self-esteem derived from performance outcomes at an organisational as well as individual level. Success is understood in singular terms as equivalent to medals and where there is a tension between welfare and performance the tension is resolved in the system by ignoring the welfare concerns. Peter portrays the system as enacting the 'performance narrative' with an exclusive concern for winning. Peter positions himself outside this narrative, referring to 'all that bollocks'.

As Peter was talking, I was aware of the polarisation of 'good and bad' and experienced a strong invitation to be 'on his side'. Mindful of this, I noted the development of mental health strategies within sports organisations recently. Peter was dismissive of these and saw these as reflective of lip-service rather than meaningful change. I was conscious that these initiatives did not fit the narrative that Peter was presenting.

Isolation

Peter demonstrated a strong awareness of the performance narrative without aligning himself with it. However, in resisting it, he found himself isolated and marginalised:

P: I was left alone and left alone and left alone.

Peter told me about the impact of this on his own mental health and described a period in which he struggled with high anxiety and depression. He ultimately left his role:

P: And I was done, because I was without exaggeration, dealing with people who were very mentally poorly as a consequence of what they'd gone through [right, yes]...Front of house it was business as usual but interestingly, when I spoke to CEOs or PDs or coaches, and I talked about my, I talked about my circumstances, I had no problem talking about my mental health...so I was talking to these guys, as I say, senior people across the spectrum of sport and they were all, 'I know three people like you.' 'I know exactly how you feel Peter because I'm on 350 milligrams of something'. [right] 'Peter, I know six pints a night isn't great but that's the only thing I do to survive in this world'. So I, so I got out...

Peter moved from talking about his personal mental health to that of others in the field. The implication is that the field itself and the way it operates renders those within it susceptible to mental health problems. Whilst mental health issues are often thought about as individual phenomena, Peter presents them as social phenomena, an inevitable consequence of working (as athlete, coach or administrator) within a system which has an exclusive focus on winning. At this point in Peter's narrative it is no longer clear who or what the 'system' is. Earlier in the narrative the CEOs of NGBs and senior people were part of the system in resisting his efforts to address athlete welfare. Now they are also victims of the system, struggling with their own mental health.

It seems that Peter is suggesting that those within the system both perpetuate it and become victims of it. There is no longer a neat divide between the victim, perpetrator and rescuer of the drama triangle. Peter has moved from rescuer to victim, other senior figures have moved from perpetrators to victim. This draws attention to the ways in which individuals in enacting a particular unitary narrative (in this case the performance narrative) become part of the oppressive system which acts upon themselves and others. In Peter's narrative it seems that someone is 'the system' to the extent that they are perpetuating the values of the system.

It is also of note that Peter links his own mental health problems to the isolation and lack of support he was experiencing whilst endeavouring to support others who were 'very mentally poorly.' It could be suggested that Peter was vulnerable to, or experiencing, vicarious trauma, as he was exposed to trauma stories from others with no support system to process the emotions that arose as a consequence.

These things called Athletes

At the conclusion of our discussion, Peter returns to the relationship between athlete welfare and the competing demands of the performance narrative:

P: I fought very hard about raising the profile of athlete mental health which clearly the system doesn't like because the system says, 'We're terrific, we won 149 medals in Rio.' And that's how it talks, 'You know that we won 149 medals.' It doesn't say, '132 athletes were successful in Rio.' It talks about the commodities of medals, [yes] because medals equals funding. [yeah, mmm] And in order to get this funding and get these medals, they need these things called athletes.

At the outset of the narrative and throughout, Peter returns to the funding model as the characteristic of the system that serves to silence and oppress. Peter notes the 'commodities of medals' in which success is quantified in numbers of medals won, the product of a system rather than the individual efforts of the athletes within it. Athletes' value rests on their ability to produce medals and the value of medals relates to the production of funding. And funding is how everyone stays in a job:

P: Everybody's, everybody's existence is contingent on medals and it's reviewed every four years. So, it's not like you went and joined the Post Office or whatever. The, your status and your ability to put food on the table for your family is reviewed every four years. That's pressure.

Here Peter highlights the dilemma for those who work or compete in elite sport. The 'winning is everything' mentality characteristic of the performance narrative has a broader application than to the self-identity of the individual in terms of how they see themselves. It also relates to their ability to perform that identity. Without funding, those who earn a living in elite sport are unable to work or compete, highlighting the potential risks and costs of resisting the performance narrative. Prioritising athlete welfare can be seen as a form of resistance, but one which, Peter has discovered, is costly.

Reflections

My experience with Peter was that he was telling a story, at least parts of which had been told many times before. My impression was that the story and associated meanings had been 'finalised'. He had done work to process and make sense of his experience and had achieved 'a story to live by'. Peter had a 'moral of the story' for me to take away; he had explained that he particularly wanted to get across the challenges for coaches and others working in sport who did not have representation or welfare support available to them.

However, within Peter's story there were also other elements which captured the pain of isolation and the personal cost of positioning himself outside the performance narrative. When

I read my analysis, I was aware that some of this emotional depth had been lost. The content of the analysis was limited by concerns around anonymity and this meant that I did not include material which I felt might compromise Peter. I was also mindful that being silenced was a part of his story and did not want to inadvertently reinforce this experience through silencing him in this project. In discussion of this dilemma with one of my supervisors, we considered other ways of representing Peter's experience. To address this, I composed a poem from his words which I include below.

The presentation of the poem on the page conveys the different 'voices' or self-positions that were evident in Peter's narrative. The final line represents an integration of these voices, one talking to the other.

The Fight

I am not popular

Don't conform to their narrative

I have to be careful

I can say what I want

I am big and ugly and been round the block

I knew I was being isolated

Head's going flaky

Left alone and left alone and left alone

I had to fight

I was in a mess. I was in a mess

Knew I was done

Every time I closed my eyes

Horror films

Stood in the corner and felt nothing

I'm not finished here

Going back in again

Back in for more

Trust yourself, you can do this

Learning

Peter's narrative demonstrates the dominance of the performance narrative within the sports system as a whole and presents an understanding of how this narrative is transmitted throughout the system. Options for alternative discourses are limited and silenced and Peter finds himself isolated through resisting the performance narrative. Peter's own mental health suffers as he attends to the wellbeing of others without support. His story highlights the ways in which sports culture can operate to silence those within it and contribute to the stressors linked to mental health problems. He additionally draws attention to the ways in which the relentless nature of elite sport, the focus on performance outcomes and the dehumanising of the workforce serves to create spaces for emotional distress and unhealthy cultures, in which performance is prioritised at the expense of wellbeing. Peter's perspective calls into question the extent to which the performance goals and welfare goals can co-exist in elite sport. Peter's insight adds to research in this field through the telling of his story from a non-athlete perspective, providing a broad and culturally sensitive perspective on mental health in sport.

4.2 JAMES

James met with me two years after his retirement from professional rugby. He played for a top domestic club and at national level.

I found James on twitter and contacted him directly. He got back to me the next day, describing himself as very busy but also saying that he'd 'love to help'. We scheduled a Skype call for the following week.

Straight away James had a warm and friendly way about him. I was struck by his openness and generosity, how he talked about his family and his childhood and things that went beyond sport. He told me his story and told me to 'do with it what you will'. He had entrusted me with it like a gift that I could use for my purpose.

I listened to the interview many times when transcribing. I was aware of the flattening effect of the transcription process, the loss of the texture of his voice and the pauses – moments of quiet emotion. Occasionally he would turn and ask his wife (out of view) something, confirmation of some forgotten detail. I thought how unhidden he was and how striking this was when he told me his story and the sense of having hidden for a long time.

We talked at the beginning about confidentiality and anonymity. James told me that he didn't mind if I named him or not. I chose not to, but was grateful that he had made this indication of

comfort with his story being public which guided my decisions around anonymising later in the process. I was also mindful that James spoke to me in some detail about his family relationships and I included extensive transcript and analysis relating to his family in an earlier draft. However, in discussion with my supervisor we wondered about the potential implications for James and his family in including this element, given the potential for those mentioned to recognise themselves. Although I am aware that James has spoken about his family in other contexts, I decided to limit the content here. I was aware that the stories that are told are not final renderings, that the relationships in question are ongoing, and conscious of the potentially finalising effect of committing something so sensitive to the page. In making this decision (James had not responded to an email requesting his input on this) I was mindful of Clandinin and Connelly's (2000) suggestion to: 'work through with our participants, as clearly and in as many ways as we can, the possible future plotlines of the stories that may unfold from these decisions concerning anonymity' (p.175).

Breaking Down

I began the formal part of the interview by asking James when he first became aware that there was a problem.

J: Erm (pause) it's a tough question because I don't think I ever really, I don't think I ever really found out...it's one of those things that retrospectively you look back and you realise [mmm] but until you actually, until you almost have that sort of epiphany moment or something where you're told that it might be an issue, and then you sort of, you can work it out yourself. It's very difficult to, from my perspective it was probably something that stems back a long way really but erm, the one point where it all sort of rammmed it home was erm, on a, erm, erm, a pre-season tour [uh-huh]. And then, ah, it didn't help that I was going through a separation at the time, erm, so I was in a pretty dark place anyway and then erm the, the doctor, the doctor's been monitoring me from afar, [mmm] erm, my mental wellbeing I suppose and er, and, and took me to one side and just asked me how I was feeling and how I was going and obviously in a rugby environment that wasn't em, you know, I took erm, em, not exception to it, but I was like, you know, nothing's wrong [uh-huh] and then he asked me again and then I broke down. Erm, without knowing it was going to happen. I had no control over it. It just em, em, I dunno, just it, just all spilled out [mmm]. So em, I suppose at that point, when you know I suddenly realised that I wasn't particularly well. Erm.... it's quite hard to talk about, sorry [That's okay]. Er, yeah, so I realised I wasn't particularly well, erm and er, erm, he erm, at that point you know it was difficult cos we were abroad, we were abroad but he prescribed me citalopram and obviously the medication and er told me to er, you know recommended I potentially go

and see a counsellor [mmm] and I, then forcing myself to go and see a counsellor probably then allowed me the, it was the vehicle that allowed me to, em, er what, what am I trying to say? Allowed me to express to myself I suppose that I could, and work out in my own head that I had a, that I had an issue and em, you know over a period of weeks and months you know constantly going back on a month...daily, sorry on a weekly basis to the counsellor [mmm] and the medication, suddenly, not suddenly, you know I worked out it's probably around, something I've always had if I'm honest and ever since I can remember and ever since I can remember being at school and you know, being very, having a massive lack of confidence and being pretty introverted [mmm] and em, em, so it, yeah, so it goes back I think a very long way....you know, the one moment, the one point where it all sort of came crashing down was that point when the doctor, and all the doctor asked me was, he literally took me to one side and said, 'How you feeling?' [mmm] (laughs) [laughs] and I just broke down...amazing just that one, one question just broke me...so probably then is the moment but if I'm honest it's always been there.

James describes a moment when his issues came into his awareness. He conveys the lack of control over 'it' (meaning his emotions) and an experience of 'spilling out' emphasising the lack of agency he experienced in this moment in which he 'broke down'. James presents this as an epiphany moment, which enabled him to understand himself as unwell, and reframe his past experiences of low confidence and introversion from within this perspective.

James's narrative is hesitant at times and he corrects himself as he speaks: 'what am I trying to say?' This occurs immediately after having an emotional moment where he mentions it's difficult to talk and he loses his thread for a while.

James talks from a second-person perspective early in the narrative, which can be thought of as a way of distancing from the material, before moving into a first-person account of the conversation with the doctor, which brings immediacy and signals the start of a story. This represents a key moment which enables James to understand himself and his past from a different perspective and bring something previously unacknowledged into awareness.

James references the unusual nature of the doctor's question in the context of the 'rugby environment'. The question is therefore presented as 'off script' and James's first response is to resist this and maintain the script of the hypermasculine rugby environment in which vulnerability is denied. However, the doctor continues to challenge the script by asking for a second time. In doing so, the doctor has resisted the norms of the rugby subculture and enables space for the communication of vulnerability and an unacknowledged (though ever-present) aspect of James's identity to be spoken into being.

James says that one question 'just broke me'. In his use of the term 'breaking down' he describes more than just a loss of control emotionally, but also a breaking of the performance of being a rugby player, replete with assumptions around what can be expressed and what cannot, enabling an upspoken story to be told.

Not Being Me

Later in the interview James talks about what the doctor may have noticed about him that would have caused his concern:

I remember at the time being very sullen I suppose and I...one of my defence mechanisms is em, kind of to take the piss out of myself and to be the sort of the em, em, butt of the jokes and things [mmm]. and it's always been that way, you know, 'James is a good lad he can take a joke' and er, erm, you know, I was definitely 100% playing up to that and that was my defence mechanism and almost my way of being part of the crowd if you like and but I remember at the time just not being able to, not being able to, almost being offended by having the piss taken out of me, em, and getting angry about it, so I do remember being quite sullen about things when it all sort of came to a head, or just beforehand, and er, not being me I suppose.

James here describes the way he usually functions in a rugby environment. Taking up the voice of his teammates in direct speech, 'James is a good lad, he can take a joke,' serves to offer the perspective of how he is seen by others as well as himself. From this perspective being a 'good lad' is synonymous with being able to 'take a joke' and engage in the banter typical of the rugby environment. By participating in this social ritual, James gets to be 'part of the crowd'. By describing this as his 'defence mechanism' James portrays an awareness that engaging in the rugby culture in this way also serves a function of protecting him from feelings of low confidence and introversion. When his emotional wellbeing deteriorates, James appears to become sensitive to the jokes which he previously understood as an affectionate way of relating (later in the interview he informs me that in rugby culture taking the piss out of someone is evidence of liking them).

Here James's 'defence mechanism' (as he describes it) is no longer functioning to maintain his status as one of the group and instead sets him apart and leads to him 'not being me'. There is a point of tension as James divides his identity into 'me' and 'not me'. Whilst earlier recognising that the issues he experiences have always been there, later when they are more foreground he feels 'not me'. This could be thought of as an aspect of his identity that is 'not me' within the context of his usual performance of the role of rugby player.

Being a Failure

SH: Yeah...and when you know, you broke down and recognised there was something wrong, erm, how did you, I dunno, how did you feel about that? What was that like?

J: Pretty fucking awful to be honest (laughs) [laughs] [sure] um...um...just felt, pretty helpless if I'm honest, just, er, just felt like a small boy, a small child [mmm] and then em, yeah, just felt very em, it made me feel worse. erm. Just, yeah, just horrendous really, I just felt very weak and feeble and em, em like I'd let everyone down I suppose [uh-huh]. Er, er, yeah. Just a failure, a complete failure actually.

James uses numerous adjectives to convey the strength of feeling which accompanies the realisation (awful, helpless, horrendous, weak, feeble, failure) that he was experiencing a mental health problem. These exclusively negative feeling states coalesce around feelings of weakness which James equates to complete failure.

James's experience of emotional distress represents an immediate challenge to his identity as a rugby player. The terms in which he describes rugby throughout the interview are filled with references to hyper-masculine ideals, shows of (physical) strength, negation of vulnerability and group bonding being achieved through banter. James's admission of vulnerability threatens his identity of rugby player and the characteristics of which that identity is comprised. The failure is both in terms of the personal characteristic of being weak, as well as the relational aspect of letting down others.

This loss of identity is suggestive of traumatic fragmentation, as James no longer can access a sustaining self-image. Although trauma in relation to identity loss in sport is generally related to career termination or injury (Wippert and Wippert, 2008), in James's experience, failure to live up to the prevailing ideals of a rugby role similarly poses a threat to identity.

In equating himself to a 'small child' (amongst men) James conveys his sense of difference, isolation and inadequacy to meeting the challenges he is facing and implies the need for the supportive parent metaphorically or in reality. However, the shame implied in expression of weakness prevents James reaching out. Here it is possible to recognise how high the stakes are for James in allowing his distress into his awareness and allowing others to become aware of it. As such, it is unsurprising that this aspect of his experience is resisted.

The Weak Link

We went on to discuss how James came to feel like a failure. He located this in the rugby environment in which he had been socialised from a young age and the affectionate bonds which are expressed through banter and 'piss-taking'. There is some tension here as James clearly derives huge enjoyment from this form of interaction. He arrives at the idea that the realisation of his unwellness set him apart from others. That everyone else was okay and he was not:

J: Well I didn't see anyone else like that, so it's not the environment I was, I'd been in for 15, 20 years em, I've never seen anyone like that, reacting that way, so I was, I was kind of the odd one out [right]. It did, it made me question myself as a bloke and as a player and as an athlete and it made me question myself hugely about why I was there and was it worth it and em, em, but yeah, it made me think...like I said I didn't see anyone else like that so why the hell have I done this and Christ, that must mean I'm the weak link. Erm, so yeah, that's pretty much it.

Given that expression of vulnerability was outside of the norms of rugby culture in James's experience, and weakness (as defined as both physical and mental health issues) was routinely hidden and denied, James unsurprisingly had not been exposed to others who were having similar experiences. Instead, the socialisation within the rugby subculture would appear to have operated powerfully on those within it restricting the identities that can be performed. Those experiences which sat outside the dominant identity of rugby player were silenced and hidden. In finding his experience not matching what was expected of him, James found himself in a crisis around his identity, questioning himself as a 'bloke', player and athlete, arriving at the conclusion that he was the weak link.

I notice that James's identity is threatened by seeing himself as different from the group in terms of the characteristics he displays socially rather than in a performance context. Nowhere in James's story does he express concern that his sense of failure relates to performance (although he does later talk about his belief that he would have performed better had his mental health been better). His sense of weakness and failure relates to his ability to perform the identity of rugby player as it is expressed in hyper-masculine characteristics of invulnerability. This is not to say that James does not prescribe to the performance narrative (at points in our interview he strongly expresses his desire to win, competitiveness and devotion to sport). However, this does not appear to be the primary narrative that is threatened by his awareness of his mental health problems. Rather, it is the relational aspects of rugby, the sense of belonging and ability to embody the expectations of masculine culture which are primary.

