Sport and Mental Health: Wavering Between Resilience and Vulnerability

by

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A thesis submitted in conformity with the requirements for the degree of Master of Science
Graduate Department of Exercise Sciences
University of Toronto

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Abstract

When sport participation reaches competitive levels it can become entangled with stressors such as injury, performance pressures, and vulnerabilities including developing a strong athletic identity that may influence athletes’ experiences with mental illness. A life history methodology was used to explore an elite university athlete’s experience with an adjustment disorder with mixed moods of depression and anxiety. Seven interviews were conducted and a dialogical narrative analysis was used. The participant developed a strong athletic identity during her sport career which, coupled with a damaging interpersonal relationship, contributed to a period of mental health challenges post-retirement from sport and graduation from university. The findings from this study lead us to question whether the significant support and special access to services provided to university sports stars potentially leaves such individuals vulnerable to feelings of isolation and helplessness once outside the university-athlete bubble and contribute to challenging transitions out of sport.
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you for being vulnerable with me and for allowing me to examine and analyze your life. I am motivated by you to continue this work so that past, present, and future athletes will have the space and knowledge to prioritize their mental well-being.

Finally, this work would not have been possible without the support of my parents, Robin and Peter, my sister, Tamara, and my partner, Ethan. From the bottom of my heart, thank you for supporting my academic and athletic pursuits and helping me to become the person who would be interested in creating this thesis. The inspiration that I have derived from each of you is present in this work.
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CHAPTER 1

Introduction

In spite of the vast literature on mental illness in the general population, there is a striking paucity of research on mental illness experiences of elite athletes. There is some indication that the relationship between sport and mental health is complex because of contradictory evidence regarding the psychological impacts of sport participation. More specifically, sport can serve as a coping mechanism and thus provide reprieve from psychological stress; however, it can also act as a significant stressor for various reasons (Jones, Butryn, Furst, & Semerjian, 2013). Any benefits derived from sport participation, of which there are undoubtedly many, become entangled with a host of potentially serious risk factors for mental illness when participation reaches elite levels. Mood disorders have been found to affect athletes to a similar degree as the general population and represent a significant challenge to quality of life and well-being (Gulliver, Griffiths, Mackinnon, Batterham, Stanimirovic, 2015). While research in the area of athletes and mental illness is in its infancy, it is being strongly encouraged within the field of sport psychiatry. This emerging field is concerned with generating knowledge to inform the prevention and treatment of athletes suffering from psychopathologies (Reardon & Factor, 2010). In response to this call, this study will explore the experience of an elite athlete with depression.

Personal History Account

I am a 23-year old white, female graduate student and track and field athlete. I have been competing in track and field since the beginning of high school; however, I became much more invested and committed to training when I reached university and joined the varsity team at the University of Toronto. Track became a huge part of my life during university without my fully realizing it. Within a year it was clear to me that training and competing for my team and
developing a lifestyle that was conducive to performance was just as important to me as doing well academically. I thrived in this lifestyle, which basically entailed eating, sleeping, studying, and training, and became a much better athlete than I was in high school. I became close friends with my teammates, developed a stronger relationship with my family, and did very well academically. At this point, six years later, I am training alongside Olympians, world championship competitors, and Pan Am medalists, and I consider myself on the verge of transitioning from a university-level runner to a high performance athlete. Overall, my experience with the sport has been positive, despite the usual challenges of injury and disappointing performances. I have, however, been exposed to other, darker sides of the sport that my training partners have experienced. I think of these experiences often and they have left me feeling confused and curious about the power that sport can have over our well-being. It has been witnessing these experiences, as well as the role that I have adopted over the last five or so years as a support system for a close friend who has suffered greatly from her relationship with sport, that have led me to pursue research in athlete mental health. This personal history research account will allow me to articulate my thoughts and preconceptions regarding the current inquiry. In so doing, my hope is that I enter the research process with the self-awareness to use my experiences as a way to relate to my participant while allowing her perspective to be uninhibited by my own.

There are a few incidents that I have witnessed at track and field competitions that have opened my eyes to the idea that sport can be so much more to people than just one of the activities or hobbies that they participate in to occupy their time. The idea that, for some people, the successes and failures they experience in sport, the internal and external pressure that they feel to perform well, can impact their self-esteem, their psychological and physical health, even
their entire outlook on life. I have experienced periods of turmoil myself over whether or not the pain of training and racing, the devastation of injury and failure, and the dedication to the sport when, at times, improvement is imperceptible, outweighs the elation when I run a personal best time. Most of the time I am not completely sure where I stand on this fine line, and the stories that I am about to share make it even harder for me to pick a side. To be perfectly honest, I think that sport can be both a positive and negative force in athletes’ lives and it depends on the individual. By this I mean that I think the effect that sport has on someone can depend on how much of his or her life is devoted to the sport and how much he or she is personally fazed by competitive failure and injury. There are some athletes who appear (I say appear because I can only speculate on what they actually think) to have a positive and balanced outlook on both success and failure in sport. On the other hand, I have spoken to athletes who question their entire self-worth when they do not perform up to their own and other’s expectations and the pain it can cause them is heartbreaking to me. I think that sport can have a massive impact on an athlete’s well-being and mental health, sometimes in a positive way and sometimes in a dangerously negative way. It is the nature of this impact that I am fascinated by, from the point of view of an athlete who has struggled with severely compromised mental health.

The first couple of incidents that made me reconsider my perspective on sport occurred at the Canadian Interuniversity Sport championships during my undergraduate studies. I was watching the men’s high jump competition in which a male athlete from another school was the favourite to win. I do not know this athlete personally, and never spoke to him about this competition, but his result on this day greatly affected me. Unfortunately, the competition was going very badly for him. Each athlete has three attempts to jump over a given height of the bar and it was early on, at a relatively low height, that this athlete failed to clear the bar three times.
After his third failed attempt, the athlete lay, face down on the mat with his head in his hands and began to cry. He was clearly devastated by his performance and, at the time, his emotional display shocked me. I was surprised by how upset he had become and I felt terrible for him. I also remember thinking that it was remarkable how such a small incident in the grand scheme of humanity was such a big deal to this individual. A few hours later, at the same national championship, my friend toed the line in a race in which she was also the favourite to win. A third of the way into the race her lead was beginning to diminish and I could tell from her facial expression and body language that she was beginning to panic. Within a lap after that my friend had stepped off the track and failed to finish the race, let alone win. The fear of not winning, of feeling completely alone on the track despite being cheered on by her teammates and coaches, had made it impossible for her to physically keep going. When she stepped off the track, which would allow a different runner to win and accumulate ten points for her team, I watched the coaches from a rival school fist-pump the air and cheer. My friend’s devastation was a cause for them to celebrate and I was disgusted by this. My friend’s psychological distress over this incident is something I will never forget. Her strength to step back on the track the next day and win another race, and the relief and happiness that this win brought her, is also something I will never forget.

My friend’s experiences with track and field have played a significant role in my interest in sport and mental health and she is the person I mentioned in the opening paragraph of this reflection, and for whom I have become a support. As much as I dislike thinking about her hardships, they are a critical part of my passion for this area of research. My friend’s relationship with track is by no means straight-forward, but it has undoubtedly shaped many aspects of her life and has motivated her to stay healthy. I have been by her side through all of these highs and
lows over the last few years and have learned a considerable amount about the merits of perseverance and commitment, but also about the danger of defining yourself based on the numbers beside your name on a race clock. I think that sport has been extremely punishing to my friend, but that it has also taught her a great deal about herself and brought her great joy. If there is a way to understand this dynamic more completely and help athletes achieve their hopes and dreams in sport while optimizing their psychological well-being, I would really like to learn about it.
CHAPTER 2

Review of Literature

Mental Illness in Athletes

Given the widely held assumption that athletes are immune to psychopathology because of their abilities to function at a relatively high level to be successful at sport and the supposed requirement to demonstrate mental toughness in training and competition (Schaal et al., 2011), it may seem surprising that mental illness in athletes exists. While there has been some discrepancy in findings regarding prevalence estimates of mental illness in elite athletes, an overview of the few studies that have been conducted in this area demonstrates that athletes suffer from mental illness to a similar extent as the general population (Gulliver et al., 2015; Schaal et al., 2011). Much of the research that is relevant to this literature review was conducted with either university-level athletes or post-university, elite or professional athletes. The criteria used to categorize an athlete as elite has not been consistent in research with this population, ranging from elite being defined as those who have received international honours to simply representing their country at a major event (Jones, Hanton, & Connaughton, 2002). Recently, Swann, Moran, & Piggot (2015) created a system for categorizing different levels of elite sport participation which will be applied to the current study and outlined in Chapter 3.

Many forms of psychopathology have been identified in athletes, including eating disorders, substance abuse, anxiety disorders, personality disorders, and depression (Andersen, Denson, Brewer, & van Raalte, 1994). While there are undoubtedly individuals who suffer from a range of other mental illnesses, Andersen and colleagues (1994) suggested, based on their clinical experience working with athletes, that athletes most commonly experience personality or
mood disorders. This is likely due to the fact that individuals with other, even more disabling illnesses, rarely reach a highly competitive level.

In terms of the prevalence of mental illness in elite athletes, the traditionally accepted psychological profile of an athlete was based on early research using the Profile of Mood States (POMS; McNair, Lorr, & Droppelman, 1971). The conclusion of much of this research was that athletes tended to display lower levels of depression, fatigue, confusion, and tension and higher levels of vigor compared to average adults (Puffer & McShane, 1992). More recent research using investigative tools designed specifically to measure symptoms of mental illnesses, however, has found that the typical athlete psychological profile is likely an oversimplification of athletes’ mental states. Two epidemiological studies have investigated the prevalence of mental illness in elite athletes (Gulliver et al., 2015; Schaal et al., 2011). Gulliver and colleagues’ (2015) sample of 224 elite, Australian athletes completed a self-report survey about their mental health symptoms. The researchers compared the athlete data with available data from young people in the general community who had participated in a large national health survey which included questions related to psychological health. The use of different survey measures with the two populations and the fact that the community data were not age- and gender-matched for the measures employed were acknowledged limitations that make comparisons of prevalence rates between the two populations inappropriate. However, the findings related to the athlete population were informative in and of themselves as 39% of male and 53% of female elite athletes met criteria for at least one mental health problem, including general psychological distress, depression, generalized anxiety, social anxiety, panic disorder, or an eating disorder. These specific mental health problems were included on the survey because of previous research indicating that they are the most common among athletes and the general population (Australian
Bureau of Statistics; Schaal et al., 2011; Sundgot-Borgen & Torstveit, 2004; Yang et al., 2014). Additionally, one in five athletes reportedly experienced significant levels of depressive symptoms and one in four reported clinically significant levels of eating disorder symptoms. The researchers reported that the prevalence of anxiety, affective, or substance use disorders in athletes were similar to that seen in the general Australian young community. Further, female athletes had higher general psychological distress scores than young women in the community (Gulliver et al., 2015).

In contrast to the findings reported by Gulliver et al. (2015), Schaal and colleagues (2011) found much lower prevalence rates of mental health problems in a sample of 2067 elite French athletes with 17% of the athletes having a recent or ongoing psychopathology at the time of the study. More specifically, 3.6% of the athletes reportedly had recent or ongoing depression which was considerably lower than the 6.2% of adults in Europe who have reported suffering from major depression (World Health Organization [WHO], 2005). In contrast, the prevalence of eating disorders in the athletes was comparable to the general population. Regardless of age, type of sport, or geographic location, women were 1.3 times more likely to be diagnosed with at least one psychopathology than men. The considerable difference between the prevalence estimates reported in these two elite athlete studies may be attributable to the different methods used to assess the mental health status of the athletes. Whereas Gulliver et al. (2015) used self-report measures, Schaal et al. (2011) based their analyses on psychological evaluations of the athletes by either a physician or a psychologist, thus highlighting the differences between clinical assessments and self-reported symptoms. Schaal and colleagues (2011) also indicated that the type of professional performing the psychological evaluation affected the prevalence of psychopathology identified, with physicians detecting one or more disorders in 23% of women
and 14% of men versus 34% in women and 28% in men detected by the psychologists. By virtue of these methodological differences, comparisons of prevalence estimates are difficult.

Surprisingly, few researchers have investigated the prevalence of mental illness in university athletes, and of these, the vast majority have addressed eating disorder prevalence (Greenleaf, Petrie, Carter, & Reel, 2009; Petrie, Greenleaf, Reel, & Carter, 2008) substance abuse (Yusko, Buckman, White & Pandina, 2008) and depression (Yang et al., 2007). Yang and colleagues (2007) collected self-report data on symptoms of depression from 257 collegiate athletes from Division One National Collegiate Athletic Association (NCAA) sports and found that 21% of the student-athletes reported experiencing symptoms of depression with 3% indicating that they had been previously clinically diagnosed with depression. The authors noted that being female, in first year of university, or experiencing pain were associated with an increased risk of experiencing symptoms of depression. Comparatively, researchers investigated the prevalence of depression among a sample of 2843 American university students and found that 14% of undergraduate students were experiencing depression symptoms and 5% screened positive for major depression (Eisenberg, Gollust, Golberstein, & Hefner, 2007). Again however, different methods of assessment were used, thus limiting our ability to draw comparisons.

Few researchers have assessed a range of self-reported psychopathologies in university athletes (Donohue et al., 2004; Storch, Storch, Killikany, & Roberti, 2005). Donohue and colleagues (2004) compared three groups of students on severity of self-reported psychiatric symptoms using the Symptoms Checklist-90-Revised (SCL-90-R; Derogatis, 1994) that included scales measuring psychological distress, distress from bodily dysfunction, obsessive-compulsive thoughts and actions, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism. The three groups were 72 NCAA athletes and 64
recreational athletes from the same American school and 435 undergraduate students from a
different American school who had completed the SCL-90-R for the purposes of a different
study (Todd, Deane, & McKenna, 1997). Donohue and colleagues (2004) found that recreational
and competitive NCAA athletes did not differ in their psychiatric functioning and both groups of
athletes reported lower levels of global psychopathology in comparison to the normative sample
of 435 undergraduate students. Once again, there are major limitations associated with this
comparison because the normative sample did not include the 6% of students in the original
sample who reported receiving psychiatric or psychological treatment, whereas the athlete
populations were not screened in this way. The authors emphasize that the lower rate of global
psychological disturbance found in athletes compared with the normative sample may not show
the true differences that existed.

Storch and colleagues (2005) surveyed 398 undergraduate university students, 105 of
whom were Division One NCAA athletes, and the remaining 293 were non-athlete university
students. By including both student-athletes and non-athlete students, the researchers were able
to directly compare prevalence rates of self-reported social anxiety, depression, alcohol
problems, and level of social support between the populations. Female student-athletes reported
higher levels of social anxiety and depressive symptoms and lower social support than male
athletes and male and female non-athlete students. The prevalence of clinical levels of alcohol
problems, depression, and social anxiety in male and female athletes was not significantly
different from their non-athlete peers. Finally, a recent study which measured depressive
symptoms using a self-report measure in 465 Division 1 NCAA athletes reported similar results
to Storch and colleagues (2005) (Wolanin, Hong, Marks, Panchoo, Gross, 2016). These
researchers found that 23.7% of the athletes reported clinically relevant levels of depressive
symptoms, with females reporting significantly higher levels than males. Interestingly, significant differences in symptom levels depending on sport were also reported.

Clearly, rigorous epidemiological research in the area of mental illness prevalence in both elite and university athlete populations is lacking. The state of this research is not, however, entirely surprising as the issue of mental health in athletes is a relatively new area of inquiry. That being said, the recent publication of a review of mental illness prevalence research in athletes, which included many of the studies outlined above, speaks to the burgeoning interest in this field (Rice, Purcell, De Silva, Mawren, McGorry, Parker, 2016). The only recent push to improve the depth and rigor of the work in this area called for by the authors of this reviews may, in part, be due to long-held and pervasive assumptions that athletes are immune to or protected against mental illness. These assumptions have likely inhibited researchers from seeing the necessity and value of research in this area. These assumptions will have influenced athletes as well, likely contributing to desires to maintain privacy surrounding their psychological states (Sands, McNeal & Stone, 2005), and perhaps reluctance to disclose or report difficulties. In the existing prevalence studies, the methods used to assess mental illness are varied thus limiting our abilities to compare and draw conclusions. In spite of the limitations, the emerging evidence is clear - mental illness exists in elite and collegiate athletes at a very similar rate to the general population and considerably more research is needed in this area.

**Mood Disorders in Athletes**

As mentioned above, mood disorders represent some of the most common psychopathologies found in athletes, similar to general population data (World Health Organization [WHO], 2001). Depression, in particular, is a serious psychological challenge faced by the population with approximately 121 million people affected by the disorder worldwide.
Researchers have reported emerging data to indicate that a disconcerting number of elite and university athletes report experiencing symptoms of depression with many reaching clinically diagnosable levels of the mood disorder (Gulliver et al., 2011; Wolanin et al., 2016; Yang et al., 2007). This research indicates that depression symptoms are an exceedingly common complaint from athletes experiencing mood-related mental health challenges. Although the total body of work is limited, a significant proportion of athlete mental health research has been devoted to examining depression. Thus the focus of the next section of this literature review will be on examining this work.

We have discussed prevalence rates of depression symptoms in athletes, however little is known about athletes’ experiences with depression. This is troubling given the substantial risk that depression poses to quality of life and longevity as suicide is a very possible outcome for people suffering with this mental health concern (American College Health Association [ACHA], 2008; Sisk, 2006; Strine et al., 2009). The desire to attempt suicide and depression are terrible circumstances for anyone to endure and there are far too many stories that are met with disbelief of high-level athletes desiring to take their own lives or succeeding in doing so after tumultuous battles with depression. There is always shock in response to these stories because it is difficult to grasp how someone can be successful at sport and also be mentally ill. In reality one does not exclude the other. The example of multiple Olympic medalist, Canadian speed-skater and cyclist Clara Hughes, who has publicly shared her battle with addiction and depression, demonstrates this fact (Hughes, 2015). Recently, Ultimate Fighting Championship mixed martial arts athlete Rhonda Rousey very publicly vocalized her experience with suicidal ideation after a shocking loss in the ring (Grossman, 2016). While these stories go a long way to illuminate some of the psychological challenges that very successful athletes endure and are an
important step toward changing societal assumptions about the infallibility of elite athletes, there are many athletes who do not feel the same security to seek support and end up suffering in silence for a variety of reasons (Douglas & Carless, 2009).

**Depression.** Depression is a presenting symptom of a range of mental disorders including major depressive disorder, bipolar disorder, and schizophrenia (Schulz & Arora, 2015). Depression is an umbrella term that includes a collection of specific symptoms of which five or more must be present during the same 2-week period to be considered indicative of the presence of major depressive disorder according to the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)* (American Psychiatric Association, 2013). These specific symptoms include depressed mood, anhedonia, significant weight loss or weight gain, insomnia or hypersomnia, psychomotor agitation or retardation, fatigue or loss of energy, feelings of worthlessness or excessive guilt, diminished concentration, and recurrent thoughts of death and suicide. The depression episode must include either depressed mood or anhedonia to be considered a major depressive episode and cause significant impairment in daily functioning (Schulz & Arora, 2015).

Athletes may be diagnosed with clinical levels of depression that match the above criteria (Schaal et al., 2015); however, clinicians who have worked with athletes report that they commonly treat athletes who meet the criteria for a form of major depression called dysthymia. Dysthymia is characterized by depressed mood and two of the following symptoms: poor appetite or overeating, insomnia or hypersomnia, low energy or fatigue, low self-esteem, poor concentration, and feelings of hopelessness (Andersen et al., 1994). In addition, athletes who do not reach clinically diagnosable levels of depression may self-report various levels of the symptoms of depression that were described above and evidently still face significant mental
health challenges (Jones et al., 2013). Therefore the distinction between having a clinical diagnosis of depression versus experiencing various depression symptoms without the same degree of disability can, at times, be insignificant when trying to understand athletes’ experiences with depression.

In terms of the various risk factors associated with developing depression in the general population, there is a fine balance between genetic and environmental influences, and the interaction of these influences that contribute to people’s vulnerability to this disorder. First-degree relatives have a two- to four-time increased risk of suffering from major depressive disorder (Klengel & Binder, 2013). Research with twins indicates that the heritability, which is the proportion of risk of developing a mental illness that is attributable to genetic variance, is approximately 37% (Klengel & Binder, 2013). Environmental factors such as early childhood trauma, adverse or negative life events, and personality traits can also significantly contribute to the development of depression (Schulz & Arora, 2015). Researchers have also suggested that understanding depression within an individual’s cultural context by examining different people’s subjective experiences is imperative to producing knowledge about the environmental factors involved in depression (Cochran & Rabinowitz, 2000). In a subsequent section, I will address the range of specific environmental risk factors for depression that are characteristic of the elite sport context which may influence the mental health of athletes.

**Depression and sport performance.** As evidenced by the examples of Clara Hughes and Rhonda Rousey, suffering from severe psychological challenges does not, in every case, result in poor sport performance. The effect of depression on performance is not a major focus of the current study as it is of my opinion that the world of sport is overwhelmingly preoccupied with performance success often at the expense of the physical and psychological well-being of
athletes. This is not to say that athletes are not complicit in this preoccupation as performing optimally in their sport is undoubtedly a major motivational force behind their dedication to participation. Performing well and performing poorly can have major implications for an athlete’s psychological well-being (Hammond, Gialloreto, Kubas, & Davis, 2013; Jones et al., 2013) and it is for this reason that it is worth considering the relationship between experiencing depression symptoms and sport performance.

There is a distinct absence of empirical research on this relationship. Within the minimal research that has been conducted that examines the relationship between mental health and sport performance, generalities are common and the nature of individual experience is lost (Morgan, 1985). Morgan (1985) developed the Mental Health Model (MHM) of sport performance based on his research which predicts that athletes who score highly on measures of neuroticism, trait anxiety, depression, confusion, or fatigue will tend to be unsuccessful compared to athletes scoring in the low to normal ranges on these measures. Alternatively, the model predicts that having positive aspects of mental health should be associated with more success in sport. While, in a very general sense, the MHM of sport performance may demonstrate a valid pattern in the relationship between athlete mental health and sport performance, there are a number of critiques of the model that Raglin (2001) highlights in his review of psychological factors related to sport performance. To begin with, Raglin (2001) conveys Meyers, Whelan & Murphy (1996)’s declaration that the model essentially predicts that elite athletes should never exhibit poor mental health, which is evidently not the case according to epidemiological research in this area (Gulliver et al., 2015; Schaal et al., 2011). In addition, Raglin (2001) points out that the athletes defined as “unsuccessful” in the Morgan and colleagues studies that inform the MHM were still athletes of a very high caliber as they were candidates for Olympic or world championship
teams. Morgan (1985) has stated that the psychological variables from which the MHM was derived are only moderately associated with athletic performance and the use of the model for selection purposes is not acceptable. Despite these qualifiers, it can still be seen how a model such as this can be problematic from an athlete well-being perspective. The nature of the model suggests that having psychopathologic symptoms is undesirable from a performance perspective and reiterates the perspective that those athletes who suffer from mental illness are at an inherent disadvantage in their sport. This generalization that is suggested by this model can contribute to stigma toward athletes with mental illness which is a barrier to help-seeking behaviours (Gulliver, Griffiths, & Christensen, 2012). Attention to an individual athlete’s experience with mental illness therefore, may provide a valuable and illuminating perspective.