Can't Show Weakness

When thinking about the evolution of his identity of 'rugby player,' I asked James to explain what he meant by 'rugby environment', a phrase he had used early in our conversation:

J: Well, I think it's a bit of a cliché, but it's also true, you know, erm, it's, it is a pretty intense environment to be involved with and it's you know, big highs, big lows [mmm] em, and it's incredibly physically demanding and full-on a lot of the time, so you know, for want of a better expression, I mean, you're getting paid to get beaten up every day, erm, er, and you know when you're in that sort of environment it's very difficult to express anything other than aggression [mmm] and banter I suppose and piss-taking and er nothing ever, nothing with...there's no way of, there's no outlet to, erm, to express that type of emotion really. It's, erm, it's a kind of an admission of guilt, anything that was erm, an admission of weakness anything that was...you know, even from little things like, you know, injuries [uh-huh] you know you hide injuries from fellow players, you hide injuries from the physios, from the coaches as much as you could, so it's not really a stigma about, em, mental health so much, it's just a stigma about not showing weakness and not giving your shirt up and not allowing the guy that's behind you, your ..the ability to take your position. It's a really, really intensely fiercely competitive environment [mmm] where you almost cannot show any weakness, whatever that weakness is, and it doesn't matter if it was an injury or a, mental health, you know, you can't show that because em, you might not be playing at the weekend.

Here James notes that showing emotion or a form of vulnerability in terms of physical or mental health amounts to an 'admission of weakness'. The term 'admission' highlights the strong prohibition against such expression. The risk in 'showing weakness' is related to potentially losing your place in the team. As such, expression of emotion is limited to expressions of aggression, and vulnerability is routinely hidden.

J: so you were constantly under that threat [mmm] of em, being, you know having, not having a job, you know, which is...everyone has that, everyone has that. I understand that, but it was, but accompanied with the huge pressure that you're constantly under and the, you know the goldfish bowl element, you know, everyone's looking in at you, and it's em just very, very, very high pressure, I found it very, very high pressure.

In James's perception, there is a tangible consequence of being seen as 'weak' beyond how this sits alongside the rugby player identity. To be 'weak' can be detrimental to your career (at least as perceived, this was not tested). This creates an environment which is inherently insecure. I find it useful to reflect on this in relation to attachment theory (Bowlby, 1969;

Ainsworth, 1973) which researchers have recently applied beyond the parent-child dyad to include applications to cultural and organisational settings (Yip, Ehrhardt, Black & Walker, 2018). From this perspective, James's experience in his club would be reflective of an insecure attachment. The organisation occupies a parental role but cannot be relied upon to be a source of support and comfort at times of distress.

Feeling Human

The sense of insecurity extended in James's account beyond not being selected to include the consequences of injury:

J: There's careers been cut short instantly, in an absolute heartbeat, you know in one tackle, in one side-step when your knee goes, a tackle when your shoulder goes, and that's it, gone, your career completely and utterly over.

He told me about being in a game in which a player broke his neck, resulting in paralysis, and a growing awareness of his own vulnerability to injury, and the shift from playing with 'a reckless abandon' to 'the older I got, the more I started to feel human'.

James describes being worried about the physical risks of the sport and at times aware that it was on his mind such that he wanted to 'get this out of my head', but ultimately 'just got on with it', and noted that feelings of anxiety were not expressed.

James describes struggling to control thoughts about physical injuries adding to the numerous sources of insecurity inherent in his career. There is a point of tension here, again residing in the invulnerable/vulnerable continuum, which left me wondering if there is no room for vulnerability in sport because to acknowledge the vulnerability (physically) would make it unplayable. Instead it has to be closed off, put aside and ignored. James considers himself weak that he is unable to ignore and put aside his anxiety about the physical risks. Again, here rugby demands a denial and a 'reckless abandon', whilst James is simultaneously aware that his career could be over in 'one tackle'. These aspects cannot be processed or thought about. James is required to feel superhuman, but instead feels human. This is an unresolved aspect of his identity. To accept the vulnerable (depressed) side of himself, James needs to accept his humanness, but in the 'heat of battle' this needs to be swept aside and the solution only to 'get on with it'.

James's reaction to witnessing another player incur a serious injury includes intrusive thoughts of possible risks and limited strategies for managing this. This response could also be

suggestive of vicarious trauma. As noted by Day (2018), the relational, ripple effect of trauma is rarely discussed in sport, often leaving traumatised individuals with avoidance as the only coping strategy available to them.

Part Of My DNA

James presents with high athletic identity:

J: I still, I might be doing something else now, but I still think of myself as a rugby player... and, you know I don't know what I'd do without rugby. I don't know what I'd do. It seems weird. It's only, it's only a game, but it's been part of my life since I can really remember [mmm] so to not have it in my life would be, would be, would be, not who I am. Erm, so, I, I need it in my life. There's almost like that, that, dread that you, you know, that fix that you need that em...I just need that. and I need to be part of that environment it's almost part of my DNA. I know that's a corny thing to say...

The intensity of James's athletic identity is very pronounced. In describing rugby as part of his 'DNA' he is essentially saying it is fundamental to his sense of self and his enjoyment of life. Interestingly, whilst James talks about the 'need to be part of that environment', his relationship to the environment appears to be a point of tension. Whilst he has highlighted numerous problematic aspects of the rugby environment, it is seen as essential, missed, and fundamental to the enactment of 'self'. There is some acknowledgment of an available counter-narrative ('it's only a game') but this is resisted. To James it is much more than this and taking himself out that environment has proved unsuccessful. This is counter to the work of Douglas and Carless (2009), who see the need for 'asylum' in retiring athletes and reconstruction of a new identity, James has retained his sense of self as a rugby player post retirement and continues to look for ways this can be expressed.

Aggressive Coaches

I ask James how emotion was expressed in the rugby world and whether people talked to each other. He told me about analysis sessions two days after the game, a process he describes as 'brutal':

SH: And what did that feel like, when you were on the receiving end of some ruthless honesty?

J: I used to hate them, hate them, because of the fear of being outed in front of the group I suppose er, er, yeah they, they were, they were brutal. They were really bad at times. I mean, I remember having some really, you know, quite aggressive coaches during my time and just

being horrible, literally singling players out, singling me out, but other players as well and kind of belittling them in front of the group [mmm] er, which was never a good way of (inaud) but was just their way of coaching, way of managing. I, I wouldn't do it like that, I don't do it like that but, some coaches did.

Here James tells us about the emotional environment of the rugby club in which there is the threat of being 'outed in front of the group'. Again, he uses repeated adjectives in conveying the situation, ('brutal', 'ruthless') and being belittled in front of the group in a style James refers to as 'aggressive'. There is an implication of an environment of fear (indeed, James uses the word fear), in which there is risk that your inadequacies will be exposed. James's reluctance to express his vulnerabilities and seek support for his mental health becomes understandable in this context. It also brings to the foreground the impact of coaches in setting the emotional tone within a club. James describes such a coaching style as 'aggressive' and confirms his disapproval of this style through his assertion that he doesn't do it like that. Within James's story is the expectation to endure 'aggression' verbally as well as physically on the pitch.

Sharing Vulnerability

We go on to discuss James's fear of others knowing about his depression.

SH: And what was it that you, what stopped you wanting other people to know, what were you worried about?

J: Well, being a laughing stock. Erm, being the weak one. Erm, yeah, just embarrassment I suppose more than anything, just, just, afraid of em, yeah, just, just, just be embarrassing, just to be, it'd just be awful to know that they knew that. Em, yeah, it would be, it would be, there would be nothing worse.

SH: Nothing worse?

J: I don't think so no, [mmm] no, er, yeah I just wouldn't be able to look them in the eye, in fact I couldn't look them in the eye at times [mmm]. Even the, even the doc and my best, my mate, I couldn't look them in the eye and tell them [yeah], I couldn't talk about it.

SH: It sounds like you felt a lot of shame about it.

J: Yeah, probably yeah. No, exactly. That's the word I'm looking for, erm yeah, exactly right yeah, erm, yeah. I can't describe any more than that really, all the worst things that you can imagine, that's how I would, that's how I would have felt about it really, there would be almost,

almost literally nothing worse than knowing that, that would be it. If it had been earlier in my career, if it had been earlier in my career and that had come out I think it would have forced me to leave the club. That's how, that's how bad I would have envisaged it, it was different probably 15, 20 years ago than it is now, [mmm] but it's still, well, I'd imagine it's still...well, I ended up talking about it, and I ended up, just before I retired, I told my team mates [mmm] just at the end of my career, and the frustrating thing is they were all brilliant about it (laughs).

James's shame about his mental health is extremely powerful. He describes it as the 'worst thing that you can imagine', revealing how intolerable this is for James to expose. His use of multiple adjectives serves to convince me as the immediate audience of the depth of his despair. This enables understanding as to why James maintained silence until the point of retirement and the significance of the risk involved in speaking up when he did. This conveys a version of James as having demonstrated courage, albeit in a very different way to how this is typically conveyed in rugby. Here, the challenge of coming forward whilst feeling scared suggests an expansion of the ways in which courage can be understood and expressed, going beyond facing the physical challenges within the game but also the mental ones. There is a way here for his masculine ideals to be both threatened in terms of expressing something that sits outside of the usual discourse, whilst simultaneously acting in a way which sits within it in terms of claiming bravery.

James felt unable to communicate due to the depth of embarrassment he felt about his mental health. Again, he refers to 'being the weak one'. By perceiving himself to be the 'one' he positions himself outside the group, as being different and weak in contrast to the rest of the squad's perceived strength. In suggesting earlier in his career it may have forced him to leave the club, he conveys how seriously challenging to the acceptable norms his mental health condition is. I note again there is no reference to his performance. Instead he is saying that in not living up to the masculine ideals of the rugby subculture he could be forced to leave. At the heart of his anxiety is the fear of rejection by his peers and the loss of relationship and the functions of identity that being a rugby player offers. This points to the central dilemma for James about being open about his problems. To do so was a threat to his identity, to his career, to his being accepted in the team. He has contravened in his mind one of the rules of access. His identity as rugby player and mental illness cannot coexist.

Ultimately James did an interview with a newspaper at the point of retirement and, with the encouragement of his wife and best friend, agreed to speak about his mental health problems. He decided to tell his teammates before the story came out. This disclosure came around three years after he first became aware of his problems.

J: I was very, I was shocked, very shocked, when I came out and did my interview, I was, I was shocked how many current professionals confided in me, and said they were feeling a very similar way. Em. I was, I was shocked cos I thought, genuinely, I feel silly me thinking back to it, but I genuinely thought I was the only one [mmm]. I couldn't believe there would be any other rugby player that would be in any way, feeling in any way, in any similar way at all. I thought it was, you know, I can't believe I thought that cos we're all only human at the end of the day (laughs) but erm, I genuinely thought that. I was genuinely shocked when I found out about other players. And erm, they phoned me up and they texted me and all sorts and em, em, yeah. And that was, I kind of, kind of wish I'd found out younger I suppose, [uh-huh] I could have dealt with it. Cos I think that, I do really believe I would have been a better player if I'd known and been able to cope with it, because I don't think, when I [inaud] I knew when I was younger, well I know I didn't know, and for all the negative emotions and all the problems I had when I was younger, I could have, they could have been resolved and I, I genuinely believe I would have been a much better player and more successful player had I been able to control my mental health.

James was surprised to hear from others feeling the same way. He conveys the depth of his shock through the repeated use of the word. In finding others who were like him who reached out to him after his disclosure James shifts from a sports person identity that is invulnerable to one that can include 'being human'. It's notable that he says, 'we are all only human'. This is a shift from seeing himself as different and the 'weak link' to an appreciation of the humanity and vulnerability in everyone, including rugby players.

Acceptance

James describes telling his teammates about his depression:

J: I don't remember being more scared in my life [wow] so, yeah at this point massively, and again it was brilliant [inaud] in a real, only a rugby environment can achieve. I did it and it was great actually, obviously, I was very emotional doing it and erm, it was really good. I literally had a hug from every single bloke in the room and then we went out to train (laughs) and it was really funny, like I said before about this piss-taking environment, we went out and started warming up and playing a bit of touch rugby and chucking the ball about and they kept on saying, 'give the ball to James, let him score otherwise he's going to cry!' [laugh] (laugh) it was absolutely hilarious and just made me feel part of the group again, [mmm] that was important to me, so I was glad I did it, glad I did it.

I am struck by how fearful James was of telling the group, which is evident in the language he uses; 'I don't remember being more scared in my life.' However, the banter and piss-taking which represents belonging is restored. James has revealed something which could isolate him but he has instead been met with hugs and humour. James is no longer an outsider (albeit in his own mind), he is able to be authentically himself and retain his relationships to the group. He is accepted as he is.

Exclusion

Whilst James was accepted by his teammates, his disclosures led to rejection by his family, who he describes as 'very conservative.' In discussion, it seemed there were significant parallels between the rugby environment and James's family environment, which similarly limited expression of emotion:

J: Yeah, yeah, well yeah very much so. My family, we didn't talk about anything, anything at all, bloody hell no, no chance, very conservative upbringing erm... I'm quite conservative but I'm really emotional as well [right, yeah] whereas I probably hid it for a long time, hid being emotional for a long time, now I don't care (laughs) [yeah]. So, I er, em, and all because and kind of where it comes from, so, quite happy to be that guy. Yeah, so, and again that's when I said at the start of the interview where I've always kind of known that I've had an issue, 100% stems from childhood [sure].

Once James has come to recognise that he is suffering from depression, he appears to integrate this into his life-story. He reflects backwards to his childhood and locates the origins of his problems with the emotional environment of his childhood in which expression of emotion was forbidden. The story moves from the rugby environment to the family environment. Whilst in the rugby environment his disclosure was met with support, amongst his family it led to him being excluded. This suggests that the expectations that were brought into his rugby experience were also informed by his childhood experience. It is also possible that James felt at home in a rugby environment because of these same parallels. The depth of James's fear of abandonment in the rugby context could be seen as in part arising from the real threat of abandonment evident in his family life. This highlights the ways in which sports person identity is not isolated from non-sporting aspects of life and how a sporting subculture experience also contains projections originating from other life experiences.

During the interview, when James was telling me about this, at the time I thought we'd gone off on a tangent. It was tempting for me to see James through the singularity of his sporting identity and to miss the multiple co-existing and inter-relating storylines and identities he lived.

Learning

In totality, James's story follows a redemptive narrative, but only partially. He suffered in silence, fearing rejection and ridicule, but was redeemed through the caring response of the rugby fraternity. The environment in which only 'aggression' was permitted expanded to accommodate him and he was embraced for who he was. However, there is a significant subplot, in which James's fears are realised in the context of his family, who reject him.

James's story is helpful to this study particularly in terms of understanding the relationship between personal identity and group/cultural identity and the threat to sense of self and belonging that can arise when experience does not fit the dominant cultural narrative. Whilst demonstrating the performance narrative, James's concerns were largely relating to social exclusion.

James's story demonstrates the powerful impact of his experience of mental health issues on his self-identity, leading him to feel different, weak and like a failure. James's narrative demonstrates the barriers to support-seeking on the basis of both lack of insight and shame associated with mental health problems. He also demonstrates the difficulties in reconciling mental health problems with a version of athletic identity which has hyper-masculine ideals at its centre.

4.3 SARA

Sara met with me shortly after retiring from playing cricket. I approached Sara via her agent, who put us in email contact. There was a gap of a few months between our initial contact and finally meeting via Skype. Whilst we were talking there was birdsong in the background and the sound of someone playing a musical instrument.

Sara had a warm, chatty tone on email, though in person she was more circumspect, and I noticed she seemed more comfortable when we moved away from talking about her personal experience to more general discussion of mental health in sport.

We spent a few minutes talking about our previous research experiences before embarking on the 'formal' part of the interview:

No Control

Here Sara begins by telling me about when she first became aware something was wrong.

S: Erm, it was probably around 2011 ish, erm, and it was just when I was basically just like constantly upset and crying for what I thought, I didn't really know why, I was just getting really, erm, yeah, upset and anxious about nothing, really, [yes] and I wasn't able to stop it, in any way, and there was nothing really particularly going on in my life that I thought, erm, as to why that should be the case [yes] and so that's when I, I, I didn't know, I didn't really think anything about mental health at that point, I didn't have er, I didn't even think to myself, 'Am I depressed?' or anything like that [yeah] erm to put a word or, you know, a name to it, and so it wasn't until I went to see one of our cricket doctors erm, and I don't think I went to see him about that specifically, I think it was something else, and I think he must have asked me how I was doing, erm, and then I said 'yeah not very good' and told him pretty much what I, you know, said to you, erm, and then he suggested that I might have depression [uh-huh] and when he said that I was kind of like 'oh' and it was almost, it was almost erm a relief in a way [right], in a strange way, that there was potentially a reason for it [mmm] erm and a name for it and yeah, that was probably the first time that I thought something, it was, you know, I was at the point where I was just like I, I, I'm feeling like this and I don't know what to do to, to stop it [yes].

Sara starts by accounting for how she came to recognise that she wasn't okay. She describes the symptoms of her experience (upset, crying, anxious) and her inability to exercise any control over this. She is unable to find a reason in her life experience as to why this would be the case, stating that she was upset 'about nothing'. She moves from a position of not knowing ('I didn't really know why') to knowing, as a diagnosis of depression provided a 'reason for it' and a 'name for it'. In this way, diagnosis does not operate to destabilise but rather to provide answers and with it comes relief. I note the inference that depression is itself the 'reason' for her distress, suggestive of Sara adopting a medical model perspective on mental health at this point that negates environmental and psychological factors.

I went on to ask Sara if she had explored what might be 'at the back of' her experience:

S: No...I mean I was living abroad [erm] and I'd had a relationship breakdown but I thought it was okay, so that may have been that, erm, but yeah, I, it could have been like playing for a new team abroad erm, and that could have been partly the reason erm, and so I guess when I get, when I then did come home, along with being on medication it did, I did improve so that [mmm] could have been, could have been partly because of it yeah.

Sara's reply is tentative, contradictory (an answer of no, followed by an explanation of sorts) and has a sense of incoherence, as suggested by repeated use of words like 'may have been', 'could have been'. Although she offers some possible causal explanations, she appears in the

main to have considered that period of her life one in which things were generally 'okay'. I would suggest that the brevity around this account may reflect that either the depression diagnosis offered a satisfactory understanding or that this is an undeveloped area of reflection (perhaps for the same reason). Indeed, only when I move away from the medical model by asking Sara if she had explored what may be 'at the back of it' - inviting her into consideration of psychological/environmental factors - that the story begins to lack coherence as she makes tentative suggestions around causality.

Injury And The End?