Lane and Terry (2000) were also interested in the effect that mood states have on sport performance and developed a conceptual model that predicts poor performance when depression interacts with mood dimensions such as anger and tension. This model is based on the author’s suggestion that dimensions of a depressed mood such as a negative self-schema and the tendency to ruminate on negative self-thoughts lead one to perceive that a challenging task is unattainable. When these perceptions react with mood states that often precede sport performance, namely tension, performance is likely to suffer (Lane & Terry, 2000). Furthermore, Puffer and McShane (1992) discussed the possible cycle that occurs when depressed mood and fatigue lead to decrements in performance which in turn may contribute to an even deeper depression.

If we consider this final point of Puffer and McShane (1992), that the relationship between depression and sport performance is in fact multi-directional and cyclical, with depression potentially contributing to poor performance and poor performance in turn worsening depression, this may be a more relevant and productive perspective for athlete well-being. This
dynamic is highly relevant within a much larger discussion of the role that the sport context may play in athletes’ experiences of depression and will be discussed in detail in the following sections.

**Depression and over-training syndrome.** An additional layer of complexity that exists in the relationship between depression and the sport context is the significant overlap in the symptoms and physiology of depression and over-training syndrome (OTS) (Armstrong & VanHeest, 2002). Over-training results from performing intense, high-volume training without sufficient recovery. Over time the cumulative biological burden associated with this imbalance between training and recovery activates the body’s stress response symptoms and results in symptoms of fatigue, insomnia, change in appetite, loss of body weight, irritability, restlessness, excitability, anxiousness, loss of motivation, lack of mental concentration, depression, and decrements in performance (Armstrong & VanHeeset, 2002; Meeusen et al., 2006). Not only do the symptoms of over-training syndrome and depression overlap, but many of the physiological mechanisms underlying each condition are similar, including the involvement of similar neuroendocrine pathways and brain structures that are responsible for restoring homeostasis in response to environmental and psychological stressors (Armstrong & VanHeeset, 2002). Even risk factors for each condition overlap. Armstrong & VanHeeset (2002) reported in their review of the mechanisms behind OTS that a dose-response relationship exists between stressful events and both depression (Meeusen, 1999) and OTS (Morgen, Brown, Raglin, O’Connor, & Ellickson, 1987).

Researchers have theorized about the connection between OTS and depression (Hanna, 1979; Puffer & McShane, 1992) and research which describes university athletes’ perceptions of the causes of their depressed moods is consistent with these theories (Jones et al., 2013).
Competitive athletes who are highly motivated and determined to perform well, which likely describes the majority of this population, become frustrated with poor performance and may attribute unsatisfactory performance to insufficient training. This perception may lead the athlete to increase training intensity and volume which may eventually lead to symptoms of OTS. If this is the case, performance is likely to worsen and this cycle of decline can contribute to the deterioration of athletes’ psychological health and the manifestation of depression (Hanna, 1979; Puffer & McShane, 1992).

A key difference between depression and OTS is the role of sport participation in the treatment of each condition. In one of the most frequently cited studies on over-training in athletes, Morgan and colleagues (1987) longitudinally studied 400 competitive swimmers over 11 years and found that athletes’ mood states were disturbed in a dose-response manner as their training stimulus increased. When the competitive season was over and a reduction in training load occurred, mood-state disturbance fell back to normal. Due to these illustrative findings, researchers have concluded that a method to treat over-training and improve mood is to reduce training load, or the intensity of sport participation (Purvis, Gonsalves, & Deuster, 2010; Reardon & Factor, 2010). However, preventing an athlete who is suffering from depression from training for his or her sport can impose significant psychological stress for someone who is motivated by successful performance and the lifestyle that the performance narrative subscribes which includes a strict and disciplined adherence only to pursuits which support optimal performance (Douglas & Carless, 2009; Jones et al., 2013).

Furthermore, researchers and clinicians have suggested that a possible explanation for low rates of clinical diagnoses of depression in athletes, despite high levels of self-reported depression symptoms, may be due to the tendency of sports medicine doctors to diagnose
athletes with OTS instead (Schwenk, 2000). Schwenk (2000) contends that doctors tend to be overly focused on physiological mechanisms behind the presentation of depressed mood instead of taking a broader biopsychosocial perspective. Although this may be a generalization, it is understandable why doctors and athletes may be more comfortable with a diagnosis of overtraining instead of a mental illness within the sport context where stigma still significantly hinders the acceptability of mental illness in athletes (Gulliver et al., 2012; Schwenk, 2000). This trend is troubling, however, because the accurate diagnosis of OTS is very difficult considering that no single, reliable physiological, biochemical, or immunological marker of over-training has been identified and no single diagnostic tool exists to definitively establish a diagnosis.

Given that between 20% and 60% of athletes experience the negative consequences of over-training at least once during their careers (Purvis et al., 2010); developing effective and appropriate treatment for elite athletes is of paramount importance. However, any effective treatment will require a clear distinction between these highly comorbid conditions of OTS and depression.

**Gender considerations.** It is clear from the existing literature that gender differences exist in the prevalence rates of various mental illnesses in elite and university athletes, with female athletes often reporting higher rates of symptoms associated with mood disorders, including depression symptoms (Gulliver et al., 2015; Schaal et al., 2011; Storch et al., 2005; Wolanin et al., 2016; Yang et al., 2007). In the general population, depression symptoms are also more prevalent in women (Schulz & Arora, 2015). Gulliver and colleagues (2015) reported that the elite Australian female athletes in their sample aged 18-24 had higher general psychological distress scores than young adults in the general community. Similarly, in their study of the prevalence of mental illness in elite French athletes, Schaal and colleagues (2011) found that
women were 1.3 times more likely to be diagnosed with at least one psychopathology than men, including depression, and more than twice as many women were diagnosed with two or more disorders than men over the lifetime. In university athlete samples, Storch and colleagues (2005) and Wolanin and colleagues (2016) found that female athletes reported higher levels of depression symptoms than male athletes. Consistent with these findings, Yang and colleagues (2007) reported that being female was significantly associated with experiencing symptoms of depression. In addition, Appaneal, Levine, Perna, and Rohl (2009) found that female university and high school athletes experienced higher levels of post-injury depression than their male counterparts. Finally, in their investigation of the prevalence of failure-based depression in a sample of 50 university swimmers competing to represent Canada internationally, Hammond and colleagues (2013) used a self-report survey to assess depression symptoms and found that more female athletes than male athletes met diagnostic criteria for major depression and reported significantly more symptoms of depression than their male counterparts.

The authors of these studies suggest a range of possible explanations for this gender-based pattern in the prevalence of depression, which are largely derived from research indicating the same pattern in the general population. A range of factors have been investigated which may explain a higher prevalence of depression in women including genetically determined vulnerability, hormonal fluctuations related to various aspects of reproductive function, role-stress, victimization, sex-specific socialization, internalization coping style, and disadvantaged social status (Noble, 2005). In terms of female athletes in the university sport context, Storch and colleagues (2005) suggest that females may be exposed to a greater number of stressors during their university careers than males, for example problems having professors take them seriously and problems joining alternative extra-curricular activities (Richards & Aries, 1999). Other
researchers have suggested that female athletes may internalize the effects of stressful situations or negative feedback from others, both of which are plentiful in sport, and may result in higher levels of distress in females than in males (Storch, Masia-Warner, & Brassard, 2003). These suggestions are largely speculative and I question their validity as causes for higher depression rates in females. There may be alternative reasons why females tend to report higher rates of depression including females being more likely to report symptoms and having more positive attitudes toward psychological help compared to males (Kroenke & Spitzer, 1993; Mackenzie, Gekoski, & Knox, 2006). This research, and a review by Parker and Brotchie (2010) in which many of the proposed suggestions for why females report higher depression rates are challenged, indicates that it is possible that males experience similar rates of depression to females or at least that the differences between males’ and females’ experiences with depression are unclear.

Few researchers have examined the reasons why female athletes tend to report higher levels of depression. Jones and colleagues (2013) interviewed 10 current and former female university athletes about their lived experiences with depression with a primary aim to illuminate potential reasons for the gender-based pattern of depression prevalence in athletes. The researchers reported rich detail about the athletes’ experiences with depression but concluded that gender did not play a large role in their findings because participants rarely mentioned it as an important quality in their experiences. In addition, the authors of this study reported that the themes that characterized the female athletes’ experiences were similar to those found in previous qualitative research examining both male and female participants’ experiences with depression (Farmer, 2002). Interestingly, one of the very few studies examining elite athletes’ subjective experiences of depression was conducted with males (Doherty, Hannigan, & Campbell, 2016). These researchers reported numerous themes related to the emergence of
depression, manifestation of symptoms of depression, and adaptive and maladaptive processes of recovery within the elite sport context. It will be very interesting to compare the experiences of the athletes that Doherty and colleagues (2016) interviewed with future research conducted with female elite athletes as the factors contributing to female athletes’ development and manifestation of depression are largely unknown. From my perspective, many of the stressors that elite athletes face, which will be described below, likely affect female and male athletes to a similar degree because they are part of the nature of elite sport culture which both genders experience. It is, therefore, possible that an elite female athlete’s experience with depression may not be different from that of an elite male athlete and it would be difficult to assess such differences without also studying a male athlete’s experience.

**The Sport Context**

As mentioned in the introduction and referenced throughout the discussion of the prevalence of mental health issues including mood disorders in athletes, a complex relationship is proposed between mental health and sport participation. On the one hand, and typically at lower competitive and recreational levels, sport participation is associated with a host of positive outcomes such as enhanced self-esteem, reduced stress and protection against depression later in life (Eime, Young, Harvey, Charity, & Payne, 2013; Jewett et al., 2014). Eime and colleagues (2013) conducted a review of 30 studies examining the relationship between sport participation and psychological and social benefits for children and adolescents to reach the conclusion that sport participation is beneficial. Jewett and colleagues (2014) used data from an eight year longitudinal study and found that involvement in school sport during adolescence predicted lower depression symptoms, lower perceived stress, and higher self-rated mental health in young adulthood. Some of these benefits can be attributed to high levels of physical activity that are
associated with sport participation and have been consistently linked to both physical and mental health benefits (Blair & Morris, 2009; Brown, Mishra, Lee, & Bauman, 2000; Dunn, Trivedi, & O’Neal, 2001). It should be mentioned, however, that both mental health status and physical activity participation are significantly related to socioeconomic status. Those in higher socioeconomic status brackets are more likely to participate in organized sport and physical activity because of a range of social and personal factors (Grzywacz & Marks, 2001; White & McTeer, 2012). Higher socioeconomic status is also associated with lower rates of mental illness (Fryers, Melzer, & Jenkins, 2003). Therefore, there may be a bias toward psychologically healthy individuals in the samples of these studies demonstrating the positive impact of physical activity and sport participation and the protective nature of physical activity for individuals from populations which are more likely to experience mental health problems is unclear.

On the other hand, when sport participation reaches elite levels these positive relationships become entangled with a host of potentially serious stressors and risk factors. These risk factors may affect athletes to varying degrees and include the stigma of mental illness in athletes, injury, competitive pressure, high societal and internal performance expectations, and retirement from sport. There is also the potential for sport to represent an important coping mechanism for an athlete with depression. Consideration of the potential role of sport in athletes’ experiences with depression and, by extension, the unique experiences facing athletes with mental illness are areas in which little is known and in which researchers have called for further investigation. Only when more is known, will the development of responsible and effective psychological and psychiatric treatment for this population be possible (Bar & Markser, 2013; Reardon & Factor, 2010).
**Stigma and public perception.** The stigma that surrounds mental illness in the sport world is damaging for athletes because it represents a significant barrier to help-seeking behaviour (Gulliver et al., 2012; Linder, Brewer, Van Raalte, & De Lange, 1991; Douglas & Carless, 2009; Schwenk, 2000). Further, there is a widespread public perception, including that of athletes, that in order to be successful in training and competition, athletes must exhibit both physical and mental strength. This perception makes mental illness seem even less acceptable in this population and may contribute to silencing the experiences of athletes who may be struggling with psychological challenges (Douglas & Carless, 2015).

Gulliver and colleagues (2012) found that stigma was a significant barrier to help-seeking behaviours in athletes. These researchers conducted focus group interviews with elite athletes recruited from the Australian Institute of Sport in which they asked athletes about their perceptions of various barriers and facilitators, drawn from existing literature in this area, to seeking help for mental health problems. The athletes identified that the greatest barrier to help-seeking was public, perceived, and self-stigmatizing attitudes toward mental illness. The athletes identified the sport context being more accepting of sport psychology counseling services for performance-related issues than for a mental health problem such as depression. They felt that this was largely due to the concern that others would perceive them as weak or unable to cope effectively if it was known that they were struggling with mental illness. Interestingly, the researchers reflected that they came away from the focus groups with the underlying impression that the participants felt that society holds higher expectations of elite athletes with respect to discipline and physical and mental strength and that help-seeking for mental health challenges was incongruent with these expectations (Gulliver et al., 2012).
In their study examining public perceptions of athletes who consult sport psychologists, Linder and colleagues (1991) reported findings that are consistent with this impression. These researchers asked fans, including undergraduate students and older members of the community, to indicate how strongly they would recommend drafting a player who had consulted either a sport psychologist, psychotherapist, or coach to improve performance. The results of the study indicated that males were significantly less enthusiastic about recommending an athlete who had consulted with a sport psychologist or psychotherapist versus a coach. Thus, sports fans appear to have a set of normative expectations concerning athlete behaviour which is consistent with the impression that Gulliver and colleagues (2012) received from their athlete participants. Linder and colleagues (1991) warn of the danger in the derogation of athletes seeking sport psychology services because it may inhibit them from accessing the benefits of such services. This phenomenon is also unfortunate from a researcher’s perspective because it may make athletes less willing to participate in studies related to mental health due to the perception that their reputation may be compromised (Linder et al., 1991). It should be noted that this study is 25 years old and much work has been done in subsequent years to address and reduce stigma toward mental illness (Dalky, 2012). Despite encouraging strides in society as a whole, the world of sport may be behind this trend because of the high expectations that athletes are held to (Gulliver et al., 2012). Therefore, it is highly likely that the stigma toward and public perceptions of athletes with mental illness that have been described in these studies may have some, if not a significant, impact on an athlete’s experience with depression - the precise nature of which is unclear.

**Risk factors for psychopathology in the sport context.** In addition to stigma and public perception, there are a number of other risk factors for psychological challenges, and particularly
for depression, which are associated with a high level of sport participation. Stressors related to injury, competitive pressure, high societal and internal expectations to perform, a strong athletic identity, and retirement from sport can represent very real challenges for athletes whose lives revolve around sport. Elite athletes report a range of stressors that they perceive can contribute to serious mental health issues including anxiety and depression. These stressors include distress resulting from poor performance, feelings of isolation, sadness and anger triggered by injury, the stress of weight control in some sports, being expected to demonstrate athlete appropriate behaviour, and balancing sport with other aspects of life such as family, work, or school (Gulliver et al., 2012). Researchers have examined some of these factors in-depth, including injury, performance pressures and retirement from sport (Douglas & Carless, 2015; Grove, Lavallee, & Gordon, 1997; Hammond et al., 2013).

**Injury.** In terms of the effect of injury on psychological health, multiple studies have found that for both university and elite athletes, injury and pain are consistently associated with an increased risk of depression (Appaneal et al., 2009; Gulliver et al., 2015; Leddy, Lambert, & Ogles, 1994; Smith & Milliner, 1987; Yang et al., 2007). Considering annual injury incidences as high as between 61% and 76% have been reported in elite athletes, injury represents a significant and common risk factor for this population (Bennell, Matheson, Meeuwisse, & Brukner, 1999; D’Souza, 1994). Appaneal and colleagues (2009) examined post-injury depression in 164 university and high school athletes. The researchers administered self-report surveys and conducted clinical interviews at one week, one month, and three months post-injury, the results of which were then compared to those from non-injured control subjects. The results of the statistical analyses conducted by the researchers indicated that athletes with injuries had higher clinician-based depression ratings at one week and one month post-injury compared to
healthy athletes. In their correlational study examining the prevalence of various psychological disorders in elite Australian athletes, Gulliver and colleagues (2015) found that injured athletes had significantly higher symptoms of depression and generalized anxiety than non-injured athletes. While these studies highlight the negative impact that injury can have on athletes’ psychological health, a limitation of examining this relationship with solely quantitative measures is that the nature of why injury impacts depression ratings is left unexamined. Some researchers have attempted to address the question of why athletic injury causes athletes to experience significant distress and their suggestions include multiple factors. Based on five case studies of injured athletes who attempted suicide, Smith and Milliner (1987) suggest that risk factors for these athletes included success in sport pre-injury, injury requiring surgery, lengthy rehabilitation, inability to re-capture pre-injury success, post-concussive syndrome, and replacement by teammates. In their phenomenological examination of collegiate athletes’ experiences with depression, Jones and colleagues (2013) reported that one of the factors that embodied the athletes’ depression was a sense of lacking control when injury caused them to be unwillingly restricted from sport participation. From a physiological perspective, Begel (2000) hypothesized that the catecholamine and endogenous opioid systems may be downregulated after injury which may contribute to feelings of dysphoria.

On the other hand, some research demonstrates that the relationship between injury and mental health in athletes is far from simple and may not be exclusively negative (Papathomas & Lavallee, 2006; Wiese-Bjornstal, Smith, Shaffer, & Morrey, 1998). Papathomas and Lavallee (2006) conducted a life history analysis of a male soccer player with an eating disorder and concluded that an injury that forced this athlete to take time away from sport finally allowed him the opportunity to focus on his personal health and undergo treatment for his eating disorder. In
addition, Wiese-Bjornstal and colleagues (1998) developed an integrated model of response to sport injury in which they include the possibility that after enduring the challenge of a long rehabilitation period, athletes may become more dedicated to and focused on their sport than they were pre-injury.

**Performance pressure.** The pressure to perform up to internal and external expectations and the impact of failing to do so also represent stressors that may impact an athlete’s mental health. Longitudinal work by Douglas and Carless (2006, 2009, 2015) with female professional golfers reveals much about the immense pressure to produce results that surrounds elite athletes. Douglas and Carless (2009) describe the effect that adhering to the performance narrative can have on athletes who find themselves no longer able to reach its standards. The performance narrative is “a story of single-minded dedication to sport performance to the exclusion of other areas of life and self…Winning, results, and achievements are pre-eminent and link closely to the storyteller’s mental well-being, identity, and self-worth” (Douglas & Carless, 2009, p. 3). When society and athletes view winning as the only acceptable outcome of a sport performance there is an expectation that it is to this end that an elite athlete should dedicate his or her life and anything less demonstrates lack of commitment and discipline. Douglas and Carless (2009) describe the devastating psychological repercussions of this perception for two athletes whose lives no longer fit the performance narrative. Berni was not winning on the professional golf tour and developed stress and anxiety over her poor results which she believed led to physical health problems and depression. Debbie became pregnant and having a child subsequently ended her golf career. Debbie felt resentment about the pregnancy disrupting her performance narrative but she felt that she could not express these feelings because of the fear that she would be perceived as a terrible mother. Debbie’s turmoil over the end of her career and her forbidden thoughts
about her pregnancy led to a suicide attempt. Douglas and Carless (2009) describe how these participants’ stories suggest that neither golfer perceived an alternative route to self-worth outside of golf and outside of successful performances and thus suffered significant psychological turmoil when their career trajectories were disrupted. Thus, Douglas and Carless’ (2006, 2009, 2015) research highlights the danger of performance pressure when an athlete is unable to perform. Jones and colleagues (2013) also capture the often inescapable nature of the performance narrative in their analysis of their participants’ experiences when they state:

Though they struggled with depression due to plateaus in sport performance, significant injuries, declining enjoyment in sport, tense team dynamics and other issues, they were so committed to sport and highly identified as athletes that leaving sport behind was never truly an option (p. 13-14).

Unfortunately, winning is almost always the ultimate goal of elite sport participation so moving away from sole adherence to the performance narrative is certainly not the norm within this culture. It is possible, however, for athletes to develop other spheres of their lives which can be highly protective against the psychological impact of poor sport performance. Douglas and Carless (2006) describe the “relational narrative” as an alternative to the performance narrative in which the focus is on care and connectedness over and above values of individuation, hierarchy, competition, and other-orientation instead of a self-orientation. In addition, studies have demonstrated that having multiple identities outside of sport can be protective against psychological distress during retirement from sport (Lavallee, Gordon, & Grove, 1997).

The specific impact of performance failure on elite athletes’ mental health was examined by Hammond and colleagues (2013). These researchers assessed the prevalence of diagnosed, failure-based depression and self-reported symptoms of depression within a sample of 50
university swimmers competing for positions on Canadian Olympic and World Championship teams. Within the elite top 25% of the athletes assessed, which were based on the top 25% in the national rankings, prevalence of depression doubled post-competition and performance failure was significantly associated with depression. In their discussion, the researchers suggested that the results of competition may have a more profound effect on the mood of the most elite athletes because of an enhanced personal significance of failure in these athletes. In their inquiry into the experiences of female university athletes with depression, Jones and colleagues (2013) also found that performance failure had a negative impact on mental health. The athletes in this study discussed how poor performances led to self-doubt, self-criticism, and the questioning of athletic ability. This self-doubt related to sport performance generalized to other aspects of the athletes’ lives, leading them to question their core sense of self-worth. It is easy to see how these feelings could have a significant impact on an athlete’s experience with depression.

**Retirement from sport.** Researchers have consistently shown that retirement from elite sport can represent a significant risk to athletes’ psychological health (Lavallee & Robinson, 2007; Wylleman, Alfermann, & Lavallee, 2004) and can leave athletes vulnerable to depression and other psychopathologies (Stambulova, Alfermann, Statler, & Cote, 2009). Much of the psychological distress caused by retirement is attributed to feelings of loss and helplessness that are particularly strong if an athlete’s sense of identity is built upon his or her sport participation (Lavallee, Gordon, & Grove, 1997; Lavallee & Robinson, 2007; Torregrosa, Ramis, Pallares, Azocar, & Selva, 2015). Lavallee and colleagues (1997) examined how a sample of elite Australian athletes coped with distressful reactions to retirement from sport. These researchers recruited 15 athletes who were identified as having undergone extreme emotional stress upon the termination of their sport participation and found that individuals with a high athletic identity at
the time of retirement experienced greater emotional adjustment difficulties compared to those athletes with a weaker athletic identity.