Sara goes on to talk about a second episode of depression in 2013. This contrasts with the account of the first episode in that she creates causal links between her experience of depression and being injured and subsequently missing out on selection for the World Cup:

S: I tried to get back to the World Cup in a crazy fast time (chuckle) after ankle surgery and I got back into training but I didn't make it [right] erm, and I kind of felt like I could have, could have been in that team or maybe should have been selected [yeah] and that hit me really hard and I erm wasn't able to go to the World Cup and erm, it was just a difficult year all round, really, [uh huh] erm, the team weren't in a good place....we had a new coach and the culture that we'd started to build and like really create something erm, very special, really started to erode and so the feeling amongst the team wasn't great and then I was injured as well [uh-huh] on top of that so just the, the combination of everything and basically me feeling like that was going to be the end of my career, that was kind of how it was going to end, [mmm] was pretty difficult to, to deal with.

This element of Sara's narrative demonstrates a more coherent, linear plot which contains the elements of a typical story structure (Labov & Waletzky, 1967, Labov, 1972). There is significantly more elaboration on this episode both in terms of the contextual factors which Sara sees as contributory as well as the range of actions she took to support herself. Sara explicitly links her depression to injury - and the fear that her career was coming to an end as a result - as well as the erosion of team culture. As noted, research has shown injury to be a point of vulnerability to mental health problems in elite sport (Gulliver et al., 2015; Putukian, 2016; Leddy et al., 2013).

Sara broadens out her narrative to include the team as a whole, locating her personal experience within the shifting team culture. There is a sense of mutual influence as Sara's and the team's wellbeing are portrayed as shaping each other. Implied in this is the importance of the team experience for her own sense of wellbeing.

Sara's devastation at not making the World Cup is indicative of the performance narrative proposed by Douglas and Carless (2006), with performance outcomes taking precedence. From operating within this narrative, it is understandable that Sara experiences 'narrative wreckage' (Frank, 1995) when her experiences no longer fit the performance narrative through injury. Sara tries in vain to recover in a 'crazy fast time'. Here she could be thought of as accessing a 'restitution narrative' (Frank, 1995). Such a narrative is typical within illness stories, in which the general plot follows the expectation that being better follows being sick along with a return to normality. Whilst Sara did recover, she did not get selected for the World Cup and as such neither the performance narrative nor alternative restitution narratives provide a coherent way in which to make sense of the experience, rendering her vulnerable to trauma symptomology and depression.

Following this second experience of depression, Sara tells me that she had a period of therapy organised through cricket, and a period on medication. Sara's experience is suggestive of a system in which mental health issues are identified and supported. The doctor is attentive to her emotional as well as physical health. The support Sara receives is located within the sports system and there is no reference within Sara's narrative to her experiencing any unhelpful or stigmatising responses (though later she conveys a concern that this could be the case). As such, the culture within her sport would seem to encourage support-seeking and a holistic approach to healthcare.

Having not been selected for the World Cup, Sara describes going away to Peru:

S: Once I'd kind of, I wasn't going to go to the World Cup I basically just took myself away, erm, I went to Peru and volunteered to do some English teaching [laugh - oh wow] .Yeah, in like the remote untouched part of Peru [mmm], so I just basically removed myself from that environment which was really stressful.

Having not been selected (something she could not control) Sara takes some control of the situation by removing herself from a stressful environment. This follows a pattern observed by Doherty et al., (2016) and Carless and Douglas (2009), who highlight the tendency of athletes to separate themselves from their usual environment in order to understand their experience of depression.

Cricket And Identity

Sara went on to describe using a meditation app (Headspace) to help her manage 'negative thoughts' and allow her to 'sit with those feelings' and 'let them pass'. She describes the

process as helping her to 'look above it' before going on to state: 'I don't really like the term like gaining perspective'.

I asked Sara why she didn't like this term.

S: Err because [chuckle], I don't know, I don't know, I kind of feel like, that, that means that what you're doing day-to-day isn't important [right, uh-huh] but to me it is, it is important otherwise we wouldn't do it [yes] and so it's not, so not gaining perspective in, I don't know, it kind of then plays down what we do [right], not just me but everybody, erm, and you are going to get upset and stressed about stuff, that's just the way it is but yeah, I guess it helped me, just, [pause] yeah look, look, look, kind of yeah from a different angle [yes] I guess, yeah.

Here there is tension as Sara both attempts to take a different angle on her experience whilst resisting challenging the centrality of sport in her life. This is a theme that develops:

SH: So when you say like the importance of what you do...I mean how important is cricket in terms of your sense of self and who you are?

S: Yeah (chuckle) so before - now I've retired - erm it was massive, like it was err, you know, I, cricket and well sport and particularly cricket was a huge part of my identity from day one [mmm] because I grew up around sport, a massive part of my identity and so when I, when I was injured earlier in my career and kind of, you know, wasn't able to play it was really, a lot to do with well, who am I? And it, it wasn't just 'oh I can't play cricket' it was like, what does that mean about me? [mmm] so yeah, massively, a huge part of my identity and I know that erm having that single mindedness is not necessarily helpful (chuckle) [laugh] at times and it's important to have other things [mmm], erm but that's, that's the way it was [yeah] so...

Sara's high athletic identity is revealed in her narrative at both implicit and explicit levels. On the implicit level, Sara's athletic identity is revealed through the absence of characters, plot lines and interpretations that fall outside of sports (both within this excerpt and throughout the interview). The others who appear in Sara's narrative are entirely within the world of cricket. She makes no references to her family other than indirectly when noting 'I grew up around sport' and she links her depressive episode exclusively to factors pertaining to her identity as a cricketer.

Sara's narrative also explicitly highlights her athletic identity, as she describes cricket as 'massively, a huge part of my identity' noting that when not playing through injury she was left questioning her sense of self. Sara queries the extent to which this is within her control:

S:I think there are people who probably do it better in that they have more of a balance and they have other things going on outside of their sport [yeah] but I, I think it's difficult to manufacture that if it's not there, [uh-huh] erm, so for me for example, my friends were in cricket [mmm] because I played cricket for most of my life so therefore it was difficult to erm, have people outside of that and with the nature of how, you know, what we did and how, how we did it, it was difficult to go and make new friends, if that makes sense [yes] and so, yeah I think there are, I think there probably are people who can do it. I did struggle though so when I was doing the Headspace stuff and I got myself to a place where I felt really, really good about myself, really positive and then I went, so then when I went back into cricket, erm I really struggled to do the Headspace [mmm] and be in that place and then go out and play cricket [uh-huh] erm which was interesting [right] and I didn't ever find, because I then retired and I don't do it anymore, erm I didn't ever find, you know, a way to do both [yes].

In her relationship to this issue, we see contradiction, tension and ambivalence. Sara recognises that sport is central to her identity but is also aware that this is 'not good.' She conveys a struggle to address the centrality of sport in her life. At times she adopts a passive stance in relation to her capacity to effect change ('that's the way it was,' 'It's difficult to manufacture that') as though her sporting identity is a fixed characteristic. She identifies friendships as an area where there is scope for something else, but also notes how difficult that is. That her friends are all involved in cricket is presented as both cause and effect of the centrality of cricket in her life.

Whilst on one level Sara knows that 'singlemindedness' can be detrimental to mental health, she resists mechanisms for reducing the centrality of cricket in her life. This is apparent when she talks about her dislike of the term 'gaining perspective'. For me, this is revealing of a central dilemma in the life of an athlete. If Sara is successful in 'gaining perspective', what then? This would suggest a shift away from the 'winning is everything' discourse of the performance narrative towards something closer to: 'it's only a game'. It is easy to imagine how adopting such an attitude would be undermining of a life commitment to sport and unhelpful in maintaining the motivation required to succeed at elite level. It is unsurprising, therefore, that Sara struggles to find a way to resolve this tension. Instead, this tension is lived out, performed in both her narrative and her life. This is exemplified in her use of the Headspace meditation app, which she finds 'really helpful' yet finds impossible to integrate successfully into her life as a cricketer. She is aware of the alternative narrative that is available to her: 'there are more important things' but that she found this incompatible with her identity as an athlete. The steps that she is taking to support her mental health are therefore seen as at odds with elements of being a cricketer:

S: It was almost like I had to be in a different mind-set, [mmm] like I had to be in a different, yeah, it's almost like I had to, I don't know, like that, erm, [long pause] like to, there are more important things, [uh-huh] than cricket, erm which obviously there are, and but then to be in that head space and then try and play cricket, I found difficult,[uh-huh] if that makes sense, it's difficult to explain [chuckle].

Staying Connected

We go on to talk about Sara's experiences in terms of sharing her experiences with others, which she did by participating in a WhatsApp group with her teammates:

S: I put it all out there which is quite unusual for me cos, and the reason I did it was because I know that when I'm struggling I, I (inaud) want to isolate myself and hide away and not see anyone or speak to anyone so I kind of like thought, right, what's the best thing I can do to stop myself from doing that? And I decided (laugh) to be open about it and the response I got was brilliant and also one thing I got that I wasn't really expecting was it enabled my teammates to know more about what was going on inside my head [uh-huh], and so they were they were able to, well we were able to interact in a much better way because of it.

Sara's openness with her teammates enabled them to better understand how to relate to her through her injury. The relationships which are given primacy in this story are Sara's teammates. Here and at other points during the narrative Sara's own wellbeing and the team are interwoven. Sara's role in the team is seen as central to her identity, and through ongoing communication with the team this relational aspect of her narrative could be sustained in the absence of her ability to perform. Sara's experience of depression does not set her apart from the team and through ongoing communication she retains her insider status.

I note that Sara's story is not a neat fit to the performance narrative, though is highly aligned with athletic identity, which sits at its centre. Whilst Sara adheres to the 'sport as everything' feature of the performance narrative, winning/performance does not seem to be her primary concern. In fact, her sporting success is conspicuous by its absence, with no reference to her sporting achievements.

Whilst the performance narrative relies upon sporting success, the alternative relational narrative proposed by Douglas and Carless (2006) offers an alternative story through which identity can be rebuilt. Such narratives focus on 'care and connectedness over and above the masculine values of separation, individuation, hierarchy and competition' (p.24). Sara talks often from the point of view of the team, rather than only herself as an individual, and stays

connected to her teammates during her rehabilitation, indicating the primacy of the relational narrative.

Rather than seeing her feelings as unshareable or as something which separates her from others, Sara wards off isolation through sharing and in this way maintains relationship. Sara appears comfortable with being vulnerable and this in itself does not present a challenge to her identity.

Counter-stories such as Sara's which do not sit within the dominant narratives available within sport are often silenced or considered untellable (McLeod, 1997). Sara, by contrast, has spoken openly about her experiences and in so doing she has found an audience for her story and a way to integrate it into her identity.

Coping/Not Coping

I go on to ask Sara if she was explicit about her mental health.

S: No, no, not, not at that time because I don't think I was, well I don't know, but I didn't think I was, erm, but after the selection, after the not getting selected that's when it kind of took a turn for the worse [right], erm and so no, I don't think I was explicit at all, with, I'm just trying to think, erm, [pause] no, I don't think I've ever really been explicit apart from with the media [laughs] [right, okay] which is, a bit weird, because people want to put a name on it don't they? And I'm like, well, whether it is, whether it isn't, [right] I don't know, like, it's just like how I was feeling.

Here she is resisting the medical model, whilst recognising the utility in identifying her experience as depression in conversation with the media. This is seen as for others' benefit: 'people want to put a name on it'. However, earlier it is Sara who also wants to put a name on it.

I asked Sara about how she felt about being open about her mental health, noting how unusual it is, particularly amongst active sports people. Sara spoke about the idea of it being a 'weakness' and the perception of not being able to cope, as well as the relationship to stigma externally and internally. When asked how it felt to not be able to cope, Sara questioned whether her experience was depression or not, noting that it was a hard period of time. She also noted the concern that coaches may think you cannot cope in a situation:

S: Yeah, yeah, I think so, because it is that whole thing, of feeling like that it is a weakness [mmm], erm, you know I think I've even said it since talking to you, and people say it all the

time, that you weren't able to cope and just saying that, makes me feel like, ah! You know, I wasn't, I wasn't able to cope, like, that's, that doesn't sound great [mmm] and so, I think there is the external stigma, but I think the internal stigma as well, is quite, even more, well yeah.

When Sara uses the term 'that whole thing' she signifies a shared understanding of depression as weakness which we will both be aware of. In positioning it this way she somewhat distances herself from it as a personal belief and situates it in the wider context. Sara links the idea of weakness to 'not coping'. Acknowledging her difficulties in coping, she recognises how that sounds – both to an imagined audience and to herself.

SH: What, cos, well how did it make you feel about yourself to feel that you couldn't cope?

S: [Long pause] Erm, [long pause] I don't, I don't know, erm well it's, I guess that's where it's hard, because it's, it's, it was a really, a hard period of time, erm, but that's, that's not what depression is though that's the thing, so that's why I struggled to know if it was depression [mmm], or not, because, well to me that's not, depression, the ability not to cope in a situation, erm, but then how it then manifests itself, is potentially depression [mmm], erm, but, but like I said when I first had that name put onto it, it was actually a relief [yes] because it was something as opposed to just, like, that feeling 'am I going crazy?', that actually, I don't know, being able to call it something, [yes] actually helped, but I do, but I do, I can understand why people don't talk about it, because...you potentially feel like, coaches won't necessarily think that you, you can cope in, you know pressure situations or whatever which is completely wrong [mmm] erm, and I didn't necessarily think that they, they would, but you do, you do, it does go through your mind erm, so, yeah, I can understand why people don't speak about it

When I go on to ask what it feels like to hold this idea of not coping (perhaps concretising something tentative) Sara moves away from this towards an examination of how her experiences fit the medical model construct of depression.

There's an evident tension in how Sara conceptualises depression, as she shifts between conceptualising it as a feature of her as an individual, to locating it in environmental factors, and between something normal and abnormal. This aspect of her narrative appears to remain unresolved. At times 'depression' is presented with a 'thing' like quality, similar to an illness that you might be afflicted with, whilst at other times, she presents depression as an experience/feeling, a feature of her response to a difficult situation. The medicalisation of depression is both made use of and resisted at different times, depending on the needs of the situation.

In this segment, Sara also shifts from her own experience of not coping by talking about the experience of the team, such that it becomes unclear if she is speaking from personal experience or on behalf of others (*'I can understand why people don't talk about it'*). In moving away from the personal into discussion of diagnosis and generalisation, I'm curious as to whether this served to shift the conversation away from a point of vulnerability. My impression is that the piece around 'not coping' is unresolved within Sara's story. Indeed, she recognises it 'doesn't sound great' as she considers others' perceptions. However, there is an alternative narrative available to her, which she makes use of, which enables mental illness to co-exist with mental strength as she goes on to state:

S: The mental side of sport, for me was probably one of my strengths [mmm], being able to cope with that pressure and stuff like that was actually a massive strength of mine.

Mental Toughness

Whilst there has been much interest taken in the vulnerability to mental health issues associated with high athletic identity (which Sara's experience would appear to support), I am also curious about how mental health issues themselves impact upon identity. This particularly relates to the narrative around mental toughness:

S: I was part of a program that went into schools and there was six keys to success and one of them was mental toughness and I hated it [mmm] I hated having to use that phrase because it does, it makes it seem like you can't then have a mental frailty and that actually that is, you know, is nothing to do with not being able to, you know, cope in a situation or if you struggle at certain times it's how you learn from it and...

SH: And actually just acknowledging your feelings rather than I think sometimes [yes] mental toughness can be, or the way it can be interpreted by people is around [yes] disconnecting and not [don't show it, yeah] not feeling, not showing [yeah] exactly, rather than experiencing vulnerability and being able to sit with it [yeah] and being able to be comfortable with it [yeah].

S: Yeah, no, definitely

Whilst Sara adopts a perspective on mental toughness which is closely aligned with the academic understanding (Jones, 2002), she acknowledges that the wider dialogue around the subject and the implication that to have a 'mental frailty' is indicative of a failure of mental toughness. This story is also helpful in understanding the transmission of narratives to younger generations. In highlighting 'mental toughness' to school children, Sara is being invited to

reinforce this narrative and in so doing create a gateway into performing a particular type of sporting identity.

In this excerpt, Sara talks about the notion of mental toughness being viewed as incompatible with mental frailty, as though they are mutually exclusive and cannot co-exist – whilst in her own narrative we see evidence of this co-existence. This element of our conversation has a strong co-created element as I also contribute my own understanding of the meanings of mental toughness.

Sara has found ways that her experience of depression can co-exist, sit within and enhance (rather than be at odds with) her sporting identity in part through an understanding of mental toughness which accords with the academic literature. Sara maintains her self-concept as someone who is mentally strong and manages pressure situations. That said, she is not immune to the impact of the wider story operating in sports culture and is aware of the powerful effect of language and the detrimental impact of this narrative. In choosing to reject this narrative, Sara is able to maintain her self-concept as a mentally strong athlete irrespective of her experience of depression and ‘not coping’.

Safe Space

Sara went on to talk about the emotional environment within the team and the ways in which openness and sharing of vulnerability was promoted through exercises conducted with the sport psychologist.

S: ...we really started to get to know each other a lot better [mmm] and we shared a lot, and yeah and we were vulnerable with each other [yes] and that, that was one of the massive strengths of our group [that's interesting], yeah that was how we were able to trust one another.....yeah we just kind of shared all that stuff and we were yeah, really, really open with one another and it was a very powerful room to be in when we were doing that kind of stuff [mmm] and you know, some people obviously found it easier than others and you're always going to be a bit wary at the start and, also how much should I share and erm, but as soon as one person opens up and you know really shares what their anxieties are what their fears are and stuff like that it makes you realise that it's a safe space to do it in [yeah].

Vulnerability is not held by Sara alone but is shared in the team. The team environment is regarded as a ‘safe space’ for the sharing rather than a site of potential shaming or humiliation. The open communication therefore becomes part of the team culture, rather than a feature of

individual experience. This process allowed difference and vulnerability to be valued rather than hidden and the culture of openness and the trust that ensues translated into performance:

S: One of the biggest differences from when we didn't do very well to when we started to do well was just how we were a team and also, we recognised that everyone was different [mmm] and that you need those, you obviously need those differences erm, in order to be the best team that you can erm and that it's okay to, to have those weaknesses and those vulnerabilities and erm, yeah just the trust that we had within the group I think was, yeah really key [mmm] and it made it, a massive difference when you get out to the World Cup [yes] when you've got the pressure of everything and yeah, much, much better [mmm].

Learning

In general terms, whilst Sara presents with high athletic identity in that cricket is her world, within that world she expresses much more than a single-minded dedication to winning. The relational strengths of the team are seen as part of what contributes to their good performances, with expressions of vulnerability creating deep bonding and trust. It is notable that Sara being in a female environment may be a significant factor in the extent to which vulnerability is tolerated.