Drawing from the work of Brewer, Van Raalte, and Linder (1993), Lavallee and colleagues (1997) define athletic identity as “the degree to which an individual defines himself or herself in terms of the athlete role” (p. 131). To explain why retirement from sport and the loss of athletic identity can cause psychological distress, Lavallee and colleagues (1997) suggest that it is due to a common socialization process that occurs in an athletic environment. As athletes reach higher levels of sport and devote more and more of their lives to training and competing, they may develop a self-concept that does not extend beyond the athlete role. Thus, when a narrow self-concept is threatened by termination of the activity upon which it has been established, negative emotions associated with loss occur (Brewer et al., 1993).

A phenomenological study by Lavallee and Robinson (2007) in which the researchers interviewed five former, female gymnasts about the factors that might facilitate or hinder self-identity adaptation to athletic retirement yielded results that are consistent with Lavallee and colleagues’ (1997) suggestion. The gymnasts in this study described how they had been encouraged to dedicate their lives to their sport which resulted in them feeling lost and helpless when they retired and feeling unsure of a future outside of sport. These feelings led to significant distress which, for some, has lasted throughout their retirement. Kerr and Dacyshyn (2000) also interviewed elite female gymnasts about their retirement experiences and found that five out of the seven athletes they studied underwent difficult transitions out of sport. Consistent with Lavallee and colleagues’ (1997) findings, these gymnasts described a period of adjustment after retirement during which they felt uncertainty and disorientation as their athletic identity was lost.
Further evidence for the psychological toll that retirement can have on athletes is provided by Torregrosa and colleagues (2015) in their longitudinal, qualitative study examining the retirement processes of Olympic athletes. These researchers conducted semi-structured interviews with fifteen Olympic athletes pre- and post-retirement in which they compared the athletes’ views on retirement planning, voluntary termination, multiple personal identities, availability of social support, and active coping strategies. Once again, we see in the results of this investigation that athletes with a one-dimensional identity reported more stress and difficulties in the transition period and athletes with multiple personal identities reported easier transitions.

Very few studies have specifically examined the effect of retirement from sport in athletes with depression or the effect that retirement from sport may have on depression symptoms, and the findings that do exist are inconsistent (Jones et al., 2013; Schwenk, Gorenflo, Dopp, & Hipple, 2007; Weigand, Cohen, & Merenstein, 2013). Jones and colleagues (2013), who interviewed current university, female athletes, were limited by their abilities to assess athletes’ perceptions of how the idea of future retirement may impact their current psychological states. Importantly however, even the prospect of discontinuing sport participation was perceived by some of these athletes as a precipitating factor of their depression. Schwenk and colleagues (2007) assessed the prevalence of depression and pain in 1617 retired professional football players in addition to difficulties they experienced with the transition from active athletic competition to retirement. Within this sample, 14.7% were categorized as experiencing moderate to severe depression and 47.6% reported commonly experiencing pain. Experiencing pain and depression was strongly associated with trouble sleeping, financial difficulties, marital or relationship problems, and problems with fitness, exercise, and aging. Due to the correlational
nature of this study, it is impossible to determine the degree to which these difficulties, depression symptoms, and pain are associated with the actual process of retirement from sport or how much they may have resulted from other factors in the athletes’ lives. Finally, Weigan and colleagues (2013) compared self-reported levels of depression in recently graduated versus current student-athletes. Interestingly, and contrary to the researchers’ hypothesis, depression levels were significantly higher in the current student-athletes than the retired athletes. As an explanation for their unexpected finding, Weigan and colleagues (2013) cite many of the possible contributing factors to developing depression that exist in university sports that have been discussed in this literature review, including overtraining, performance pressure, and injury. The researchers suggest that after retiring from university sport many of these stressors are eliminated which may account for the lower levels of depression in university athletes two years after graduating. Again, because of the design of the study it is impossible to determine the impact that the actual transition out of sport had on these athletes’ levels of depression as the retired athletes had had two years to adjust to any distress that they may have experienced at the time of retirement.

From the few studies in this area, it is evident that the relationship between transitioning to retirement from sport and depression in elite athletes, and in clinically depressed athletes in particular, is understudied and therefore not well understood. There is also research to suggest that retirement from sport is not always a negative experience for athletes. The fact that Weigan and colleagues (2013) found that two years after graduation, retired university athletes had lower levels of depression than athletes who were still participating in sport attests to this. It may be that, after coping with the initial stressors associated with the transition into retirement, athletes are more than capable of positively adjusting to a life without sport.
The degree to which an athlete experiences distress over retirement from sport is often highly related to the circumstances surrounding retirement. For example, Torregrosa and colleagues (2015) found that athletes who voluntarily terminated their sport participation, developed multiple personal identities over the course of their sport involvement, had available social support, and utilized active coping strategies during retirement reported less adaptation problems during and after the retirement process. Stambulova and colleagues (2009) wrote a position stand on the career development and transitions of athletes and identified factors that may influence athletes’ vulnerability to retirement transition difficulties. More specifically, they differentiated between normative career transitions that are predictable versus non-normative and less predictable career transitions such as injury or changing coaches or teams unexpectedly. It is suggested that the low predictability of non-normative transitions may make these more difficult for athletes to cope with (Stambulova et al., 2009). Therefore, there are many different factors that may influence the experience of an elite athlete with depression and his or her transition out of sport, an area that will be investigated in the current study.

**Sport as a coping mechanism.** Very few researchers have specifically examined the role that sport participation may have on an elite athlete’s ability to cope with mental health issues; however it is evident from some athletes’ discussions of their experience with sport and psychological challenges that this dynamic of the sport and mental health relationship exists. In the Jones and colleagues (2013) study, the female athletes were firm in their belief that sport was both a source of and a reprieve from their depression. More specifically, the researchers reported that sport served as a source of enjoyment and an escape from negative events, as well as a vehicle by which to enhance relaxation, happiness and emotional expression. The athletes perceived that they had developed a sense of resiliency through their challenging sport
experiences which they believed would help prepare them to move on from sport when the time came. These perceptions are consistent with research conducted with the general population which has consistently found that sport, and exercise more generally, can serve as valuable social opportunities, as methods of coping with stress, and as well-known treatments for psychological problems such as depression and anxiety (Lawlor & Hopker, 2001; Petruzzello, Landers, Hatfield, Kubitz, & Salazar, 1991). It is unclear at this point whether the physical and psychological benefits associated with recreational or low-level competitive sport participation are still applicable to elite athletes whose experiences with sport often include consistent exposure to risk factors for mental illness. More research is needed to explore the potential role of elite sport participation as a mechanism for coping with mental illness.

It is clear from the multiple potential roles of sport in the aetiology and manifestation of depression in athletes that have been outlined that the nature of this relationship is dynamic and likely highly individual.

**Sport Psychiatry as an Emerging Field**

The recent emergence of the field of sport psychiatry may be evidence of the growing recognition that athletes do indeed suffer from mental illnesses and may require special considerations with respect to assessment and treatment. The field was pioneered in the early 1990s by the American psychiatrist Dan Begel who defined sport psychiatry as the application of psychiatric knowledge and treatment methods to the world of sports (Begel, 1992). The International Society for Sport Psychiatry was founded in 1994 by Dan Begel, Dan Glick, and Antonia Baum in an attempt to define a niche that was distinct from sport psychology which was predominantly concerned with sport performance. These psychiatrists acknowledged that sport performance was a valuable consideration for sport psychiatry because of its importance to high
level athletes; however, research into the treatment of psychopathology in athletes was their main focus (Baum, 2013). In line with this focus, Glick and Horsfall (2009) describe three reasons for the specific psychiatric treatment of athletes: an athlete’s state of mind can have significant impact on performance; participation in sport has a role in affecting a person’s mood, thinking, personality, and health; and finally the psychiatric care of an athlete must be adapted to the athletic context.

The need to reduce the stigma surrounding mental illness in the world of sport provided impetus for the development of a specific field to tackle some of the psychological challenges facing athletes. As described in the previous sections, sport psychiatrists and researchers acknowledge that the tendency to idealize athletes’ physical and mental health and stigmatize mental disorders in general are significant contributors to the paucity of research in this area and the underdevelopment of specific psychiatric treatment for athletes (Reardon & Factor, 2010). There are other factors that have contributed to psychopathology in athletes being understudied. For example, Reardon and Factor (2010) point out the fact that athletes tend to minimize physical and psychological signs of weakness so as not to appear at a disadvantage in competition. In addition, athletic behaviours sometimes resemble symptoms of mental disorders which are normalized in sport culture. For example, exercise addiction, perfectionism surrounding performance and training, obsessive behaviors surrounding training, and harmful weight control behaviours to improve performance could all be classified as psychologically unhealthy yet are common and normalized among competitive athletes. Finally, athletes are often able to achieve high levels of success in sport in spite of a psychiatric condition and may be reluctant to seek psychiatric treatment, thus making it difficult to detect and treat their psychopathologies (Reardon & Factor, 2010).
A number of ambiguities regarding the relationship between sport and mental health in competitive athletes have been discussed throughout this literature review, for example the overlap between depression and over-training syndrome and the enjoyment of sport and continued participation despite psychological risk factors like injury, early retirement from sport, and immense performance pressure. Although these complexities have begun to be examined in sport psychology and sport psychiatry research, Reardon & Factor (2010) warn that the lives of professional and elite athletes are becoming increasingly stressful due to factors such as heightened media attention and the systematic and intensive training that is becoming necessary to compete at the highest level. Thus, these researchers, and others (Bar & Markser, 2013), have called for future research on the psycho-social factors that influence elite athletes in order to understand sport specificity in the aetiology of mental disorders. For the field of sport psychiatry the principle aims of developing knowledge in this area are to increase awareness and reduce stigma surrounding athletes’ experiences with mental illness, facilitate prevention strategies, and inform appropriate and effective treatment of athletes with mental illness (Reardon & Factor, 2010). These aims are highly consistent with the purpose and rationale of the current study and the implications of this research for the lives of athletes.

**Rationale for the current study**

The influence that sport may have within an athlete’s experience with depression partly depends on the strength of the individual’s athletic identity, personality, support system, and other predisposing factors such as events in the athlete’s life that are unrelated to sport. Reardon and Factor conducted a review in 2010 of the existing knowledge of psychopathology in athletes and its causes in which they explain the complexity of the relationship between sport and mental illness. These researchers’ perspective summarizes the interrelatedness of the factors that have
been outlined above and reflects the notion that an athlete may have chosen to participate in sport as a means of coping with a disorder, however an athlete’s mental illness may also have been precipitated or worsened by participating in sport. Sport may very well have nothing to do with an athlete’s depression, may be a coping mechanism, or may have caused the depression. It became critical in the current study to keep all of these possibilities in mind to avoid any assumptions about the role that I may have expected sport to have in the participant’s experience with depression.

To determine valuable and impactful avenues for future research within the field of sport psychiatry we must examine the current state of the literature and identify what knowledge needs to be developed or explored for the first time. We must also consider the types of research that have been used in the field and thus the types of knowledge that certain methods prioritize over others. A vast majority of research investigating mental health in athletes has used quantitative measures (Jones et al., 2013). Although quantitative, survey-based studies are useful in the assessment of the prevalence of and common risk factors associated with mental illness in athlete populations, these designs do not allow for insight into the individual experience of an athlete suffering from depression. Preliminary work in the area of athletes’ experiences with mental illness has used a highly individual approach with a life history analysis of a male soccer player with an eating disorder (Papathomas & Lavallee, 2006). By investigating this athlete’s experience in such a manner these researchers were able to share the story of an individual whose experience is lost when the focus is on survey-based research that tells us that, in the world of sport, eating disorders are a female condition and predominantly effect athletes in aesthetic sports (Schaal et al., 2011). The point of view of the athlete, unconstrained by survey questions, may illuminate some of the unanswered questions in the current literature and provide
valuable knowledge in regards to understanding contextual influences on mental health for this unique population. These unanswered questions include how sport may or may not contribute to the precipitation of depression, how depression may be distinguished from the symptoms of OTS, how having depression affects the retirement process for athletes, and how sport can represent both a coping mechanism and a considerable source of stress. Prominent researchers in the field of sport psychology have suggested that to develop a holistic understanding of “complex social processes in a particular domain, researchers can probably obtain more relevant data from interviews and observations than from quantitative survey instruments” (Eklund, Jeffery, Dobersek, & Cho, 2011, p. 286). These researchers also point out that qualitative methods and the data collection methods that are often associated with them can evolve during the data acquisition process and this results in a degree of flexibility that can produce interesting leads and alternatives. Thus, employing unrestrictive research methods may be a highly beneficial avenue to follow when inquiring into largely uncharted territory such as elite athletes’ experiences with depression.

Furthermore, in this area of research we see much overlap between research conducted with university and elite athlete populations, with the vast majority using the former. Although it is often reasonable to extrapolate the findings of these studies to elite athletes, there may be different socio-environmental factors that affect elite athletes alone that are relatively unknown and may make their experiences with sport and depression distinct from university athletes’, regardless of overlapping levels of competition (Bar & Markser, 2013; Glick, Stillman, Reardon, & Ritvo, 2012). For example, athletes entering university are faced with a significant life transition in which they may experience increased time demands, decreased autonomy, high pressure to meet expectations from those around them, increased levels of competition, and
academic and athletic-related performance anxiety (Gill, 2008; Proctor & Boan-Lenko, 2010; Storch et al. 2005; Yang et al., 2007). Elite athletes experience many of the same expectation and performance pressures, in addition to the stressful prospect of a comparatively early retirement from their career (Baum, 2005) and a more singular focus on sport. Thus, research on post-university, elite athletes’ experience with mental illness represents a significant gap in the current literature.

**Purpose of the study**

The purpose of the study was to explore the role of the sport context in an elite athlete’s experience with depression. Therefore the focus of the inquiry was on examining the relationship that may or may not exist between sport participation and the experience of mental health issues. To do this, the athlete and I explored her experiences with some of the circumstances that may influence this relationship that have been discussed throughout this literature review. I hoped that, by sharing the experiences of an elite athlete with mental health issues, the study will help challenge widely held assumptions that to be successful athletes must represent the epitome of mental toughness and thus are thought to be immune from psychopathology. Another aim of this study was to contribute to the knowledge base from which mental healthcare clinicians can draw on to inform their understanding of the influence of the sport context on elite athletes’ experiences with mental health challenges.
CHAPTER 3
Methodology and Methods

Life History Research

To develop an understanding of an elite athlete’s experience with mental health issues, I used a life history approach (Cole & Knowles, 2001). The purpose of a life history inquiry is to gain an understanding of a “situation, profession, condition, or institution through coming to know how individuals walk, talk, live, and work within that particular context (Cole & Knowles, 2001, p. 11).” A life history approach takes the perspective that by exploring an individual’s life across time, by taking into account the individual’s past experiences and then considering the impact of these experiences upon their current and future lives, the opportunity to develop personal meaning, as well as potential insights into the experiences of a community, is created. In the current inquiry, the goal was to contribute to knowledge about the role that elite sport participation may play in the development and manifestation of mental health issues in an athlete with the hope that psychological treatment may benefit from such knowledge and that societal assumptions surrounding mental health and illness in this population may be challenged. As mental health issues tend to affect individuals over the course of their lives, and elite sport participation typically begins at a young age and requires numerous years of training and strict lifestyle habits, taking a life course perspective in the study of such an individual was helpful. In addition, over the course of an athlete’s sporting career there are often challenges, such as periods of time with injury and retirement from sport, which may pose significant psychological challenges. Taking into account an athlete’s experiences with sport and mental health issues across his or her entire life allowed for an unrestricted exploration of such challenges (Papathomas & Lavallee, 2006).
In keeping with this approach, multiple, in-depth interviews were conducted with one elite athlete over the course of approximately four months. The specific number of interviews that was necessary was based on the time it took to sufficiently explore the main topics that I hoped to cover (see Appendix B for a list of topics). As the interviews progressed I kept in mind Cole and Knowles’ (2001) suggestion that intellectual exhaustion has likely been reached when the participant begins repeating stories. I recruited only one participant for this study for specific reasons. Part of this decision was due to the temporal constraints on this project as a two year master’s thesis. A significant component of conducting life history research involves transcribing each interview after it occurs and providing the participant with the opportunity to review the transcription before subsequent interviews to clarify or elaborate on any parts of the discussion (Cole & Knowles, 2001). It was anticipated that this cyclical data collection and analysis process would take time and commitment on the part of both researcher and participant. I had to acknowledge that although this project would require a significant commitment and engagement from the participant, I could not expect it to become a major priority in the context of the rest of the participant’s life. Therefore, at times scheduling multiple interviews in which I would be asking the participant to share personal, and likely sensitive experiences, would likely be dependent on the participant’s schedule. The more important consideration in my decision to engage just one participant was that I believed it was the responsible way to dedicate enough time and consideration to this project to do justice to the complexity and depth of the athlete’s life and experience with mental health issues.

**Paradigmatic perspective: Epistemological and ontological considerations**

The paradigmatic perspective from which I approached this inquiry was social constructivism which is consistent with the basic assumptions inherent to a life history
methodology, in which an individual’s reality and the development of a life are considered to be shaped by the interplay of personal, historical and cultural influences (Cole & Knowles, 2001; Papathomas & Lavallee, 2006). Thus, social and cultural influences are believed to play a significant role in shaping individual constructions of reality, which represent the social component of the paradigm, yet individual agency plays an important role in shaping reality as well. Life history research provides an avenue by which the individual whose life is under examination may exercise his or her agency to construct meaning from his or her experiences and life stories. Then, it is through a mutual interpretative process by the researcher and the participant that the participant’s life is situated within the social context in which it has existed and developed (Daly, 2007).

New researchers are strongly encouraged to engage in a consideration of the ontological and epistemological assumptions that inform the research inquiries they choose to pursue and subsequently the research design they employ to delve into a given inquiry (Chamberlain, 2000). Therefore, I will describe in detail the philosophical underpinnings associated with my adoption of the social constructivist paradigm and how they relate to the use of a life history methodology to examine an athlete’s experience with mental health issues. Social constructivism is informed by relativist ontology (Guba & Lincoln, 1994). Ontology is concerned with the question of the nature of reality and what is possible for the researcher to know about reality (Guba & Lincoln, 1994). Relativism is the belief that reality is not defined by a set of established laws and theories but is instead locally and specifically constructed by individuals within the context of their social worlds (Guba & Lincoln, 1994). While this approach emphasizes that different individual realities exist concurrently, elements of these realities can be shared between individuals. Therefore, taking a life history approach in this study allowed me to access the athlete’s
perspective of the role that sport played in her experience with mental health issues and thus shed light on the meaning of mental health and elite sport participation for athletes.

Epistemology encompasses beliefs about the nature of the relationship between the researcher and that which is being researched, in this case an elite athlete, as well as beliefs about what it is possible to know as a researcher (Creswell, 2007). Social constructivism, and in turn life history research, correspond with a subjectivist epistemology in which the researcher and the participant are considered collaborators in the knowledge generating process of inquiry (Cole & Knowles, 2001; Guba, 1990). Plummer (2001) asserts that life history research “reveals, like nothing else can, the subjective realm (p. 18).” Research findings do not emerge from the data collected from a participant, which is a positivist concept, but rather are co-created as a result of the interaction between the inquirer and the research “informant”, which is the term Cole & Knowles prefer to call a life history research participant (Guba, 1996). Therefore, emphasis is placed on the researcher-participant relationship, the nature of which was crucial for me to understand in order to create a safe and ethical environment for the participant. Important to the consideration of this relationship is the role of reflexivity within a subjectivist epistemology and life history research more specifically.

By developing an understanding of reflexivity within life history research, I began to understand the impact that my life experiences, existing knowledge and assumptions about elite sport participation and mental health may have on this research project. The subjectivist epistemology embraces the role that the researcher plays in shaping the direction and outcome of an inquiry. Thus, the researcher’s values, preferences, and understandings are considered an inherent part of the meaning-making process of knowledge (Daly, 2007). This is not to say, however, that the life history researcher should not try to be fully aware of the influence of her
existing knowledge about herself and the topic of inquiry and be explicit about these throughout the research process. Cole and Knowles (2001) suggest that the importance of acknowledging one’s position as a researcher is tied to the development of a sensitive and responsive nature with the participant. This process is described by Cole and Knowles (2001) as follows:

The more we understand ourselves as researchers, the better able we are to listen to and understand others. If we make explicit our own understandings, and know ourselves well enough, we are able to understand what might be getting in the way of us listening to and understanding participants’ experiences (p. 52).

Life history researchers acknowledge that they cannot unload their values, beliefs, experiences, perspectives, and contextual characteristics but being aware of these and how they may affect the research is important. A personal history research account, in which the researcher lays out the path that led her to a research topic and her experiences related to her interest in the topic, is a way of developing self-awareness of the researcher’s subjectivity and was included in Chapter 1 (Cole & Knowles, 2001).

**Researcher-participant relationship**

The relationship that I developed with the participant in this study was a crucial component of fostering a comfortable and psychologically safe research environment for both of us. The authenticity of this relationship was an important step toward being able to elicit in-depth and meaningful life stories from the participant in order to create a high quality research project (Cole & Knowles, 2001). I acknowledge that the success of this study likely hinged on my ability to foster such a relationship with the participant and therefore I believe that it is necessary to provide a detailed examination of the nature of this relationship to demonstrate my understanding of the weight of this endeavor.
Cole and Knowles (2001) describe the principles of relationality, mutuality, and empathy as guiding life history research. These three principles inform what the relationship between the researcher and the participant should look like in life history research and reflect how the philosophical underpinnings of the methodology should be applied to conducting this form of qualitative inquiry. The importance of these principles is described by Cole and Knowles (2001): “These are the conditions that elevate the representations of the researching process and analyses into richly evocative experiences, textured, relationally authentic, and meaningful ‘texts’ (p. 26).”