Sara's story particularly adds to research in demonstrating the possibility of holding a self-concept which is both strong and vulnerable. For Sara, her mental health issues are not a threat to her sporting identity and become integrated within it. This is mirrored within the sports culture operating around her, which promotes wellbeing, sharing of vulnerabilities and provides space for support-seeking.

4.4 LAUREN

I met with Lauren having been introduced over email by a contact who knew something of her experience and suggested she may be interested in participating in the research. I communicated with Lauren by email beforehand and arranged a meeting. Lauren had not spoken publicly about her experience and I was unfamiliar with her history.

Lauren had a warm but somewhat reserved demeanour and I had the impression she was not entirely comfortable with the spotlight. I found myself more active in the conversation than I had been in previous interviews, both to maintain rapport and to take the pressure off Lauren to do all the talking. I was aware of trying to avoid the awkwardness of a silence, which I often find myself doing as a therapist, particularly with new clients (even though we're supposed to

sit with silence, I am aware how uncomfortable it can be, and in early sessions in particular tend to keep things moving until sufficient rapport is developed for silence to be usefully tolerated). On reflection, I was struck that the tension between talking and silence was so central to Lauren's story, and particularly how she had looked to her coaches to understand her quietness and reach out to her, and I wondered afterwards if I was responding to that wish in some way.

After drafting an analysis of the interview, I sent it to one of my supervisors for feedback. My supervisor noted that the interview could be enriched by more specific stories and examples to illustrate the points that Lauren was making. We wondered if this reflected the limited narrative resources available to Lauren from which to construct her account. Unlike the other participants, Lauren had not told her story in this way before and we sensed that she was still in the process of finding her way into a coherent narrative of her experience. It may have been that making use of other methods (such as arts-based methods) would have been of use here.

I approached Lauren to see if she was willing to participate in a follow up interview, which she agreed to. Our second discussion provided the opportunity to add depth to Lauren's account and my questions were oriented towards clarifying and expanding on themes from our first conversation where I felt they would benefit from elaboration.

Running From Basketball

In our first conversation, after some discussion around Lauren's studies, I asked her to tell me about her experience in sport and how it impacted her mental health:

L: Well, clearly, I'm from the States, [yeah] so, I played in the NCAA, [uh-huh] division one basketball, which clearly from any other level, is much more time demanding, much more physical demanding, mentally demanding...I was there for four years [mmm]...When I was young, I played basketball my whole life at high levels, it was kind of something that I really escaped to, because, I have anxiety disorder [right] it's just something that runs in my family. It impacted me in school, as well, [mmm] until, like, my teachers and my mom finally realised, like, okay, she, she must have it too, you know. But with basketball, it was something that, I didn't have anxiety [right], but when I got to the college level, I guess it's, it's just a different environment, the different interactions. That's when basketball started becoming something that I was running from.

Lauren begins by outlining her history in basketball, emphasising at the outset how demanding it is at the National Collegiate Athletic Association (NCAA) division one level. Prior to college,

basketball is presented as a safe haven, the space where Lauren is not troubled by the anxiety symptoms that affect her in other contexts. Once playing at college with the differences in the environment there, Lauren indicates a shift occurs in her relationship to basketball as it changes from operating as an escape to something she was trying to escape from.

In naming her anxiety as 'anxiety disorder' I also note that Lauren adopts medical model language in respect of her experience. Lauren immediately offers an explanation for her experience of anxiety: 'it runs in my family', further reinforcing the medical model perspective with an implication of a biological basis.

Basketball As Business

I asked Lauren about her understanding of this shift from escape to something she was running from:

L: I guess just at the division one level, it's not really about the sport any more, it's more about the business side of it [uh-huh] so you know, like, I didn't have a great relationship with my coach, so that, that was a big influence on, you know, just my anxiety part, even just on the team, just, the environment that the coaches created, it just, you know, it wasn't really a comfortable environment. It was just sort of like a business [right], you know, and that just became something that just wasn't enjoyable for me anymore.

SH: Yes, and when you say it became a business, can you say more...what do you mean by that? How did you feel, or how did you sense that it was a business rather than what it had been previously?

L: I mean, I guess cos, you know, like, they give you scholarships there. I mean, those can be taken at any time that they want them to be taken. They can bring any person that they want in at any moment. I guess it just became, just, a power, a power-hungry thing [right] and it was just like, you know, you can get in line and, you know, be my little minion or it's just, you can go. And it's just like you weren't truly cared about, it was just something like, okay, you're making me money so come on.

In our follow up conversation Lauren went on to tell me more about the way in which the dispensability of players was communicated by the coaches:

L: Like, they would [inaud] 'okay, we can bring more people in here. You don't want to be here you're more than welcome to leave because we're recruiting more people right now anyway'...It even happened to me one time when they brought in a transfer that played the

same position as me and they were all over her, so excited to have her, and of course, you know, I was pushed to the side even more.

Lauren captures the operation of basketball as a business particularly in terms of the dispensability of the players. Scholarships could be taken away, and other players brought in. She talks about 'they' and what 'they' want, indicating before going on to be explicit, that 'they' hold the power which is wielded in the form of the giving or taking of a scholarship. Lauren suggests that she was required to go along with it or leave, offering limited options for expression of any personal agency. This is reinforced with the phrase, 'be my little minion', in which she implies the expectation of a servile relationship to the coaches.

Although at this stage in her narrative Lauren is not talking explicitly about performance, she alludes to the operation of the performance narrative in her assertion 'you weren't truly cared about', instead she serves a purpose through the singular role of athlete. It would seem that having reached the elite level in basketball, Lauren was encountering the performance narrative for the first time and found her value limited to her performance in sport. The sport as business and the 'environment' as set by the coaches are interwoven in her story as Lauren moves between the subject of business and the interaction with coaches, this relationship highlighted as she speaks from the perspective of the coach: 'you're making me money so come on'.

I was immediately mindful of how this chimed with Peter's account of the impact of the funding model in the UK and the insecurity that arises as a result. I asked Lauren how she experienced the insecure nature of her position.

L: Yeah. I mean a lot of times it was like if you don't do something that they wanted, I mean it can affect your playing time. Like, a lot of times it's not about earning what you deserve, it's how they feel about you [mmm] and I think with having anxiety, I mean, I was already more stand-offish, you know, like, not on purpose, it was just something, like, I'm more to myself [mmm] because to me it's more like, I'm just trying to calm myself down. Like, I'm probably just over there freaking out and I'm just trying to calm myself down, where, you know, the coaches would probably see that as 'oh she's just, she's stuck up, she's, she's not a team player, she's', you know, things like that [yeah]. And I think that just comes with not really understanding, understanding that type of feeling, that type of thing.

There is a point of tension here as Lauren shifts from the idea of decisions being taken on a 'business' basis to one that is more personal and related to 'how they feel about you'. How 'they' feel about you in Lauren's narrative is contingent on the performance of athlete that is

expected within her sporting culture. Lauren here implies that there is a desired way of performing the identity of athlete within her context, with the outcome being loss of playing time in the event of failure to conform.

Lauren describes her attempts to calm herself down and 'freaking out' whilst presenting as 'standoffish.' Here she demonstrates an awareness of the disparity between the internal experience and the way she presumes herself to appear to others and reflects a perceived lack of attunement from the coaching staff to her emotional state.

A Conversation That Couldn't Happen

Within Lauren's story it is evident that she wanted something from the coaching relationships which was not being provided. I was curious as to whether she had sought this from them and asked if she had talked to them about it:

L: No, I don't, I don't feel like that was a conversation that could happen. I mean they were well aware of it, but talking to them about it, no.

Lauren explained that upon entry to university she provided information about medication she was taking so the staff were aware, telling me: 'They knew, but it was just not a conversation that was comfortable to have'.

I was curious as to how Lauren had intuited that these conversations were not safe to have:

L: I mean, it was just, she's very big on, you know, being mentally tough [uh-huh], she's, she's the type of person that would call you out for being weak or [right] anything like that, and to her, her time was very important so if you didn't come to her, come for a conversation that was important to her, it was a waste of her time [right] and I just thought, okay, she, this won't be something that's important to her.

In our follow up discussion, Lauren elaborated further on the difficulty in talking to her coaches:

L: They would just walk in, just walk right by you without speaking [right]. It was kind of like a, you know, a lot of tension, a lot of awkwardness [mmm]. I mean just things like, literally it would be every day they'd just walk right by you without saying anything. And of course right there that makes you, feel some type of way like, [yes] you know, especially like, as a team, these are adults that you're looking up to [yes] or adults that are supposed to be looking after you, taking care of you, you know, in a way like leading you in the right direction and it's like, okay well, you can't even speak.

In describing a conversation with her coach as not one that 'could happen' or 'that was comfortable to have' Lauren indicates a lack of expectation of being attuned to or understood. The coaches' limited relational engagement with Lauren contributes to an experience of 'awkwardness' and indicates that silence and not talking were features of the team culture originating with the coaches. It is evident that Lauren is seeking a different kind of relationship, characterised by nurturance and guidance, and it is of note that she was not attempting to hide her diagnosis from her coaches, instead it seems she was hoping for understanding.

However, in identifying the coach as being 'big on' mental toughness, Lauren is accessing a narrative about mental toughness which excludes expression of vulnerability. Lauren understands from observing her coach's behaviour in terms of the language utilised (references to weakness) that her experiences of anxiety will not be acceptable or important and recognises that her experience sits outside the 'toughness' narrative operating within this context. This serves to silence Lauren and renders it impossible for her to feel able to share her experience.

From my reading of the subject I was interested in the ways in which toughness is defined within sports subcultures and was curious as to what Lauren had understood toughness to mean within her setting:

L: I mean, having good control of your, your academics, all the athletics that we require. We have conditioning, we have practice, we have this event we have to attend, we have this, like, it's very time demanding and I just think well-being just wasn't an important factor. It was, it was more of 'well you know what you were signing up for' so [right] I mean, either deal with it or you can go.

Lauren's understanding of toughness is suggestive of being in 'control' and being able to 'deal with it' in terms of the various demands of playing at the division one level. Responsibility lies with the individual to have the resources to achieve this, and failure to do so reflective of a failure of the individual to 'deal with it'. As Lauren experienced it, there was no recognition of the way in which organisation culture is implicated in how a player manages those demands.

Given Lauren's struggle with anxiety and the desire to be seen and understood that is conveyed through her story, I wondered how this kind of environment impacted on her:

L: It impacted me a lot, cos I just felt like I needed some type of support, [mmm] like only one or two of my teammates really knew that I had it, so you know, of course they were supportive of it, but other than that no one else knew, [yeah] cos it, like to me, it was just something that,

it was embarrassing and I didn't want to be viewed as weak or crazy, or anything of that nature [yeah] so I just kept it to myself.

It is striking to me that Lauren was aware of her need for support but the demand for an ideal of toughness which precluded expression of vulnerability rendered her unable to ask for it. Lauren explains that she didn't want to be perceived as 'weak or crazy.' This seems to be a point of tension for Lauren as earlier in the narrative she cites her coaches as the ones who are calling out weakness, but here it would seem that she also considers this a weakness in herself, or at least is highly aware that this is the way in which she could be perceived. She describes her anxiety as 'embarrassing', indicating a fear of negative evaluation from others, and in order to maintain a sense of belonging, she largely hides her struggle with anxiety. This expectation of stigma and self-stigmatising are common for those experiencing mental health problems amongst the general population, and here it is easy to see how this is reinforced within the sports context. Here and throughout, Lauren's narrative conveys the tension between wanting to hide and wanting to be seen.

Performances Impacted

Lauren goes on to tell me how her anxiety manifested during games:

L: ...it was to the point that even during games and stuff my performances were so impacted because it was just, okay, well I have to prove them wrong, or I have to do this and then when I got into the games it was more just focus on not messing up at this point [mmm] or something like that and then I would and then I would come right out and then, I was just everywhere [yes]. And I didn't know how to fix it. So...so yeah, my performances were definitely bad, really bad.

In our follow up conversation Lauren elaborated on how she reacted to underperforming:

L: I would get down on myself, I would be pissed off. Like, I wouldn't say I was a selfish teammate, cos when we won I was happy, but I was also still down because I felt like I didn't contribute [right, yeah]. And then on top of that you have coaches that don't talk to you, to reassure you or anything like that so you just feel like, okay, well I'm about to be replaced.

Whilst basketball had previously been a source of escape from anxiety, now it was a stressor, with Lauren's performances suffering. The coaches, whilst presented within Lauren's story as exclusively interested in performance and immersed in the performance narrative, have seemingly contributed to Lauren under-performing. The prevalence of the performance

narrative is detrimental to performance in terms of pressure and also how it functions to undermine Lauren's individuality, humanness and need for relationship and connection. Whilst Lauren presents as desperate to perform well, this appears to be motivated by her need to secure her place in the team and gain the approval of her coaches rather than as a demand placed upon herself to fulfil a performance-dominated self-identity.

Don't Want To Deal With It

Lauren goes on to tell me how she sought on-campus counselling but ultimately gave up on it due to long waiting times. Instead, she attempted to deal with the situation alone, on top of the stressors of her academic work, and found the impact of anxiety on her life escalating:

L: Well, I did it for, like, two more years, and it was miserable. Like, it was to the point where, I was like, you know what, I, I wish I didn't have anxiety, like, I hate it [yeah] I really hate it. Cos I just felt like, if I didn't have it, okay, I wouldn't be panicking, I wouldn't be over-thinking, so I would be fine [mmm], you know? But, so, it got to the point where, I started taking it out on, you know, friends around me...and I, I couldn't control it [uh-huh]. So, it became something just, something small from sport [right] that became something big in my, in my everyday life...I was in a relationship and I was just taking it out on that person, I was just constantly frustrated, constantly angry, and it wasn't healthy [mmm]. It wasn't healthy, it wasn't healthy at all, and of course that person couldn't put up with it anymore [yes].

Lauren outlines the ways in which her anxious feelings which started in a sports context spread to other areas of her life in college and led to the breakdown of her relationship. Again she adopts medical model language, anxiety is a 'thing' that she wants to get rid of, the cause of her problems rather than the symptom. Rather than seeing the environment as the problem, her anxiety becomes the problem and there is a desire to be rid of it, so she can function in the environment:

L: So, I mean, it got to the point where I stopped taking my medication, [mmm] because I was like, you know what, I don't want to have this anymore, I don't want to deal with it...It just made me feel different, than everyone else [right] and I didn't want that feeling anymore.

For Lauren, rejecting her medication appears to function as a means of denying her experience of anxiety, as though not dealing or acknowledging it, it would no longer exist. Lauren sees her anxiety experience (and use of medication) as setting her apart from others and not taking medication becomes a way to reduce the experience of difference.

Leaving And Loss Of Identity

Lauren goes on to explain her decision to stop playing basketball:

L: So, after like dealing with the coaches, dealing with everything, like not being on my medication, losing my significant other, like everything at once, um, I decided to leave the team [right], my senior year. Like, right before season had started, and that was really hard [mmm]. Really hard, because not only was I dealing with anxiety and stuff now, I was now dealing with my loss of an athletic identity [yes, absolutely] so just that whole year, I mean, that was probably one of the worst years, definitely [mmm].

In our follow up interview, Lauren elaborated further on her decision:

L: The main reason was, since they did bring that new player in that played my position, they were clearly trying to get rid of me, to clear the roster space so that she could play right away [right]. So she [the coach] began making up stories of things I was doing, trying to, you know, get me out of character, trying to pretty much get rid of me....they were telling my teammates, like, she was bringing in our captains and she was telling them, 'Oh, Lauren's doing this, this and that' and they'd come and tell me and I'm like, wait, what? [right]. She never brought me in to talk to me...

Lauren described how the situation was impacting her:

L: Yeah, I mean, it was just getting so bad that, like, I was almost having daily panic attacks [mmm], like, daily, and I hated it. I, I just did not feel good, like, at all. Like, I wasn't sleeping, cos I was just thinking all night [mmm], I was either not eating at all or just over-eating. It was just, I, I wasn't healthy. And I knew it and I could feel it [yes]. Like, I just felt terrible and I guess I just made the decision, okay, I'm going to choose myself over basketball [right] like, and that's what I did [yes] and like I was talking about before, like the scholarship thing, when I made that decision they did take my scholarship. So, then that became another, you know, issue [mmm], on top of, you know, my anxiety and over thinking, because now it was, okay how am I going to pay for school? [right] And I was, I was ready to go home. I had my bags packed and everything and my mom was like, you're crazy. If you're about to leave and you're about to graduate. Like, we'll find a way to pay for it, [yes] and so that's what we did.

Lauren details the ways in which anxiety has impacted on her life prior to leaving the team, to the point where she recognised that she was not healthy and needed to stop. Lauren's perception that she was being pushed out contributes to her distress, and further limits any

scope for the kind of supportive relationship she was looking for from the coaching staff. Here and throughout, Lauren is aware of her emotional state and the nature of her difficulties, albeit with limited coping strategies or access to support systems.

Lauren presents her choice as between herself or basketball. Basketball at this point is not presented as an integrated aspect of her identity but rather as a challenge to her identity. In her story there is no mechanism for being well and playing basketball; they cannot co-exist. Although stopping playing is designed to alleviate the problem, in doing so, another problem arises in the loss of 'athletic identity'.

SH: And then what was that like, when you'd made that decision to stop?

L: When I first did it, I really honestly, I felt free [mmm]. Like, cos the next day not having to be there, I felt good. Like, I really felt good. But it was like, I missed it [yes]. Not, not everything that came with it, just the sport alone [uh-huh] and yeah, so I think that was hard and then on top of that it was like I was just going to school as a regular student now. I no longer have my teammates, I didn't have that attention of being a basketball player [mmm]. It was just like, okay, what, what, what do I do now? [right] I have all this free time. What, what do I do?

SH: And how did you, how did you cope with that, what did you do?

L: I became depressed [mmm]. Stayed in my room [right, mmm]. Forced myself to go to class, because there was a lot of times I couldn't even get out of bed [mmm]. Yeah.

Lauren indicates that at first it was a relief to not have to play. However, once freed of the pressure she began to miss playing basketball as well as the associated aspects of being a player. The loss of athletic identity equates to a loss of status (being a 'regular student'), loss of relationship in the form of her teammates and loss of purpose, as she questions how to use her time. Lauren's subsequent depression comes at a point of transition out of sport, which research shows to be a period of vulnerability, particularly for athletes who present with high athletic identity.