Relationality refers to the personal nature of the researcher-participant relationship in life history research. The researcher must develop a significant degree of familiarity with the life that is being examined to prevent the theorization and abstraction of things that do not actually capture the experience of the subjects (Douglas & Carless, 2015). Thus, I began the relationship with a concerted effort to get to know the participant by relating to her with common ground (Cole, 1991; Cole & Knowles, 2001). My participation in competitive track and field and experience with the lifestyle of a high performance athlete provided me with such common ground. Relationality implies an intimacy in the relationship in which mutual care and friendship, respect for personal vulnerabilities, attention to issues of reflexivity, ethics, and power are at the forefront (Busier et al., 1997). This principle also speaks to the importance of establishing trust and rapport in the relationship, a concept that is essentially inherent to successful qualitative interviewing (Jones, Torres, & Arminio, 2014). These qualities, which make up the relationality principle, are considered necessary for authentic knowledge production and representation of the participant (Cole & Knowles, 2001: Lawrence-Lightfoot & Hoffman-Davis, 1997). Cole and Knowles (2001) go so far as to state that one gets closer to knowledge
production by blurring the boundaries between the personal and the professional which requires the life history researcher to challenge the hierarchical practices that traditionally define the relationship between the researcher and those being researched. The relationship should instead be defined from a humanistic standpoint in which the interpersonal dynamic is complex, fluid, and ever-changing.

The second principle which informed the nature of the relationship that I developed with the participant is mutuality. Mutuality refers to the collaborative process of knowledge production that is a fundamental value within life history research. Because the participant is invited to contribute to the development of interpretations and understandings of the topics discussed in the interviews in this approach, my position as the researcher had to challenge “the notions of hierarchy and power that place researchers exclusively in charge of the information-gathering phase of researching” (Cole & Knowles, 2001, p.71). Not only should the participant be given a position of authority in the meaning-making process of the inquiry, she should also be given the opportunity to collaborate on the areas that will be discussed and the direction that the interviews would take. It was part of my role as the researcher to ensure that the direction of the conversations stayed in line with the aims of the inquiry; however, I had to create an atmosphere in which the participant felt engaged and interested in the project for us to develop a collaborative research relationship. Ideally, a product of creating such an atmosphere would be the participant feeling a sense of ownership and benefit from the project and a deep level of commitment to be engaged throughout the project (Cole & Knowles, 2001). Thus, the concept of mutuality reflects the relativist ontology that underlies this methodology. As each individual construction of reality is considered valid from this perspective, the athlete whom I interviewed
is considered the expert on her life story and therefore had to be given agency in matters of disclosure and identification of topics to pursue (Cole & Knowles, 2001; Goodson & Gill, 2011).

Finally, Cole and Knowles’ third principle of empathy is, in part, a product of developing relationality and mutuality in the researcher-participant relationship. Having empathy in the relationship means having the ability to imagine what it would be like to be in the position of the participant so that sensitivity, care, and responsiveness can be demonstrated when engaging in what will likely be personally intrusive topics of discussion over the course of examining a life (Cole, 1991; Cole & Knowles, 2001). Cole and Knowles (2001) describe how an “empathetic awareness” of the participant’s experiences on the part of the researcher is particularly important when the inquiry includes sensitive topics in order to create an atmosphere of security. Given that the focus of this inquiry on the role of sport in the experience of mental health issues by an elite athlete is an extremely sensitive subject, being able to convey empathy to the participant was a significant component of our relationship.

By being aware of the significance of developing a personal and authentic relationship with my participant through fostering Cole and Knowles’ principles of relationality, mutuality, and empathy, I hoped to be able to create the conditions in the interviews in which stories could be meaningfully and safely shared. It was my responsibility to be dedicated to employing these principles throughout the study, particularly as Cole and Knowles (2001) advise that the nature of the researcher-participant relationship cannot be prescribed and strictly controlled, rather, the qualities that define it emerge from engaging with the self and other in mutually respectful ways. The principles of the researcher-participant relationship that I have described were not only important in developing trust and rapport but were also applied throughout the participant recruitment, data collection, and data analysis phases of the project.
**Participant inclusion criteria**

As mentioned, I recruited one elite athlete participant for this study. There were a number of specific inclusion criteria for this participant and a specific plan for finding and engaging the participant. The inclusion criteria were being female, being retired from elite sport participation, having had diagnosis of depression, having time to participate and being in a state of recovery at the time of participation. This last stipulation, regarding being in a state of recovery, is a reference to the state of the athlete’s mental health during the study. I had concerns about working with a participant who was currently experiencing depression symptoms because of the potential to further disrupt her fragile psychological state. Including this criterion was also an important part of the process of receiving ethical approval for the inquiry, which will be elaborated on in a subsequent section.

I recruited a female participant because I believed I would be more comfortable developing a relationship with someone of the same gender as me. Being more comfortable interacting with females made it easier to foster the qualities of the researcher-participant relationship that I have outlined above which are so integral to the life history research process. In addition, female athletes tend to experience depression symptoms at a higher rate than their male counterparts (Gulliver et al., 2015; Yang et al., 2007); therefore I would be more likely to find a female athlete who fit the inclusion criteria. Recruiting a retired athlete was an inclusion criterion because retirement from sport often represents a psychologically challenging life transition, or at least a deeply meaningful phase in an athlete’s life (Grove, Lavallee, & Gordon, 1997). Therefore, it would be of value in understanding the role of the sport context in the experience of mental health issues to be able to examine all of the phases of an athlete’s life in sport. This includes both entering and exiting the sport world. Furthermore, this study required
the athlete to reflect, in-depth, on personal and sensitive experiences in her life, a task that may cause psychological distress that could potentially impact current sport performance. In order to avoid this potential risk factor, and hopefully work with an athlete who has developed some personal distance from and perspective on her life as an athlete, I recruited a retired athlete.

The rationale for the criterion of having a clinical diagnosis of depression is principally that limited research has been conducted with athletes with clinical diagnoses. Previous researchers of female athletes with depression have recruited participants who self-identified as having experienced depression (Jones, Butryn, Furst, & Semerjian, 2013). These researchers and others (Reardon & Factor, 2010) have recommended adding a diagnostic delimitation to participant selection in order compare the experience of these athletes with those in existing studies. Finally, the inclusion criterion of having participated in elite sport was chosen because of the dearth of research in the area of elite athlete mental health (Lebrun & Collins, 2017). In response to inconsistency in the definition of elite athletes in sport psychology research, Swann and colleagues (2015) created a taxonomy for classifying this population. Based on their review of various definitions of elite athletes in the literature, these researchers distinguished between four types of elite sport participation: semi-elite, competitive elite, successful elite, and world-class elite. All four designations include the athlete competing close to the highest level in his or her sport, while they vary based on the level of success a given athlete has had at that level. For the purposes of the current inquiry, to develop an understanding of how the competitive sport context has impacted an athlete’s experience with mental health issues, the athlete should have had a period in her life when sport was a significant priority and part of her day-to-day lifestyle. The commitment and dedication that it requires to reach the highest level of competition in a
given sport will make it likely that sport was a priority for the athlete at points throughout her life.

Although my knowledge of the context of high performance track and field outweighs that of other sports, I did not restrict the inclusion criteria for this study to my own sport. I believed that participation in any type of sport at the level that I am looking at would be appropriate for accomplishing the aims of this project and that my experiences in the world of competitive track and field and the common ground that it would provide for building my relationship with the participant would generalize to other sports. It was ideal for the participant to be located in or close to Toronto so that we were able to meet in-person for the interviews. Being able to meet in-person provided us with the best opportunity to develop an authentic and personal relationship.

**Recruitment strategy**

Life history researchers recommend recruiting someone who is already known to us (Cole & Knowles, 2001), which is a strategy that has proved to be effective in life history research in sport psychology (Papathomas & Lavallee, 2006). Cole & Knowles (2001) also suggest that recruiting participants through a mutual acquaintance who understands the research inquiry can be a fruitful strategy. As I did not personally know someone who matched my inclusion criteria, I employed the latter strategy. I have known Carl Georgevski, the head track and field coach at the University of Toronto, for many years and asked him to assist me with recruiting an appropriate participant. I explained, to Carl, the study and my inclusion criteria and provided him with the information letter for potential participants that I created and a handout designed to inform coaches about the study (see Appendix A for information and consent form, see Appendix E for coach handout). Carl has spent 39 years coaching with the University of
Toronto Track Club and, based on his knowledge of retired athletes who have gone through his program, I asked him to make a recommendation for an athlete who he thought would be an appropriate and interested candidate. Once Carl identified an athlete, I asked him to reach out to the athlete and provide her with the information letter so that she could contact me if interested (see Appendix D for email template). If she decided not to participate at this point, I would go back to Carl and ask him for a second recommendation. This strategy, of only recruiting one person at a time until someone agreed to participate, was designed to avoid the potential of having a number of athletes express interest in participating in the study and having to choose one and reject the others.

The individual who ended up participating in this inquiry was approached after two women who fit the participant inclusion criteria replied that they were not interested. These first two women expressed to Carl that they did not feel comfortable or have a desire to reflect on what had been very challenging experiences for them. At this stage, I recruited the help of a second coach to reach out to a former athlete whom she felt may be interested in participating and who fit the inclusion criteria. This coach identified Bryn, the retired athlete who agreed to participate in this project. Bryn was eager to participate when her former coach told her about the project and she contacted me over email to schedule an initial meeting. In addition, Bryn and I had a prior relationship. When I asked Bryn about her motivations behind agreeing to participate, she expressed that because she was “feeling good now” she was not worried about discussing her experiences. Bryn also said that because we had a prior relationship, she felt comfortable speaking with me and wanted to help with the project. This comfort that Bryn expressed reiterates Cole and Knowles’ (2001) recommendation that life history researchers recruit someone who is already known to them in the hopes that there is already a foundation for
comfort and trust. Bryn also suggested that she was motivated by the potential for the project to help other athletes who may be experiencing something similar to what she experienced after retiring from sport.

In our initial meeting to discuss the project, Bryn told me that her clinical diagnosis was an adjustment disorder with mixed moods, depression and anxiety. In addition, Bryn was given this diagnosis from a medical doctor who did not specialize in mental healthcare. I was initially concerned that Bryn’s diagnosis did not align closely enough with the inclusion criterion of a clinical diagnosis of depression originally included in the study rationale, however upon consulting with a sport psychiatrist, he informed me that an adjustment disorder with mixed moods anxiety and depression could be considered as falling under the umbrella of depression generally. Although Bryn’s diagnosis did not precisely fit the study inclusion criteria, her perspective of her mental health issues was that she experienced, at times, debilitating symptoms of depression and anxiety and considered her diagnosis appropriate and valid. Prioritizing the participant’s perspective is critical within a life history methodology. It was clear from our early discussions that Bryn’s experience had significant potential to shed light on the purpose of the project to examine the role of sport in an athlete’s experience with mental health issues. Finally, by the time I learned of Bryn’s specific diagnosis, she had already expressed interest in participating in the study, and ethically, it would not have been appropriate to reject her at this point.

The Participant: Bryn

Bryn is the young woman who agreed to participate in the current inquiry and whose experiences with sport participation and mental health issues are examined. All of the names
used throughout this thesis are pseudonyms. In addition, small details have been altered to protect Bryn’s identity and other individuals involved in her story.

Bryn was a former elite and university athlete in her mid-twenties who competed in a time-based sport. References to her particular sport and competitive events have been removed or altered from this document to protect Bryn’s identity. In terms of the specific definition of Bryn’s elite sport participation, based on Swann and colleagues’ (2015) classification system, she can be considered semi-elite. Semi-elite means that Bryn competed below the top standard possible in her sport, which is the Olympics, however she did represent her country internationally during her sport career. Bryn’s sport career can be described as both elite and university because the bulk of her sport career occurred within the context of university sport. That being said, the focus of Bryn’s training and competition schedules was on trying to qualify for national and international competition opportunities.