My impression of Lauren, however, is that she has at least in part resisted athletic identity. Prior to entering college her experience of basketball is presented as fun and her personal value was not centred around achievement of performance goals. It appears that only upon playing in the college environment, did she become immersed in the performance narrative which was both detrimental to her mental health and also served to heighten the singularity of

her athletic identity, which is then experienced as a loss following her departure from the team. This is further exacerbated by the loss of her imagined future in sport:

L: You dream about having Senior Night. You dream about having a great...last year, you know, maybe you want to go play professional, and it was like, I lost all of that [mmm]. So that was something that I had to deal with as well.

I Just Needed Support

We return to discussing Lauren's difficulty in accessing support:

L: Right, like I kind of view it like, okay we're doing conditioning and you pull your muscle but you don't want to say you're injured because you don't want people thinking that you're just trying to get out of it, you know what I mean, and I feel like having anxiety was the same way. It was like, you just want an excuse to be weak [right]. And it's like, no, I don't. And I'm not saying like, I need an advantage over my teammates or anything, it was just more I just needed support [yes, mmm] You know. So. And that's one thing that I didn't get.

Lauren elaborates on the difficulties in expressing vulnerability within the college setting. She makes the analogy to physical health, noting that any vulnerability - be it physical or mental - is hidden because there is a fear it will be taken as evidence of weakness. Lauren does not get support, nor does she ask for it. To her mind, to ask for support is to admit to weakness, in a team which does not tolerate weakness. She is in the dilemma of being very aware of her need for support but also aware that to ask for it will further exclude her, and amount to a failure to perform the desired athlete identity within that particular subculture, expectations which are communicated to those within it through both the organisational structure (funding that can be taken away for non-conformity) and the coaches' overt alignment with the performance narrative.

However, I was also curious as to the extent to which Lauren has internalised these messages such that they manifest in a pressure both internally and externally:

L: I think, I mean everyone always says you can't just be physically tough, you have to be mentally tough as well, like you know, and I think really at that level, it's a big, it's something big, you have to be mentally tough [mmm]. You can't have weaknesses, you know. And, in my mind it was like, okay well, I already have, like, a little disadvantage and then on top of that I'm not getting the support and help that I need, so now I'm really being impacted [mmm] and

now I don't know what to do and now my performance is being impacted and now I'm just stuck.

Lauren first locates the imperative to be 'tough' within sports culture ('everyone always says...') before claiming the perspective as her own, stating: 'I think really at that level...you have to be mentally tough. You can't have weaknesses'. This viewpoint is reinforced by her perspective that her performances were impacted by her experience of anxiety. However, Lauren appears to recognise that with support her mental health and performances would improve. In other words, she would be mentally stronger through being allowed to express her vulnerability and seek support for it.

Talking About It

Given Lauren's reluctance to talk about her mental health or seek support whilst at College, I was curious as to how it felt talking about it now:

L: Like, I've opened up to so many people about it and it's like, I, I think I just got to the point, where, I mean I've grown, and it's to the point where okay, well if you don't accept it, then you don't need to be a part of my life anyway [yes]...And that was a big thing, I think, the coaches just had a misperception of me. Because I was quiet, I wasn't just this outgoing person that's just going to want to be around everyone, and you know, I was just more to myself, because I was so anxious, and I don't think they understood.

Lauren describes going from not wanting to talk about it to talking freely about her mental health problems over time. She is no longer looking to others for approval and permission to be who she is. This is a story she effectively enacted in leaving basketball. She did not feel accepted and understood in that context and consequently left. It appears that leaving the team resolved an identity issue for Lauren. She was able to move towards accepting herself by moving out of an environment which was unsupportive.

Just An Athlete

I asked Lauren how she felt about herself during the period when things weren't going well in basketball:

L: Not good [no]. Not good [mmm]. Not good at all. And it just, I dunno, it just gave me that, that perception that okay I'm just an athlete, Like, I can be replaced at any time, I can, you know, I don't have value as a person and so especially when I left the team and I lost that identity, it's like, okay, well, what am I? [mmm] You know. It took up so much of my time, like,

I didn't have time to do outside clubs and, and you know, other academic things. It was just strictly basketball and school on the side.

Lauren's perception that her value was contingent on athletic performance led to her self-worth being linked to performance. In stating: 'I'm just an athlete', Lauren suggests awareness of the way in which her identity options are being limited. Lauren appears to yearn to be more than an athlete but finds that the demands of college basketball render this impossible. The more her identity is narrowed around athletics, her difficulties in performing mean her value both to herself and others is reduced.

Whilst the performance narrative and 'winning is everything' is often conveyed in terms of dedication and motivation, for Lauren the prevalence of the performance narrative appears demotivating. It does not appear to me that she ever fully adopted the position for herself, other than as a means of attempting to fit in. Instead she has longed to be seen as more than an athlete but is limited by the narrative operating around her and upon the coaching staff. Not feeling valued or related to beyond her identity as basketball player for Lauren means disengagement, reduced enjoyment, an increase in anxiety and ultimately stopping playing. There is a lack of alignment between her self-identity and the one which she is directed to perform.

Not Talking / Talking

Lauren tells me that her mother wanted her to see a counsellor and drove down from her home several hours away to see her given how 'bad' she was. However, Lauren tells me she did not want to talk:

L: I think one of the, one of the biggest things that I told her, I was like, I don't want to talk to someone who doesn't know anything about sports [right, mmm]. I don't want to talk to someone who's never played basketball and doesn't get it [right].

I was struck that Lauren's resistance to support-seeking was related to her expectation of not being understood. I noted that this was a theme for Lauren, following from her coaches' failure to understand her and a partner she also referred to as having not understood her anxiety. This comment speaks to the importance of helping professionals being contextually well informed when working with sports people. Lauren's reluctance to seek support outside of sport also puts her in a difficult position, in effect leaving her with nowhere to go given there was no support available from within the sport:

L: Yeah, it was just, oh you know, we have a counselling centre and here's their number if you need anything [right]. It's just like, I guess [yeah]. It was kind of like oh, well if you have something mentally wrong with you, we're not going to deal with it, just go over there [go over there], they can deal with it.

In Lauren's experience, welfare issues are not held as the responsibility of athletic departments to address, but instead players are expected to seek help elsewhere. There is a tension between the location of responsibility, which moves between the team, the individual and outside services. This tension is also played out in Lauren's own story as at times she seeks to be understood by the coaching staff and expresses disappointment that this is not forthcoming, but at other times she seeks to hide her anxiety.

I am struck by Lauren's openness during the interview, given how difficult it has been at times for her to talk about her experience. I ask Lauren how she made the shift:

L: I think just being out of a toxic environment just really helped me to, just to heal, I mean just taking a break from basketball helped me realise that I, I did have a bigger identity than just sport [mmm] and that's why I said, like, I don't regret that decision, because if it didn't happen I would have graduated college and been stuck, not knowing what to do with myself, but with that I got a chance to realise, okay, I really am more than an athlete.

After leaving the team, Lauren developed a sense of identity outside sport and became 'more than an athlete'. To develop her identity in this way, Lauren needed to leave. Performing the role of athlete in her experience was limiting and she was not able to be more than an athlete whilst playing.

Lauren goes on to tell me that she went to counselling off-campus which helped her find ways to deal with her anxiety:

L: Um, well, I, I did go to counselling (laugh), finally.

SH: Oh you did! (laugh) In the end.

L: I had to really be talked into it. Outside of campus I did go to counselling, I went to a lot of sessions, and I mean just talking about it and just finding ways to deal with, you know, the anxiety part, to deal with what to do when stressful situations do come up [mmm] really, really helped [yeah]. It was something that I kind of wished that I did sooner...

Earlier in our conversation I had asked Lauren if she'd ever had therapeutic input and she had said no. I didn't explore this contradiction. I had the sense that she hadn't wanted to disclose going to counselling and then ultimately decided to do so. I didn't press her because I respected her choice to omit details she didn't want to share. However, it left me curious about why this would not be part of the story she wanted to tell. I wondered if her ambivalence around this disclosure was a reflection of the tension between talking and not talking which appeared at other points in Lauren's story. At times she presents as seeking support and a desire for communication and at others doesn't want to talk. There are times she seeks counselling and others when she resists it.

In our second conversation I asked Lauren about this contradiction in her story:

L: I don't know, it's just back then I just felt counselling was something only weak people do [right, right]. I was just like, I don't want to talk about my feelings.

Lauren's response confirmed something of her ambivalence around counselling and how she saw it as at odds with the performance of an identity built around the presentation of mental toughness. Her similar ambivalence around acknowledging receiving counselling suggests that there remains some tension about this aspect of her story. That said, Lauren has become more open about her experiences, which she attributes to the increase in stories of athletes with mental health problems:

L: I think mental health is starting to be a topic that is on the rise, especially with professional athletes speaking out about theirs and it's like, oh okay, well athletes do, do go through these things. And I know that's one of the biggest reasons why I started talking about mine cos professional athletes in America, like they started writing articles about, you know, their depression [mmm] or anxiety and I'm like, oh okay, so I guess this is somewhat normal...I just felt like it was something that only I was dealing with [yes], and I think that's another reason why I just felt so alone cos I'm like, okay, I'm the only one going through this, like, it's embarrassing.

Finding out others suffered in similar ways served to counter the feeling of isolation and difference that Lauren was experiencing, which she found embarrassing. Whereas previously silence was a way of minimising and denying difference, hearing the stories of others served as a mechanism for Lauren to talk about her own story and resist the dominant narrative and develop her own narrative resources.

New Identity

Given the sense of loss that came with stopping playing basketball at college, I asked Lauren how she felt about her decision now:

L: I wouldn't change it. I wouldn't change it. I mean cos even without it, I'm studying again, still playing basketball. I mean it's not at the highest level that, you know, I've been at, but it's still something [yes] and it's the environment that I was in before I went to college, it's just, it's just basketball, and now my, my health is the best it's ever been.

Here Lauren demonstrates a broader sense of identity. Whilst basketball is part of that identity, it does not sit at its centre. Her relationship to basketball has reverted to her pre-NCAA days when it was a healthy outlet rather than a source of anxiety. Now again, 'it's just basketball', which I take to mean it's just sport, rather than business. Lauren has re-engaged with basketball but resists the performance narrative. Winning is not everything, basketball is not her only identity option and now her mental health is 'the best it's ever been'.

In closing we reflected on the process of growth that had occurred for Lauren as a result of her experience and stopping playing at the NCAA level. I was struck by how detrimental her time playing had been to her mental health, and the emotional environment of the team which was so inhospitable. She was not in a psychologically safe environment and had no mechanism for making it safe. Unable to emotionally thrive in that environment she took the decision to leave the team, but in doing so, reclaimed her wellbeing and expanded her identity options. Whilst Lauren has no regrets about her decision to leave, there remains a sense that things could have been different. In our follow up interview, she told me:

L: I felt like, with my anxiety and everything, I felt like if I had coach support, the people I was around every day, I would still be there [yeah, yeah]. I don't feel like I would have felt so strongly about leaving or not being in that environment. Like, if I had that support, I would have been fine.

Learning

Lauren's story demonstrates the way in which her sporting culture at NCAA level limited her identity options, with the demand for mental toughness in which she only had value as an athlete. Lauren's story shows the damage caused when there is a lack of alignment between lived experience and the expectations of the surrounding context. Lauren's only way to resolve this tension was to leave the elite sports environment in order to reclaim a fuller identity.

4.5 OVERVIEW OF THEMES

Taken together, these stories illustrate a number of interesting themes. The narratives in this study demonstrate the interaction between the individual and the local context in terms of both shaping sporting identity and the extent to which the experience of a mental health problem is a threat to that identity. It is of note that where the sports culture sits comfortably with vulnerability, this is mirrored in the individual (Sara). By contrast, where the culture prohibits vulnerability, those within it experiencing mental health problems feel compelled to hide their problems, fearing social exclusion. Sports culture is therefore seen to influence the expression of vulnerability and how mental toughness is understood, with these meanings often conveyed through the language and behaviour of coaching staff. The stories in this study also demonstrate the dominance of the performance narrative both individually and organisationally and highlight the ways in which this is transmitted through the system, limiting athletes' value to their sporting performance. When athletes' experience does not align with the cultural expectations, this is experienced as problematic, and results in efforts to re-establish that alignment or leave sport.

CHAPTER FIVE: DISCUSSION

Having analysed the narratives of participants individually, I will now explore themes as they appear variably across narratives and in relation to the wider research literature. I make use of the preceding narratives to first consider the relationship **between mental health problems and sports person self-identity**. I then go on to examine the ways in which sporting subcultures impact upon the experience of mental health problems and **support-seeking** behaviour. Finally, I discuss the tension in the system and individually between **welfare and winning**. Although I am organising my discussion thematically, I note that there is significant overlap and inter-relation between these areas which are not storied as discrete themes.

Within each of these sections I will consider the implications for therapists and other practitioners working in sports contexts as well as for organisations who seek to create environments which are supportive of mental wellbeing.

5.1 MENTAL HEALTH AND SELF-IDENTITY

Here I will discuss the relationship between self-identity and mental health as it relates to literature in relation to athletic identity, mental toughness, the performance narrative and trauma.

5.1.1 Athletic Identity

Consistent with previous research findings (Brewer et al., 1993; Doherty et al., 2016), for the athletes in this study mental health problems are associated with high athletic identity. However, there is considerable divergence in the extent to which they embrace or resist the singular identity of athlete.

James regards rugby as part of his 'DNA', fundamental to his sense of self. For James, there is little evidence in his story of ambivalence and he does not seek to reduce the importance of rugby in his life, instead continuing to seek opportunities to perform his rugby identity post-retirement. For James, a high athletic identity is desirable and he has found a way to retain, expand and re-story the rugby player identity to include 'being human' and expressing vulnerability in order to maintain his identity alongside his mental health problems.

Sara, by comparison, presents with some ambivalence about her athletic identity. Whilst she recognises that it is 'not necessarily helpful' to have such a singular focus, she also constructs her life around sport and finds it difficult to find ways to integrate non-sports related and sports related worlds. Both Sara and James recognise the possibility of engaging with sport in a

different way (Sara: 'there are more important things', James: 'it's only a game') but both resist these alternatives and consider their sporting selves as essential.

Lauren's experience of athletic identity, by contrast, is strikingly ambivalent. Lauren wants to express other aspects of her identity. For Lauren, playing elite basketball represents being 'just an athlete', an indication of her awareness that her identity has been constricted. It comes as a relief to Lauren to re-engage with basketball post college as 'just basketball'. For Lauren, it really is just a game. This is the narrative she lives that allows her to have a broader sense of self. That said, she struggles to adjust when the function of athletic identity is removed. The college basketball environment (for the duration of her involvement) succeeded in limiting her sense of self around sporting accomplishment and persuaded her to conform expression of emotionality to the norms of her sport, in support of the findings of Lee Sinden (2013).

As such, the athletes in the study have different relationships to athletic identity and the extent to which it is accepted or resisted. However, for all participants high athletic identity has been problematic in relation to their mental health. For James, his experience of depression was at odds with his athletic identity and the performance of being a rugby player. This lack of alignment between his experience and the preferred identity led to feelings of failure, shame, difference and contributed to his choice to hide his mental health problems. Sara struggled with depression following injury, which she portrays as being a loss of identity as well as a challenge in terms of rehabilitation. Lauren became depressed after leaving her basketball team, rendering her with no sense of purpose or direction.

These stories demonstrate that amongst those presenting with high athletic identity, there can be significant variability in the extent to which this is adopted or resisted (as noted by Carless & Douglas, 2013b). Lauren's story in particular also highlights the subcultural *demand* for high athletic identity even where the individual seeks to express other aspects of the self.

Taken together these stories support the existing research in suggesting that high athletic identity can be a contributory factor in the emergence of mental health problems when the function of that identity is removed (such as Grove, Lavalley & Gordon, 1997; Hughes & Leavey, 2012; Kuettel, Boyle, & Schmid, 2017; Ronkainen et al., 2016; Willard & Lavalley, 2016). This also expands the body of narrative research exploring athletic identity (see Ronkainen, et al., 2016) to include the intersection with mental health. This study also points to the benefits and pleasure derived from an athletic identity and the variability in the extent to which athletes seek to explore or integrate other aspects of the self. This speaks to the need to understand the individual's relationship to their athletic identity and how this relates to their mental health, as well as the centrality and exclusivity of that identity.

Implications for Therapists and Practitioners

Therapists can work with athletes to broaden their sense of value and worth beyond achievement in a sports context. Whilst in practical terms athletes have limited time to pursue other avenues of identity whilst performing at a high level, they can nonetheless be supported to find value in their personal characteristics and qualities which are not exclusively performance related.

There is a tension for me around challenging athletic identity with athletes who see this as central to their sense of self (such as James). I would consider it useful to work with an athlete to understand the features of athletic identity which 'provide them with the greatest personal significance' (Ronkainen et al., 2016: 133). This study suggests athletic identity does not have to be given up in the service of mental wellbeing if alignment can be found between the individual experience and the culture of which an athlete is a part. Maintenance of a meaningful athletic identity could be achieved post career through coaching (i.e. James), during injury through maintaining relationship to teammates (i.e. Sara), or through continued engagement in sport recreationally.

Implications for Organisations

To create emotionally healthy environments organisations can promote expressions of identity and value beyond sport. For example, athletes and other staff can be encouraged to explore other hobbies, interests, relationships and career options outside of their sport and valued for qualities of the self that are not limited to the performing self. This requires staff to be self-aware about the ways in which they may inadvertently devalue non-athletic elements of selfhood through exclusive attention to the identity of athlete. As noted by Nelson (2001:72) 'my identity is also constituted by the stories other people construct around the things about me that seem most important to them'.

Organisations who seek to restrict athletes' access to other expressions of selfhood may wish to consider for what purpose this is expected. Organisations often reinforce and foster the belief that an athlete must devote themselves exclusively to their sport to achieve success. This demonstration of commitment can also be thought of as a performance of the identity of athlete, a way of communication with coaches that the athlete is sufficiently dedicated and mentally tough (Tibbert et al., 2015). The demand that commitment is communicated through exclusive devotion to a singular identity could be reconsidered particularly as research demonstrates that success can be achieved in the absence of an obsessive commitment to

sport (Carless & Douglas, 2012) and the evidence that such a singular identity can be detrimental to mental health.

5.1.2 Mental Toughness.

The mental toughness narrative relates to athletic identity, with toughness often being viewed as a desirable characteristic of the performance of a sports identity. The stories presented in this research can be viewed as stories of enculturation, supporting the work of Tibbert et al. (2015) in pointing to the mechanisms by which athletes adopt the values and cultural ideals prevalent locally. The hyper-masculine ideals identified by Tibbert et al. (2015), such as denial of vulnerability and ignoring injury, are evident in both James's and Lauren's stories, who both attempt to live up to such ideals to maintain approval and gain acceptance. This study additionally supports and extends the findings of Steinfeldt & Steinfeldt (2012), in demonstrating the mechanisms by which subcultures characterised by a hyper-masculine version of mental toughness operate to silence and limit expression of vulnerability.

For Lauren, mental toughness is an explicit demand made by coaches and internalised. This leads to Lauren questioning if she is 'soft' and avoiding speaking to her coaches or others about her mental health for fear of how this is perceived. For James, although he does not use the term, he alludes to the toughness narrative when he expresses his fears of being weak. For both Lauren and James, being unable to comply with the dominant ideal of 'toughness' operates to inhibit support-seeking and exacerbates their mental health difficulties.

Sara, by contrast, whilst aware of the operation of the typical mental toughness narrative, resists it. She maintains a view of herself as a mentally strong athlete alongside her mental health problems. Sara adopts a view of mental toughness which includes support-seeking and this perspective is mirrored within her sports context in which sharing of vulnerabilities is encouraged and supported. Sara's story points to the capacity to hold different self-states, to be able to hold an identity which can incorporate the self in both the fragile and strong states.

This study builds on the work of Tibbert and Andersen (2015) in illustrating the social construction of the toughness narrative, and also expands upon it by exploring both how it operates variably in different contexts and how it specifically relates to the experience of mental health problems.

This study also supports the findings of Brownrigg et al. (2018). The narratives contained within their study of ex-footballers undergoing rehabilitation for addiction were thematically very similar to the findings of this project, particularly regarding the expectation of portraying

invulnerability and the participants' experience of their value being restricted around performance outcomes. This work expands these findings beyond football into other sporting cultures and nationalities. Lauren's story also demonstrates that the prevalence of the hyper-masculine ideal is not limited to male sports environments. Further research may seek to explore further the relationship between gender and the adoption of hyper-masculine sports cultures.

As noted, Bauman (2016) asks if mental toughness and mental health are seen as contradictory in elite sport. The answer to Bauman's question implied by these stories is more a question of the extent to which the individual experience is aligned with the subcultural norms around expression of vulnerability and support-seeking. The distinctiveness of the stories, particularly in terms of how mental strength is portrayed variably as including (such as Sara) or excluding (James and Lauren) expression of vulnerability, indicates that the compatibility of mental toughness and mental health is dependent upon the version of mental toughness which is operating locally. This supports Tibbert and Andersen's (2015) assertion that mental toughness (and to my mind its capacity to co-exist with mental health problems) is whatever a subculture says it is.

Implications for Therapists and Practitioners

Outside of sports contexts, therapists are rarely called upon to support mental toughness (as expressed in those terms) though are often dealing with related concepts of coping, stigma and self-stigma which are centred around feelings of weakness.

However, toughness is often a demand within sports culture (including from media and fans) and a characteristic of the performance of a sporting identity. Sport psychologists frequently work with individuals and organisations to develop mental toughness in the service of achievement of performance goals and as such practitioners are in a position to influence how toughness is conceptually understood in a particular context, or to move away from the toughness narrative completely.

A mental wellbeing-oriented approach might invite clients to develop a sense of strength which involves facing fears, expressing and accepting uncomfortable emotions and tolerating vulnerability. Such an approach promotes emotional awareness and invites engagement with and regulation of emotion rather than disconnection/overwhelm which can be a threat to mental health. Dispensing with the toughness narrative entirely in favour of a promotion of resilience models (such as Fletcher and Sarkar, 2013) is one way to achieve this.

Therapists can work with clients to find more flexibility and distance between the cultural imperative and their own belief system by recognising that toughness is not a fixed trait of an individual, but rather a socially agreed contract for what performing an identity looks like in a particular setting. Therapists can draw upon narrative approaches to psychotherapy and work with clients to understand their relationship to the concept of toughness as a narrative of which they have become a part, allowing athletes to intervene in their own lives and bring forth new choices about the authoring of their identity (White and Epston, 1990).

Therapists might also consider that when seeking support to develop toughness, a client may be seeking to meet the subcultural demands around limiting expression of emotionality (e.g. Lee Sinden, 2013). This goes beyond the rejection of expression of vulnerability to also include expectations of elation at successes and disappointment at failures as other examples of how athletes are expected to portray emotions along prescribed pathways. Therapists can work with clients to understand the value of all of their feelings, including those associated with 'weakness', such that they can be learned from and regulated.

However, whilst individuals can be supported to develop a more nuanced understanding of mental toughness, it is essential to recognise that this may not be in alignment with the organisational position. Athletes (particularly in leadership roles) have the opportunity to expand the notion of mental toughness through talking about it in a different way, but many who are limited in power and fearful of the consequences of acting out of alignment with the local subculture will be in a more difficult position. Therapists must help such athletes manage this tension, help athletes recognise safe spaces for support and enable the development of counterstories:

Counterstories, which root out the master narratives in the tissue of stories that constitute an oppressive identity and replace them with stories that depict the person as morally worthy, supply the necessary means of resistance. Here, resistance amounts to repair: the damaged identity is made whole. Through their function of narrative repair, counterstories thus open up the possibility that the person could attain, regain, or extend her freedom of moral agency (Nelson, 2001: 150).

Therapists and psychologists might also consider their own beliefs about mental toughness. Those working in organisational contexts will be mindful that the locally understood conceptualisation of mental toughness will be operating upon them too and may require adoption of a reflective stance to ensure that practitioners do not inadvertently reinforce maladaptive toughness narratives.

Implications for Organisations

As noted, the imperative to be mentally tough would appear to be detrimental to mental health in the participants of this study, depending on what that means contextually.

In these stories, mental toughness as narrative is conveyed through language, behaviour and social norms within a sporting subculture. Clubs and organisations can reflect on what they would prefer mental toughness to mean locally or move away from the language of toughness completely, replete as it is with associations of denial of vulnerability.

Attention must be paid to how meanings are communicated through both verbal and non-verbal domains. Lauren was not explicitly told she could not express herself openly, but she picked up the message nonetheless. For Lauren in particular, the stories told about her contributed to her own sense of identity.

An organisation which wants to support mental wellbeing may do so by promoting support-seeking, facing up to difficult emotions, and expression of vulnerability as attributes of courage, and this should be enacted in the relational interactions of those in power positions.

Fear of showing weakness in terms of the implications for career/selection also came through strongly in the stories told by Sara, James and Lauren. Whilst Sara was not deterred by this, she was aware of this possibility. If coaches conflate mental health concerns with mental weakness then athletes might indeed be right to be concerned. To counter this, those in power positions can be educated about mental health problems. A space can be created for counterstories to be heard which can demonstrate that high-level sports performance and mental health problems can co-exist, that someone can be vulnerable and also 'tough' in the context of playing sport, or experience these elements of their selfhood variably at different times and in different contexts. Little is known about the impact of mental health problems on performance outcomes and this is an area that future research could explore. However, it is of note that both James and Lauren felt they would have performed better had their mental health issues been addressed. Therefore, it could be suggested that both wellbeing and performance goals could be served by the development of a facilitative culture.

5.1.3 Performance Narrative

On a related theme, the stories told in this project demonstrate the dominance of the performance narrative, particularly at the organisational level. As noted by Douglas and Carless (2018: 283): 'For athletes whose lives align with the performance narrative, life is

commonly described as a 'rollercoaster' as self-worth and mental well-being rise and fall with success and failure. For these athletes, who tell a 'winning is everything' story, emotional trauma ensues when they are no longer able to sustain their winning identity and story (such as after injury, deselection and retirement).'

Both Peter and Lauren's stories particularly highlight the system-wide operation of the performance narrative. For Peter, those working in sport were consumed by the need to win at all costs; the pressure on coaches to win being transferred and transmitted to athletes, whose value is restricted to their medal potential. Peter's resistance to the performance narrative and concern for athlete welfare left him isolated. Similarly, Lauren identified her coaches' need for success to further their own careers translating into athletes being reduced to mechanisms for achieving this and their humanity and individuality overlooked. Under the demand of the performance narrative, Lauren's performances paradoxically suffered and her mental health deteriorated. Both Peter and Lauren, in not aligning themselves with the performance narrative (or doing so ambivalently in Lauren's case) led to them experiencing a lack of fit between their experiences and the context in which they were a part. Their stories highlight the ways in which sports culture can restrict the plotlines and identities that are available to those who work in sports around performance themes, in support of existing research around the dominance of the performance narrative (e.g. Douglas and Carless, 2006, 2009).

Peter and Lauren's stories in particular highlight the difficulty in resisting the performance narrative whilst remaining within a performance culture. For Peter, his act of resistance on behalf of athletes led to isolation and exclusion. For Lauren, leaving her basketball team was her only mechanism for exploring other identity options. Therefore, it seems that resisting the performance narrative can be extremely challenging to negotiate in environments where it dominates. That said, Carless and Douglas (2013b) found evidence of those who were able to achieve excellence whilst resisting the performance narrative, suggestive that this remains a possibility. However, in their study, those who resisted the performance narrative were able to do so through drawing on alternative narrative types, such as relational or discovery narratives. The isolation experienced by Peter and related sense of being 'different' experienced by Lauren also limited their access to the alternative relational narrative.

Therefore, whilst previous research and the athlete stories contained in this research highlight the ways in which living the performance narrative can contribute to mental health problems, Lauren and Peter's stories also demonstrate the potential problems of resisting the performance narrative when operating in performance dominated cultures. This supports

existing research which points to those who do not tell performance narratives not being understood or valued in the world of sport (Carless & Douglas, 2013b; Douglas, 2009, 2014; Douglas & Carless, 2006, 2014) and expands the existing research to specifically highlight the way this can impact upon mental health. This finding points to the need to expand the narrative resources available to athletes from which they can make sense of their experiences.

Implications for Therapists and Practitioners

Those working or performing in sports contexts are presented with a challenge when the system in which they operate is dominated by the performance narrative. The relentless pursuit of performance goals - often at the expense of mental health – can create an unhealthy working environment in which there is limited power at the individual level to implement change.

Individuals in such organisations are faced with a dilemma around ‘living with’ such conditions, challenging or leaving. Both Peter and Lauren made the decision to leave, Peter having challenged the system (with some success) before doing so. By contrast, James (albeit at the point of retirement) opened up about his problems and found the environment more understanding than anticipated. Sara was not faced with such a dilemma given her supportive context.

Therapists can support athletes and others in sports to resolve - or live with - this tension. Options for athletes can involve ‘playing the part’ as illustrated by Carless and Douglas (2013b) in which individuals ‘covertly maintain a multidimensional life story, but silence this story when powerful others require performance stories’ (p701) or accessing alternative narrative types such as relational or discovery stories. For others this can involve acknowledging that the lack of fit is intolerable. For some, like Lauren and Peter, this might mean ceasing to be involved in high level sport.

Those working with athletes on behalf of an organisation are faced with a particular difficulty as they can find themselves in the dual role of supporting the athlete and the organisational agendas (which may differ) and the therapist may be implicitly or explicitly expected to support organisational aims. In such situations, therapists need to clarify their role, particularly around who is the ‘client’, and acknowledge that the best interests of the individual and organisation are not always the same thing, particularly where an athlete is considering leaving sport.

Implications for Organisations

Organisations who are themselves dominated by performance goals will have some difficulty to not transmit this to athletes and it is suggested here that this can translate into pressure through the whole system which reinforces the performance narrative individually and encourages high athletic identity (potentially with a hyper-masculine 'mental toughness' imperative running through it).

Organisations who operates as businesses, where jobs are contingent on performance outcomes, are in some difficulty in managing this tension. One way to do so is through recognition that to loosen the grip of a results orientation may lead to better performance as a by-product and reduce drop-out from those who struggle to negotiate the environment. Little is known about the impact of mental health on performance outcomes or elite sport drop-out. Here at least Lauren and James felt that that their performances would have been better had they had better access to mental health support or been able to more successfully resolve their health issues. However, more research is needed around the performance implications of mental health problems to draw meaningful conclusions.

5.1.4 Trauma Perspective

As noted, there has been increasing acknowledgement of the experience of trauma within sport as it relates to both events that occur within sport (such as injury, abuse, harassment, and bullying) and the experience of loss of identity that occurs when sports careers come to an abrupt end or are threatened through injury or deselection.

As noted by Day (2018), trauma stories in sport often follow the restitution narrative (Frank, 1995), in which they are called upon to demonstrate the adversities that were overcome en route to success and the mechanisms for fostering growth following adversity (e.g. Sarkar, Fletcher & Brown, 2015). However, for many, sports related trauma may have devastating consequences leading to the end of a sports career or occur as a result of the conclusion of a sports career (e.g. Douglas and Carless, 2009).

The stories contained within this study feature characteristics which could be viewed as traumatic, whilst not necessarily meeting diagnostic criteria. As has been noted by researchers, whilst the DSM-5 (2013) criteria for post-traumatic stress disorder (PTSD) requires that someone be exposed (as direct victim, witness, or indirect victim) to actual or threatened death, serious injury or sexual violation, the responses to such events as sporting injury, concussion or the loss of identity following retirement have been found to share the symptomology of PTSD (Bateman and Morgan, 2019; Brassil & Salvatore, 2018; Wippert and Wippert, 2008), leading the International Olympic Committee consensus statement (Reardon

et al., 2019) to recommend screening following musculoskeletal injury and psychological debriefing of individuals/teams following traumatic incidents.

In terms of the stories told in this study, James's response to witnessing a colleague sustain a life-changing injury is suggestive of trauma, as he describes intrusive thoughts about personal safety that he managed by 'getting on with it.' Whilst this event brought into awareness the risks involved in playing rugby, James used dissociative strategies to avoid facing up to this possibility, such disconnection between left brain 'getting on with it' and right brain emotion driven actions and reactions being a typical response to trauma experiences (Fisher, 2017).

There is also a suggestion within this study of vicarious trauma. Peter is dealing with stories of harassment, bullying and discrimination amongst those he is supporting, who he describes as 'very mentally poorly.' His language is particularly striking (noted in the poetic representation), as he refers to 'horror films' whenever he closes his eyes, suggestive of intrusive thoughts and images. Peter's experience speaks to the wide-reaching impact of trauma in sport that goes beyond the intrapersonal (Day, 2018).

In addition, potentially traumatic loss of identity is figural for all athlete participants within this study. Sara reports loss of identity following injury, James reports his mental health problems posing a threat to his sense of identity and Lauren reports experiencing depression following loss of identity after leaving her team. These experiences represent the loss of access to a sustaining self-narrative, which results in considerable distress. Theorists have noted that traumatic experiences fragment the narrative structure through which individuals organise life events, resisting integration into pre-established meaning systems (Stewart and Neimeyer, 2008). As such, identities become fragmented as experiences fail to align with the central storyline around which meaning and identity is organised.

In the context of career termination, Wippert and Wippert (2008) have considered this loss of identity from the perspective of 'social death' (Rosenberg, 1984) in which established and long-standing beliefs about personal identity and social value become meaningless. This can result in severe emotional disturbance as career termination can result in both loss of identity and loss of established social support networks. The fragmentation of the sense of self that arises as worldviews are shattered, presents a significant challenge in which social support has been suggested to have a buffering effect (Day, 2012). However, as noted, often the relational loss that co-occurs with injury or career termination limits access to this support, as experienced by Lauren. By contrast, Sara maintained contact with her teammates following her injury and ensured ongoing access to social support which served to sustain relational

bonds and her role within the team. This highlights the ways in which the distress caused by threats to self-identity can be mitigated through ongoing access to teammates and sport related roles.

As pointed out by Day (2018) trauma stories may also be silenced due to the operating cultural norms and values which cause people to fear speaking out, as part of a broader issue in sport around expression of vulnerability. Where trauma stories are shared, Day (2018) notes how such stories tend to celebrate triumph over adversity with positive endings and growth after trauma. All the stories in this study fit this narrative type. Whilst Peter's mental health suffers due to his experiences in elite sport, at the point the story is shared, he has learned from the experience and is ready to go 'back in for more'. Similarly, whilst Lauren leaves her college team, at the point of sharing she reports her mental health as better than ever, and is playing basketball again, albeit at a lower level. Sara returned to play at a high level following depression and all participants have found ways to use their experiences of mental health problems to support others and increase awareness. This suggests the possibility that only those trauma stories which evidence post-traumatic growth are tellable in sport and highlights the potential for a dominant discourse to arise in respect of adversity which precludes the voicing of experiences which do not follow this narrative trajectory.

Implications for Therapists and Practitioners

Practitioners adopting a trauma perspective will hold awareness of the impact of trauma on narrative development. Memory processes in relation to traumatic events can remain fragmented and unintegrated, precluding the development of an elaborated narrative (Neimeyer and Stewart, 1996). This can present as silence, in which individuals do not have the language to provide descriptive accounts of memories encoded implicitly as emotional or physical states (Fisher, 2017; Van der Kolk, 2006). Therefore, identifying trauma reactions requires attendance to the unspoken and implicit, as well as storied aspects of experience and sensitivity to the ways in which behaviours which can be made use of adaptively in sports contexts such as disconnecting, dissociation and maladaptive perfectionism can also mask underlying trauma (Aron et al., 2019).

Implications for Organisations

Existing research and findings from this study point to the importance of ongoing support and access to social roles at points of injury and career termination as a buffer to the potentially traumatic loss of identity that can result. This work also points to the potential prevalence of trauma or vicarious trauma reactions from those who witness traumatic incidents or are

supporting traumatised individuals. This requires sensitivity to the support needs of those affected indirectly as well as directly by traumatic events. As already noted in relation to vulnerability more broadly, this work also reminds organisations that trauma stories may be present across organisations and highlights the need to counter the potentially silencing effect of unsupportive cultures through attending to, rather than avoiding difficult events and experiences including those which do not follow the plotline of 'triumph over adversity'.

5.2 SUPPORT-SEEKING

The second section of the discussion focusses around barriers and facilitators of support-seeking as storied by the participants in this project.

The participants in this study sought support through different means. Sara sought support through the referral pathways available through cricket. James took up external counselling. Lauren took up off-campus counselling (though would have preferred access to sports specific service internally). Peter took up psychotherapy independently.

I begin by exploring the theme of relationships and how that intersects with choices around support, noting that there is also overlap with this theme and the identity issues discussed above. I will then go on to briefly explore mental health awareness before exploring the power relationships operating in sport and their effect on support-seeking.

5.2.1 Relational Loss

For James, Sara and Lauren, the performance narrative is a feature of their stories, but as it relates to mental health, I would argue not dominant. Whilst James describes the importance of winning, it is fear of the loss of belonging and relationship which is central to his story of shame and hiding of his mental health problems. Sara, similarly, stories her experiences in terms of connection with her teammates more so than performance outcomes. Lauren too expresses concern about being different from her teammates and conveys her sense of not correctly performing the role of basketball player in the way that was expected in her college context. For Lauren, (like James) her sense of difference serves to silence and isolate her.

As such, for the athletes in this study, their sense of identity does not appear to be only bound up with performance outcomes so much as their opportunity to participate in a sports environment and achieve the sense of belonging that such an environment confers. This prioritising of relational bonds fits with Carless and Douglas's relational narrative. However, I see it operating in a potentially problematic way. Whilst Carless and Douglas see the relational

narrative as a potentially healthy alternative to the performance narrative, within these stories, the fear of loss of relationship has served to limit identity options in James's case, and led to intolerable feelings of difference in Lauren's case. For Peter, in operating outside the performance narrative and being isolated, he also had no access to the relational narrative. The capacity to maintain bonds through sport in these stories requires the performance of a particular version of athlete identity. Thus, in presenting as 'different' through acknowledging vulnerability and mental health issues, the relational narrative option is under threat and athletes risk being stigmatised.

Within Sara's injury and rehabilitation, she maintains the relational narrative whilst the performance narrative which operates alongside it fails, demonstrating that these narrative options can coexist. James's fear of loss of relationship causes him to hide his mental health problems for an extended period. However, in ultimately revealing his problems, he finds himself accepted by the group and his relational bonds maintained. These stories particularly highlight the value of relationship within athletic identity and the importance of maintaining relationship, particularly in the absence of performance opportunity.

The anticipated loss of relationship in James's case keeps him silent, whilst in Sara's case it prompts her to maintain communication. Both actions appear to be motivated by the need to maintain a sense of belonging and connection with teammates and the particular actions reflective of the subcultural norms which operate around how bonds are formed and maintained. Within James's rugby culture, this is achieved through banter and collective demonstration of hyper-masculine ideals. For Sara, this is achieved through expressing and sharing feelings. The cultural norms are then seen to be recreated in James's and Sara's efforts to maintain connection at points of crisis.

When James shares his experience of depression with the team he is acting outside of the norms of the rugby environment. However, he is met with support. The nature of the support, however, is in keeping with the environmental norms, in that it comes in the form of banter. It is because the response is within the typical norm that James's sense of belonging is restored as he is able to recognise that his personal struggle does not lead to exclusion and that difference is accepted.

Like James and Sara, Lauren's story is also a relational story, dominated by her experience of disconnection and relational failure. For Lauren, she cannot find a way that she can both maintain connection with the group and manage her mental health problems. To Lauren's thinking, to be open about her experience would inevitably lead to an exacerbation of her exclusion. However, she had no viable alternative, the anxiety she suffered also serving to set

her apart from others. For Lauren, the absence of a relational story is critical. She has been unable to find a way to achieve a relational narrative within her context and therefore both the performance and relational narratives and their sustaining identity functions are inaccessible to her.

Within the stories told in this project, access to the relational narrative is contingent upon compliance with expected norms and behaviours which are variably restrictive. The ways in which athletes conform to cultural norms to gain the acceptance of teammates and staff has been highlighted in the work of Tibbert et al. (2015) and Coulter et al. (2016). This study expands upon these findings by directly focusing on the implications of conforming to cultural ideals in how it relates to disclosure and support-seeking for mental health issues. In environments which support narrow identity options, there is the potential of feared or real relational loss and stigma through expressing difference. This can serve to silence in order to minimise the perceived difference between the self and others. This was apparent in both James and Lauren's concern that they were the 'only one' in their teams to be suffering with mental health problems and their desire to be able to perform the identities expected of them. This also impacted on support-seeking and hiding of mental health problems to avoid being perceived as different. This supports findings around the inhibiting effects of stigma on support-seeking within elite sport (Gulliver et al., 2012; Coyle et al., 2017).

Together these stories emphasise the importance of athletes maintaining a sense of belonging within their organisational context. This relates both to the performance of locally determined identity norms and maintenance of relationship and communication at times of forced exclusion through injury. Mental health issues can be understood as problematic both as contributing to feelings of difference, to risks of actual exclusion and as a response to exclusion through injury, retirement etc. The importance of relationship is not limited to athletes. Peter's story also relates to a theme of exclusion. Having resisted the performance narrative, Peter is isolated, denied access to a relational narrative, and his mental health suffers.

Implications for Therapists and Practitioners

Therapists and psychology practitioners can pay attention to the real or imagined risks of relational loss which may impact upon decisions around disclosing and seeking support for mental health problems. This may contribute to ambivalence around receiving support and self-stigmatising attitudes which may continue beyond the decision to seek help (Vogel & Wade, 2009). Therapists may wish to address how a client feels about entering therapy and the associated meanings so these can be worked through. Previous research has shown

adopting self-compassion to have a buffering effect on the relationship between perceived public stigma and self-stigma (Heath, Brenner, Lannin & Vogel, 2018).

Attachment oriented therapists are also likely to consider these anxieties in the context of a client's relational history and the interplay between past and present in terms of their expectations around relational security.

Implications for Organisations

Organisations can be mindful of the importance of relational bonds in minimising mental health vulnerability and reducing stigma. Organisations can reflect on how difference (in mental health terms or otherwise) is valued and conversely, to what extent identity options are limited through narrowly defined cultural norms. Creating space for different stories to be told allows a broader sense of 'belonging' to emerge and reduce potential for stigma. Sara's experience with her teammates of sharing their experiences, thoughts, feelings and valuing their differences provides a useful example of this.

An important mechanism for reducing stigma and normalising mental health concerns is through the sharing of stories. Many sporting organisations including Players Unions make use of this approach as part of their strategies for supporting mental health and reducing stigma. It is notable that Lauren began to open up about her experience when she became aware of other athletes speaking out about their mental health. This helped her move from the idea of being the 'only one' towards a sense of 'this is somewhat normal'. Talking about mental health as analogous to physical health is another means of normalising mental health concerns and support and a strategy drawn upon by the athletes in this study.

Organisations can also give consideration to developing mechanisms by which those who are necessarily isolated from teammates through injury etc. can maintain meaningful contact and inclusion. This chimes with recommendations from the Duty of Care in Sport report (Grey-Thompson, 2017) which similarly recommended retiring athletes have more opportunity to retain contact with the sport.

Organisations may also choose to offer access to external support such that athletes do not have to expose their mental health issues internally given that for some, to do so may create anxieties about the consequences of non-conformance to identity ideals.

5.2.2 Lack of Awareness

It is of note that limited mental health awareness acted as a barrier to support-seeking at the outset for both James and Sara. Only when it was suggested to them by a doctor did they begin to formulate their experiences in terms of mental health problems and seek appropriate support. These stories support the findings of Doherty et al.'s (2016) exploration of depression in elite sport, which noted the tendency amongst the sample to fail to identify distress in terms of mental health.

Whilst Lauren was aware of her difficulties which had been diagnosed as anxiety disorder prior to entering college, it was her mother and teachers who identified her presentation as indicative of a mental health concern. Once at college, the lack of awareness appeared in her case to come from the coaches who were unresponsive, despite being informed about her anxiety experiences. Whilst the reasons behind Lauren's coaches' non-engagement with the issue of her mental health is unknown, it is of note that previous research by Ferguson, Swann, Little and Vella, (2018) has indicated anxiety about insufficient training and fears of making the situation worse have been shown to inhibit coaches' engagement with athletes around mental health problems.

Implications

The implications of this organisationally revolve around provision of mental health awareness training for athletes and coaches which has been shown to improve knowledge of signs and symptoms as well as enhance confidence in ability to help (Breslin, Haughey, Donnelly, Kearney & Prentice, 2017). Education of athletes and coaches to support identification of mental health problems has also been highlighted within the recent mental health action plan for sport.

Lauren's story in particular shows the potential difficulties when mental health problems are highlighted but ignored and the justifiable expectation that flagging such issues would lead to acknowledgement and support.

5.2.3 Power Dynamics

All athlete participants' stories spoke to issues of power. James conveyed a sense of the powerlessness and lack of control he experienced as a professional rugby player, particularly around job security and career trajectory (and related concerns re financial security). This lack of job security is further exacerbated by the ever-present risk of injury and the competition for places. Thus, the athletes in this study experience insecurity along a number of dimensions which are outside of their control. Given the inherent insecurity in the role and the power of

coaches over selection (where this is the case) athlete-coach relationships are particularly power-laden. The athlete participants all highlighted the specific power of coaching relationships and the ways in which coaches set the tone through language and style around the expression of vulnerability as well as exercising power through selection and provision of opportunity.

On one level, this was related to setting the tone around expression of vulnerability which I have explored in particular in relation to mental toughness. To elaborate further, James noted the aggressive style of coaching staff, and highlighted the team analysis sessions as sites of potential humiliation and the expectation of tolerance of aggression. Lauren similarly found the conduct of coaches conveyed the need to present as 'mentally tough'. This element of coach behaviour relates to the potential to silence, as well as forge identity expectations and supports Lee Sindon's (2013) work drawing on Foucault's concept of normalization in relation to expression of emotion in sport. Lee Sindon notes the ways in which athletes are subject to normalising judgement, which operates to correct behaviours and expressions of emotions which are not accepted.

Secondly, the athletes drew attention to the manner in which power is exercised by coaches in relation to selection. Sara particularly drew attention to the anxiety about confiding in coaches given they also have power over selection. James also highlighted that some coaching staff maintain a view of mental health as evidence of weakness. This is another mechanism by which athletes can be silenced, for fear of the way in which their mental health issues might be perceived by a coach and therefore detrimental to their careers.

Perceptions of coaches as potentially unsupportive meant they were not confided in or sought out as potentially supportive allies in the cases of Lauren and James. Hiding mental health problems from coaches and teammates is a finding supported by other studies (Doherty et al., 2016; Brownrigg et al., 2018) whilst previous findings have also noted how positive attitudes from a coach acts as a facilitator to help-seeking (Gulliver et al., 2012).

Power relationships were also highlighted in relation to system features. Lauren located the behaviour of coaches within a broader narrative around sport as business. Peter particularly focussed his story on the commoditisation of athletes in the service of winning medals. As Peter and Lauren both note, everyone's jobs in sports contexts are contingent upon performance outcomes and their stories demonstrate the ways that the pressure this generates can be transmitted to athletes and contribute to conditions which exacerbate mental health problems amongst those playing and working in sports contexts.

Within these stories, athletes have limited power in their career trajectory and their position is inherently insecure, subject to variables such as performance, injury, team performance and preferences of coaches in regard to selection. The power imbalance operating in sport also allows space for problematic and abusive behaviours and environments as highlighted by Peter, and operates to silence those who wish to speak out for fear of career consequences.

Implications for Therapists and Practitioners

For some people, working or playing in an elite sport environment can be deeply problematic. Peter in particular highlights the prevalence of athletes who were to his mind 'very mentally poorly as a consequence of what they'd been through'. Where the client has limited power to effect change in their environment, they are faced with dilemmas around developing strategies to better tolerate a challenging context or to consider moving on. These are complex decisions, particularly when leaving will also serve to deny access to opportunity to achieve sporting goals. Working with clients dealing with this dilemma may be particularly problematic for those working within organisational settings in which there is tension between organisational and individual goals, when an organisation is seeking docility and compliance and the therapist is working to empower.

Implications for Organisations

There are many ways in which the power imbalance is built into the system within performance sport and insecurity for those within sports contexts is inevitable. An effort to address this through managing expectations and preparing for life beyond sport is being looked at within the recent mental health action plan. However, there also needs to be recognition that where there is power imbalance there is risk of abuse of power. Athletes and others need to feel safe to report concerns without risk to their careers and opportunities.

Another way of thinking about organisational change is to adopt a culture which promotes psychological safety. In a workplace context, psychological safety is described by Edmondson (2018:xv) as an environment in which 'people know they might fail, they might receive performance feedback that says they're not meeting expectations, and they might lose their jobs due to changes in the industry or even to a lack of competence in their role...But in a psychologically safe workplace, people are not hindered by *interpersonal* fear.' Such workplaces also promote care for those within them and although insecurity in the permanence of the position may remain, people do not have to be worried about retribution or embarrassment and can express themselves authentically. Such an approach may serve to

empower those working in sports contexts and mitigate against the insecurity inherent in such roles.

5.3 WELFARE AND WINNING

During the period in which I was undertaking this research the subject of mental health in elite sport gained prominence. In particular, an independent review into Duty of Care in Sport (2017) was commissioned by the Government and undertaken by Baroness Tanni Grey-Thompson, aiming to address if the balance between welfare and winning was right.

A number of relevant recommendations followed, including supporting dual career and education goals alongside sport as well as planning for life after sport. The review also emphasised the need to foster environments 'where people feel able to discuss issues or are aware of where they can go to get help, both within and outside the sport if they need help on a confidential basis.' (p23) To this end, recommendations included education of coaches and signposting to confidential support pathways.

The Government's subsequent mental health action plan (published in March 2018) took up a similar position, proposing a range of actions including training around mental health awareness, signposting and provision of support, and campaigns to reduce stigma. In addition, the plan aimed to establish a high standard of mental health support in elite sport, by implementing a mental health strategy. UK Sport have gone on to announce such a strategy, which incorporates the 'four pillars' of education, provision, communication and assurance. As such, the recommendations are now translating into actions across the elite sport system.

Whilst promoting duty of care in sport is of huge benefit, I am mindful that there is a competing agenda aligned with the dominant performance narrative and that with the exception of input targeting dual career and retirement planning, there is little in these strategies which addresses the dominance and damage of this narrative. Instead, athletes and organisations are simultaneously encouraged to support mental health whilst also promoting the performance narrative. Funding and jobs remain contingent upon medals and there is limited attempt to address the ways in which elite sport participation can contribute to and sustain mental health problems in terms of the cultural expectations of toughness and performance of an invulnerable athletic identity.

As noted, the stories presented in this study highlight the tension between welfare and winning and the ways in which sporting subcultures operate upon those within them. For Lauren and Peter, this is an unresolved tension. Their stories demonstrate the ways in which performance

outcomes are prioritised at the cost of mental wellbeing. The environments in which they work or perform limit expression of vulnerability and selfhood, contributing to and maintaining mental health problems.

By contrast, Sara's story represents one in which welfare and performance goals appear to sit more comfortably alongside each other. Whilst this does not immunise her from experiencing depression when facing a potentially career-ending injury, it would seem that the sporting culture here is far less implicated in Sara's experience of depression, and instead, through the support of teammates and provision of counselling, contributes to her recovery.

Implications for Therapist and Practitioners

As such, these stories point to the need to hold both welfare and winning in an integrated way. By definition, sport is a competitive business and performance goals cannot be jettisoned. There will be times when performing optimally in sport requires the capacity to shut down rather than open up difficult emotional states. However, it would seem to be a fallacy to assume that it is necessary to live this as a 'mentally tough' identity rather than a skill that can be variably made use of depending on the needs of the situation.

Therapeutic practitioners can work with individuals to support them in holding different self-states. They can also work with organisations and coaches to develop a greater understanding around principles of emotional regulation and emotional containment such that they feel more confident to allow emotional expression without fear of overwhelm.

Implications for Organisations

In considering the differences in the sports cultures studied here, I find the concept of psychological safety again useful. Sara's environment can be regarded as psychologically safe given that expression of vulnerability was encouraged. The interpersonal aspect of psychological safety also speaks to the relational needs of athletes and those working in sport, in that such environments promote care for the person rather than reducing them to a vehicle for achieving success. When Peter and Lauren highlight the way in which personhood is lost in the pursuit of success, this approach invites it back to the centre. Adopting such a position can operate as an integrating piece between performance and wellbeing where good performance arises as a by-product of wellbeing and an emotionally safe environment. Whilst organisations may make use of specialist provision such as counsellors and other mental health professionals to support staff and athletes, creating a psychologically safe culture

mitigates against the risk of the cultural context undermining the work and reinforcing the problem it is seeking to resolve.

5.4 CONCLUDING THOUGHTS

This also raises issues about who is best placed to offer intervention on athlete mental health, with research showing athletes' preference for receiving therapeutic input from those with contextual knowledge (Gavrilova & Donohue, 2018). Studies demonstrate that sport psychologists are often called upon to work on non-performance related issues (Herzog & Hays, 2012; Roberts, Faull, & Tod, 2016) and similarly, in my experience working therapeutically with sports clients, there is no neat divide between personal issues and performance goals. I typically work with both in integration. Whilst sport psychology has increasingly acknowledged the need to attend to mental health issues (see the 'International Society of Sport Psychology Position Stand,' Schinke, Stambulova, Moore & Akademin, 2017), as noted by Roberts et al. (2016), mental health support is not currently covered within the core competencies of sport psychology training, and therefore despite being contextually well placed, sport psychologists may often lack the professional competency to appropriately address such issues. By contrast, whilst psychotherapists/counselling psychologists have the skill and training to work with a range of emotional and mental health concerns, they typically lack appropriate contextual knowledge. This points to the need for these disciplines to work collaboratively and learn from each other, inviting closer integration and cross-fertilisation of theory and knowledge. This would also demonstrate a practice application of the holding of tension between wellbeing (typically the domain of therapists) and performance (typically the domain of sport psychologists) in an integrated way.

CHAPTER SIX: REFLECTIONS

6.1 LIMITATIONS

There are several limitations to this study which I would like to draw attention to.

Firstly, I am mindful that this study hears only a small number of stories. Whilst research of this type does not aim for generalisability, it would nonetheless be helpful to explore these themes with a wider range of people, and particularly to expand the investigation into coaches and other staff working in performance sport as well as parents of young athletes to gain a greater understanding of the ways in which sports culture impacts upon mental health more broadly. Further studies may also seek to deepen the exploration of variations within sports culture in male and female sport and across different sports and nationalities.

Secondly, I am conscious that the stories contained within this study are all versions of recovery stories, in which the teller has found a way to make sense of and manage their mental health problems. Frank (1995) highlights a number of typical plotlines of illness narratives which he terms 'chaos, restitution and quest' stories and I find these useful to reflect upon the stories told here. Whilst participants describe periods of chaos, the overall storyline is one of restitution – a return to health. They variably apply a 'quest' narrative, in which they consider the deeper meanings offered by the experience. It is often the case that the stories that are told publicly about mental health are those which have achieved a resolution or sense of coherence (indeed, it is noted that Frank's chaos narrative is in fact an anti-narrative, with no ending or resolution available). There is often a 'moral of the story' in which the teller seeks to encourage others to open up and seek support and an implication that in doing so they too can move from chaos to restitution. All participants in this study spoke of their desire to share their stories in order to help others.

However, I am mindful that some do not find a resolution and that their storyline may involve moving in and out of chaos and restitution. Indeed, this has been pointed out by Day (2018) in relation to trauma stories, which – when they are told at all in sport – tend to be those in which growth follows trauma. Day points to a preference culturally for such restitution stories which can silence the athlete voice. Finding spaces for alternative stories may help those whose mental health experience does not follow this pattern of recovery. Similarly, there is variability in how mental health problems are understood. Whilst the participants here tended to adopt a medical model perspective, there are other ways to understand – and story - psychological distress and its relationship to a sporting identity.

I raise this to note that when a new story is told it opens up the possibility of others telling their stories. However, when these follow a similar trajectory, it can also serve to shut down stories which do not align. As mental health in sport stories are more frequently shared publicly, it would be of use to hear from those whose story does not achieve resolution, or who story their experiences outside of these common plotlines. The narratives around mental illness and sport in the public domain (and replicated here) often relate to depression and anxiety, with eating disorders also being a common theme. Severe and enduring mental health difficulties such as bipolar, personality disorder and psychosis which less typically achieve resolution are rarely heard. As such, future research may seek to talk to those whose mental health stories follow a different kind of trajectory and are more enduring in nature.

A further limitation to this study relates to the limited engagement of participants beyond the interview phase. This is a missed opportunity for both enriching the analysis and supporting the validity of my conclusions.

This limitation also relates to the use of single interviews with three of the four participants. The use of 'one-shot' interviews can impact the development of relationship and trust with the researcher, which can be reflected in the interview content (Polkinghorne, 2005). This was evident in Lauren's initial denial of accessing counselling services which demonstrates ambivalence about disclosure and highlights participant dilemma around how much to reveal, which could arise in response to the limited development of trust and rapport. As noted by Read (2018), studies making use of interviews often do not 'sufficiently problematize the participant's candour' (p.5), taking openness and honesty for granted rather than recognising that such candour can be a process. The use of single interviews also limits the potential for deepening awareness over time and in the process of extended conversations. Whilst multiple interviews do not arrive at a 'truth' or final rendering of a story, the use of multiple interviews would have allowed greater depth and insight into the process by which people go about sense-making and how stories are reconstituted over time within the context of reflective engagement.

6.2 CONTRIBUTION

My closing thoughts around the value of research of this type relates to the depth of analysis enabled by making use of narrative methodology. By avoiding the use of coding and patterns which are oriented towards identifying sameness, the method used in this study allows attendance to difference and the unique ways in which individuals may relate to common themes as well as the tensions and contradictions within individual stories.

These stories highlight complexity and lack of simplistic solutions. They point to the importance of understanding of local cultures to appreciate the ways in which they variably operate around mental health issues. Whilst the performance narrative can be problematic, we see here that resistance to it in performance dominated cultures can also be detrimental to mental health. Similarly, whilst storying sporting success in terms of relational bonds can operate as a healthy alternative, here we can also see how those bonds can also be threatened by perceived or real stigma and can demand adherence to subcultural ideals which deny vulnerability. As such, a relationally dominated engagement with sport can also be variable in its contribution to emotional health. The tension between welfare and winning is not easily resolved through provision of mental health support when sporting organisations also operate as businesses with success understood only in terms of performance. These stories demonstrate the tensions which operate within sport culturally and individually and suggest some ways in which those tensions can be understood and worked with.

6.3 LEARNING

Research to Practice

During the time I've been conducting this work, my private practice work with sports clients has grown. Undertaking this research has helped me to understand the particular challenges faced by sports professionals and recognise the importance of a client's sporting cultural context as well as the potential risks of a singular athletic identity. I've been able to work with clients on developing a sense of value in themselves and their qualities beyond sport, so a sense of self-worth can remain intact, despite the ups and downs.

Limited Engagement

The limited contact from participants following their interviews was troubling to me. On the one hand, there are considerations of time demands, lack of investment in the work etc. but I was also left considering the relational element of non-engagement. There was no obvious point of rupture and the interviews typically ended warmly. I found myself coming up with varying explanations for the subsequent silence from two of the participants (Peter and James) and the reality is I don't know why this happened and it surprised me that it did. I took the view that it was suggestive of some lack of investment or connection. I also think it likely that meeting over Skype rather than face to face may have impacted on the development of a relational bond.

That said, after I wrote this section and a few days before my submission deadline I received an email from James:

Hi Sally

Long time!

I am so sorry I haven't responded.

I am in the process of tidying up my outlook in box and stumbled across your email.

I must have read it then forgotten.

I'm so sorry!

Yes, I'd love to read your report if you still have it.

I hope I helped if only a little bit!

I sent the analysis to James and hope to continue our discussion. His response demonstrated to me that whilst more preliminary work to develop a collaborative undertaking may have helped, ultimately, perhaps there is no reason why I should expect more than this from participants with busy lives who were already generous enough to be interviewed.

Work in Progress

Developing my skills as a researcher is very much a work in progress and I have learned a lot from the aspects of the work which have not gone well or as well as I would have liked (as outlined above). Undertaking this research has required me to push my way into unfamiliar territory. At the start of this project I was just beginning to work in sports contexts (at that time with amateur fighters). Through doing the research I have moved increasingly towards being an insider with much of my client base now drawn from sports contexts, and have secured an opportunity to undertake research with the English Football Association.

Having initially been frustrated at the lack of prescriptiveness offered within narrative methods, I came to appreciate the freedom to use it as a set of guiding principles and the opportunity to adapt to meet the needs of the research. I appreciated the application of the rhizome metaphor at times when the work seemed to lose direction, which reminded me that non-linearity and messiness are also places of creativity. The use of poetic representation, for example, allowed access to aspects of experience which would otherwise have been lost. Through this project

I have also come to understand the limitations of working with words and am intrigued in further studies to make use of arts-based methods to explore different ways of accessing knowledge

Performing

Whilst this research project has focussed on the negative aspects of the dominance of the performance narrative individually and organisationally, it seems necessary to state (though it feels like an admission) that part of the reason I want to work in sport is because I want to make a useful contribution to performance. This work has functioned for me as a way of understanding my own relationship to the performance narrative and to think about how to sit with that tension in my work as a psychotherapist working in sports contexts.

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APPENDICES

- 1) Ethical Approval Letter
- 2) Participant Consent Form
- 3) Example Transcript and Analysis



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Sally Hilton
DCPsych programme
Metanoia Institute

23rd September 2016

Ref: 2/16-17

Dear Sally

Re: Sports Persons, Identities and Mental Health: A Narrative Inquiry

I am pleased to let you know that the above project has been granted ethical approval by Metanoia Institute Research Ethics Committee. If in the course of carrying out the project there are any new developments that may have ethical implications, please inform me as DCPsych representative for the Metanoia Institute Research Ethics Committee.

Yours sincerely,

Dr Patricia Moran
Subject Specialist (Research), DCPsych Programme
Faculty of Applied Research and Clinical Practice

On behalf of Metanoia Institute Research Ethics Committee

PARTICIPANT INFORMATION SHEET (PIS) AND CONSENT FORM

Version 2, 30.09.16

Study title

Elite Sports Persons, Identities and Mental Health: A Narrative Inquiry

My research aims to understand how having a mental health issue impacts on how an elite sports person sees themselves, and to better understand what makes people decide to seek support or not.

You are being invited to take part in a research study. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask me if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part. Thank you for reading this.

What is the purpose of the study?

The purpose of the study is to gain insight into the mental health support needs of sports people, establish models of practice and understand barriers to seeking support.

I will be interviewing a small number of people over a period of several months. The writing up process may take some time, around one year to complete. The study is focussed on something that has already happened in the past so is will not be tracking you over time, but instead focus on how you see things at the point of our meeting.

Why have I been chosen?

The study involves talking to people who are elite athletes, who have also experienced mental health problems. I will be talking to around five people for this study.

Do I have to take part?

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason.

What will happen to me if I take part?

You will be asked to meet with me for around one / one and a half hours and the meeting will take place in person or over Skype.

During our meeting we will have a conversation about your experiences. I will ask you questions to help me understand. You are free not to answer any question that you do not wish to answer. The focus of the questions will be how your experience of mental health issues has affected you as an athlete. There is no preparation required.

My research method is called 'narrative enquiry.' This is about listening to people's stories as a way of understanding their experiences. Our conversation will be recorded and transcribed, and then I will analyse your story. When I write up my findings, you will be able to read what I have written before it is shown to anyone else. If you disagree with anything I have written, you will have the opportunity to tell me.

Please note that in order to ensure quality assurance and equity this project may be selected for audit by a designated member of the committee. This means that the designated member can request to see signed consent forms. However, if this is the case your signed consent form will only be accessed by the designated auditor or member of the audit team.

What are the possible disadvantages and risks of taking part?

Although I will not publish your name in the research, I cannot guarantee that you will not be identifiable as it may be that someone recognises you or themselves from your story.

It's not possible at this point to know who will read the research, but it's important to think about how it would be for you if the things you tell me become widely known. We can talk together about what the implications may be for you personally and professionally and you can then reach a decision about whether you would like to participate.

It is also important to be aware that when people talk about difficult things it can cause some distress. I will do my best to minimise this, and if you do become upset, we can talk together about how you can best be supported.

What are the possible benefits of taking part?

I hope that participating in the study will be a helpful learning experience for you. However, this cannot be guaranteed. The information we get from this study may help us to understand more about how elite sports culture impacts upon the mental health of athletes and to find ways of supporting athletes who experience mental health problems.

Will my taking part in this study be kept confidential?

Your participation in the study will be confidential, although as noted above, you must be aware of the possibility of being recognisable upon publication. All information that is collected about you during the course of the research will be kept strictly confidential. Any information about you which is used will have your name removed (unless you wish to waive anonymity) to minimise the chance of being recognised from it

All data will be stored, analysed and reported in compliance with the Data Protection legislation of the United Kingdom.

What will happen to the results of the research study?

The research will be written up and be published as part of my doctoral research. I don't have a date yet for when the research will be completed, but it's likely to be around a year after our interview and I can keep you informed as things progress. You will have the opportunity to read portions of the research which relate to you prior to publication.

Who has reviewed the study?

This study has been reviewed by the Metanoia Research Ethics Committee.

Contact for further information

I can be contacted by email at sally@sallyhiltontherapyonline.com or by phone at 07904 068672.

My Supervisor is Professor Vanja Orlans and she can be reached at:

Metanoia Institute

Tel (direct): +44(0)20 8208 1235

Email: Vanja.Orlans@metanoia.ac.uk

Thank you for taking part in this study. You will be provided with a Participant Information Sheet and a consent form to keep.

CONSENT FORM

Participant Identification Number:

Title of Project: Elite Sports Persons, Identities and Mental Health: A Narrative Inquiry

Name of Researcher: Sally Hilton

Please initial box

1. I confirm that I have read and understand the information sheet datedfor the above study and have had the opportunity to ask questions.
2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason. If I choose to withdraw, I can decide what happens to any data I have provided.
3. I understand that my interview will be taped and subsequently transcribed
4. I agree to take part in the above study.
5. I agree that this form that bears my name and signature may be seen by a designated auditor.

_____	_____	_____
Name of participant	Date	Signature
_____	_____	_____
Name of person taking consent (if different from researcher)	Date	Signature
_____	_____	_____
Researcher	Date	Signature

1 copy for participant; 1 copy for researcher

Lapsing
medical
need

- ① Thema / Plot
- ② Identity / Narrating
- ③ Controlling / Heroic
- ④ C-yeah

J: Er, yeah, so I realised I wasn't particularly well, erm and er, erm, he erm, at that point you know it was difficult cos we were abroad, we were in [redacted] but he prescribed me citalopram and obviously the medication and er told me to er, you know recommended I potentially go and see a counsellor [mmm] and I, then forcing myself to go and see a counsellor probably then allowed me the, it was the vehicle that allowed me to, em, er what, what am I trying to say? Allowed me to express to myself I suppose that I could, and work out in my own head that I had a, that I had an issue and erm, you know over a period of weeks and months you know constantly going back on a month...daily, sorry on a weekly basis to the counsellor [mmm] and the medication, suddenly, not suddenly you know I worked out it's probably around, something I've always had if I'm honest and ever since I can remember and ever since I can remember being at school and you know, being very, having a massive lack of confidence and being pretty introverted [mmm] and erm, em, so it, yeah, so it goes back I think a very long way I'm a bit old and long in the tooth now, I can't remember a lot about my childhood if I'm honest [sure] but I remember, you know, almost a theme of how I was when I was a kid and it, a young lad erm, and probably yeah, I probably, I've probably always been like that, I'm an emotional guy anyway and erm [mmm] er, you know, the

① Treatment
the med
counsellor
= Paradox

② Relat' / childhood
+ dev. -
nifty as
emotional
not cause
anxiety

① Feedback

- 1) Story line
- 2) Identity on stage

one moment, the one point where it all sort of came crashing down was that point in [redacted] when the doctor, and all the doctor asked me was, he literally took me to one side and said, 'How you feeling?' [mmm] (laughs) [laughs] and just broke down... amazing just that one, one question just broke me... so probably then is the moment but if I'm honest it's always been there.

③ Fear w.
nifty identity

① One moment / question -> during this
Opened up in one unexpected moment - revealing
of something that's present - 2011/2012

SH: So sort of retrospectively you could realise that I had always been around but it sounds like you're saying that you weren't even aware, then, it kind of came as a surprise to you that you had that kind of reaction... [yeah] You said something about the rugby environment, you know, when he asked you that, what do you mean by the rugby environment? Can you say a bit more about how that environment was around emotional stuff?

④ Trip up
to us
his language
+ refer back to
his trip rather than
injury

J: Well, I think it's a bit of a cliché, but it's also true, you know, erm, it's, it is a pretty intense environment to be involved with and it's you know, big highs, big lows [mmm] erm, and it's incredibly physically demanding and full on a lot of the time, so you know, for want of a better expression, I mean, you're getting paid to get beaten up every day, erm, er, and you know when you're in that sort of environment it's very difficult to express anything other than aggression [mmm] and banter I suppose and piss taking and er nothing ever, nothing with... there's no way of, there's no outlet to, erm, to express that type of emotion really. It's, erm, it's a kind of an admission of guilt, anything that was erm, an admission of weakness anything that was... you know, even from little things like you know injuries [uh-huh] you know you hide injuries from fellow players, you hide injuries from the physio from the coaches as much as you could, so it's not really a stigma about, erm, mental health so much, it's just a stigma about not showing weakness and not giving your shirt up and not allowing the guy that's behind you, your ability to take your position. It's a really, really intensely fiercely competitive environment [mmm] where you

⑤ Aggression

① Guilt / weakness / shame
Not possible to hit any weakness!
No outlet for expressing anything but aggression
accepted

Aggression
built in
aggressive genes
+ mirrored
in emotion
accepted

③ *Reactions to catastrophe / not making it, enjoy it.*

language - physical symptoms etc
①
②
aspects of identity
→ why he

tackle, in one side-step when you're knee goes, a tackle when your shoulder goes, and that's it, gone, your career completely and utterly over [mmm] so it's... I constant... I never thought about that when I was playing, I never, not really when I was in the heat of the battle, never thought about things... you chuck yourself into, into tackles and scrums and all sorts with almost with a, with a reckless abandon if you like, but it was in the back of the older I got the more it was in my head and um, so, um, that was hard to, that was hard to take, and it was hard to control mentally [mmm], and I found that a weakness, because I found I couldn't play like I wanted to play and I tried to put it to one side and it was hard to do in a game, erm, the one thing that comes from, I was playing a game where, um, a player broke his neck [mmm] and was paralysed from the neck down [uff] and that hit me quite hard, erm, er... er... and you know he was fortunate enough that he, you know, he eventually after years of rehabilitation got back to walking albeit in a very, very, you now not in a great way but you know, he had some movement back [mmm] but you know that was a big eye-opener that all of a sudden people are just people) [yeah] and em, yeah that hit me really hard and it hit me extra hard because I was playing in a position where em, as a [redacted] you know it's all up here, you know it's all your neck, all the pressure goes through your neck and your spine, so I was very aware that you know, quite often, I think I you ask any [redacted] that plays rugby they've been in a scrum where the scrum's collapsed and you feel your neck crack and the first thing you do is wiggle your fingers, wiggle your toes cos you're not sure what's going on and that's, and that's hard to control, that's hard to control mentally and like I said, the older I get and when kids came along and the older I got, the more I started to feel human

① *as old as really, more - head can cut it, blurred above*
② *legion reb. physically that help had to control mentally*
③ *Human vs Superhuman*

② *Challenge to rugby identity*

③ *Terror / vulnerability + physical its security etc. → mental out.*

SH: Yeah (head) and so when you, when you had those feelings of vulnerability, what do you do with them, or what did you do with them, how did you express them or ...?

J: I didn't express them at all (laughs) Erm, but I remember being in games, it normally happened when there was a break in play or there was an injury or um, or you know the ball gets kicked off the park and you're waiting for the ball, the ball boys to come back or I dunno maybe half-time or ... normally when there's nothing else to think about, if you know what I mean [yeah] when those demons would get into my head a little bit, but then I would start the game again and get on with it (laughs)

Terror ③ ~~feeling a wreck / demon in head~~

SH: And what did you make of it, did you consider, what does this mean, what does this say about me?

J: Er... not really, not really. I was worried about it. I was more worried about physical, physically. No, I was worried, in my head I was worried about my physical body getting damaged [sure] and that's what I worried about so if I didn't... so I never thought to myself this is a mental problem, I never thought I've got to stop... or maybe I did cos I do remember thinking 'I've got to get this out of my head, I've e got to get this out of my head,' but I don't know how to answer that really other than I just played, just got on with it.

③ *Physical / mental wrong about physical - not understudy is mental work*