Bryn began participating in her principal sport when she was eight years old and she retired at the end of her final university season. Bryn had been retired from her sport for 20 months when her participation in this study began, and she had received a diagnosis of an adjustment disorder with mixed moods anxiety and depression 10 months after retiring and graduating from university. Bryn’s self-driven interest in the project, her elite sport history, her current state of recovery from the mental health issues she had experienced, and her proximity and commitment to dedicate her time to multiple interviews, made her an excellent candidate for this particular project.

**Data collection**

The principal method of data collection used for this inquiry was life history interviews (Cole & Knowles, 2001), the style of which was informed by the philosophy informing the life
history methodology outlined above. Bryn shared her experiences with me over the course of four months in seven interviews that yielded nine hours of audio recording. From here onward the interviews will be referred to as conversations, as I believe this term more authentically describes the nature of my meetings with Bryn. Each conversation was between 60 and 105 minutes in length and took place at Bryn’s apartment, with the exception of our initial meeting to discuss Bryn’s participation, which took place at a coffee shop and was not recorded. Our first three conversations encompassed Bryn’s sport experiences, from the beginning of her participation to her transition to university and finally her retirement. Topics that were covered over the course of these initial meetings included training and competition experiences, various relationships within and outside of the sport context, stories related to Bryn’s university experiences both related and unrelated to sport, Bryn’s sport retirement and school graduation transitions, and Bryn’s mental health and well-being before and after retirement. The final four conversations were structured around reading the transcripts of the previous conversations together and elaborating on and clarifying specific experiences and components of Bryn’s stories that I introduced based on my reflective notes or that Bryn noticed while she was reading.

Initial meeting. As mentioned, data collection was initiated by an introductory meeting during which the focus was on getting to know each other and work out the details of how the research process would unfold. This informal, pre-interview meeting represented an opportunity to start developing relationality, mutuality, and empathy within my relationship with Bryn by sharing my background with and interest in sport and mental health and the purpose of the study. In the spirit of mutuality, this meeting included a discussion of informed consent, ethical issues surrounding confidentiality and possible risks and benefits of participating in the study, the extent of the commitment from both of us that would be necessary to complete the project, and
the general topics that I hoped to cover during the interviews. Bryn was invited to review these topics and suggest any changes or additional areas that she considered important to explore (Cole, 1991). The goal of this initial collaborative process was to help Bryn recognize our shared role in the decision-making processes during the interviews and to ensure that I did not have sole control during the interviews (Cole & Knowles, 2001). At the conclusion of this meeting, I collected written consent from Bryn and we agreed upon a date for the first interview (see Appendix A for the information letter and consent form). The ethics protocol created for the Research Ethics Board at the University of Toronto is included in Appendix F. I also checked in with Bryn about her comfort level with continuing participation at the outset of each interview.

**Life history interviews.** The bulk of the data for this study was generated using semi-structured, conversational style interviews. Catani (1981) describes the series of interviews that culminate in a life-history account as:

…a symbolic ritualized exchange that transcends issues of authenticity or historical accuracy, an encounter between two persons who like one another, who develop a mutual confidence, and each of whom manages to integrate the other’s affective presence into his daily life (p. 212).

This quotation captures the essence of what I hoped to accomplish with Bryn. Learning about Bryn’s life history in such a manner required a particular style of interviewing. The conversational interview style, which involves a few broad, open-ended, and flexible questions or topics of interest, is appropriate within a life history methodology (Cole & Knowles, 2001; Jones, Torres, & Arminio, 2014). Fontana and Frey (2000) emphasize the importance of flexibility within qualitative interviewing in order to reduce the limitations of imposing a priori categorizations to the field of inquiry. The idea is that flexibility allows previously unconsidered
phenomena to be revealed, a notion of particular relevance when the nature of the inquiry is exploratory, which was the case in this study. I engaged in an “interactive” style of interviewing (Ellis, Kiesinger, Tillmann-Healey, 1997) which emphasizes the engagement of the researcher and participant in joint sense-making of the stories that unfold during the conversation and which reflects the mutuality principle inherent to life history research. In terms of my role during the interviews, I posed a few open-ended questions to initiate the conversations. As the conversations unfolded, my role became more passive, allowing Bryn to roam among her recollections and reflections and asking clarifying questions and providing prompts when necessary (Cole & Knowles, 2001).

Cole and Knowles (2001) suggest that interviews should take place in a location with minimal interruptions and distractions. The location should also be emotionally and physically comfortable for the participant. For this reason, Bryn and I met at her apartment for all of our conversations. Finally, it is important in qualitative interviewing to embody the role of a good listener which involves being responsive to what the participant is saying but also to subtle cues that may hold meaning such as gestures, facial expressions, and pauses (Cole, 1991). Therefore, it is encouraged to record interviews and make reflexive and interpretive notes afterward, practices that I engaged in.

The principle aim of the study, to generate knowledge regarding the role of the sport context in athletes’ experiences with mental health issues, informed the nature of the topics that Bryn and I discussed (see Appendix B for list of discussion topics). I wanted to ease gradually into any discussion about mental health issues so that I could build rapport with Bryn in the context of the research project before introducing the sensitive topic. Therefore, I began by asking Bryn to simply describe her sport experiences, starting from as early a time as she could
remember. Bryn and I progressed through her sport career during the initial couple of meetings and then moved on to discuss academic experiences throughout high school and university, the various relationships she has developed within and outside of the context of sport, her transition out of sport and graduation from university, her experience with mental health issues, and her current life. These general topic areas arose naturally during our conversations. I purposefully limited imposing structure on what Bryn and I would discuss in each meeting because I wanted her to have the freedom to introduce topics and experiences inherent in her perspective of her story. This approach was taken to, as Fontana and Frey (2000) recommend, reduce the limitations of imposing a priori categorizations in qualitative interviewing. In life history interviewing the co-construction of knowledge should be emphasized, thus it was necessary to take purposeful measures to make room for Bryn’s perspective on the direction the conversations took (Cole & Knowles, 2001; Smith & Sparkes, 2009b).

I did, however, use probes to encourage Bryn to elaborate on certain areas that I was interested in, which I introduced after our first couple of conversations. These included asking Bryn to create a list of all of the meaningful relationships in her life and then describe each to me, reading transcripts of the conversations together, and discussing media articles about Bryn’s sport career that I found online. Describing her list of meaningful relationships was valuable for developing a greater understanding of Bryn’s social experiences and how they developed over the course of her sport career, retirement, and struggle with mental health issues. This strategy helped prompt more storytelling about specific challenges and life experiences. In regards to reading the conversation transcripts together, this “cyclical feeding back of interpretation” (Cole & Knowles, 2001, p. 191), while acknowledging the expertise of the participant in her life story, also enabled more thorough consideration of initial statements and reactions to the topics we
discussed (Cole, 1991). I initially asked Bryn to read these documents between our meetings so that we could discuss any further thoughts or initial interpretations during our subsequent meetings. However, Bryn expressed that she would feel more comfortable if she could read the transcripts in my presence so that she would have someone there to talk to if anything we had discussed caused her distress; thus, our final three conversations were structured around reading the transcripts together. Not only did this design make Bryn feel more comfortable, it also ended up being a valuable exercise to initiate the analysis and meaning-making processes of Bryn’s story together. Bryn would frequently stop reading to elaborate or reflect in greater depth on things each of us had said, and in turn I was able to take opportunities to ask clarifying questions or verbalize some of my initial interpretations that had developed while I was transcribing. The inclusion of a single participant in this study afforded me the opportunity and time to have as many conversations with Bryn as I deemed necessary as the project unfolded. This design also made it possible to engage Bryn in the initial stages of data analysis in a manner that is highly consistent with the philosophy of life history research.

A third tool used during the conversations was the gathering of media documents about Bryn’s sport career that I found online and brought to our final conversation in an attempt to trigger memories or experiences that Bryn had not already shared. It is through the examination of documents such as these that life stories are situated within the broader social and cultural context of the individual’s life and are transformed into life “histories” (Cole, 1991; Denzin, 1989). Media pieces can illuminate the cultural context in which a life is lived because they produce and reproduce culturally-shared understandings of the world (Lyons, 2000). These documents are not directly addressed in the study results; rather they served as tools that contributed to my overall understanding and interpretation of Bryn’s story.
**Reflexive journal.** Over the course of the interview process, I made regular entries in a reflexive journal in which I documented my thoughts regarding how each conversation unfolded and initial interpretations of the conversations. Using this reflexivity tool enabled me to develop an awareness of how my relationship with Bryn was developing over the course of the inquiry and thus how I could behave differently or remain consistent in subsequent conversations. This tool also allowed me to reflect on the conversations that unfolded so that I could share my initial interpretations with Bryn in subsequent conversations. By being aware of my and Bryn’s early interpretations of the stories that were shared, I was able to reflect critically on my position within the unfolding inquiry and the influence that my existing knowledge of elite sport and mental health may or may not be having on the research process. I completed an entry in the journal after each conversation and after re-listening to and transcribing each conversation. I also made an entry at any point during the data collection and analysis portions of the project when I had ideas related to the inquiry.

**Data analysis**

**Narrative inquiry.** Given that the approach to data collection taken in this inquiry was informed by a life history methodology with the aim to elicit life stories (Cole & Knowles, 2001), narrative inquiry was an appropriate lens through which to analyze Bryn’s experiences. As Reissman (2008) describes, narrative inquiry is a family of methods that centers on the analysis of the stories people tell.

Smith and Sparkes (2009a), drawing on the work of Coffey and Atkinson (1996), recommend that researchers have a conceptual understanding of narrative analysis so that they may make informed choices about when, why, and how to use this approach. In narrative inquiry, stories are considered specific accounts that people tell, whereas narratives are storylines
that exist within society which influence how individuals structure and understand their own or others’ stories (Smith, 2015). By advocating the perspective that people are shaped by the narratives that exist in culture and that people shape their own reality as storytelling actors, the philosophy behind narrative inquiry emphasizes interplay between agency and structure when trying to understand people’s behaviours and perspectives (Smith, 2016). Therefore, narrative inquiry is most appropriately rooted in ontological relativism and epistemological constructivism (Smith, 2015), which aligns with the data analysis and presentation style of the findings of this document, and which is consistent with the life history methodology that informed the design of the study. Similar to the spirit of life history research, a constructivist approach to narrative inquiry echoes interpretive principles of viewing individuals as meaning-makers who derive understandings of their experiences through individually crafted stories that are culturally and relationally constructed (Esin, Fathi, & Squire, 2013; Sparkes & Smith, 2008). Stories are constructed in the broader context in which individuals are situated because stories are considered to be informed by the “menu of narrative resources that culture and social relations make available”, which help people interpret and communicate life experiences (Smith, 2015; p. 205). While context is taken into consideration, this approach also emphasizes the role of individuals as active creators of their life stories (Smith, 2015). Narrative inquiry also considers the usefulness of narratives in how humans use them to “interpret, direct, and communicate life” as well as to develop and portray their sense of self (Smith, 2015, p. 6). Therefore, keeping the significant influence of social and cultural context in mind when analyzing Bryn’s story while also viewing Bryn as an expert on her life story are inherent to both the life history methodology which informed the design of and data collection for this inquiry. These considerations are also central to the type of narrative analysis that was used to examine and interpret the life stories that
Bryn shared with me. In addition, most types of analysis within narrative inquiry necessitate recognition that the stories told in the research context are not truths that the interviewer has mined directly from the interviewee’s consciousness; rather, the stories and meanings are jointly produced. As much as the influence of society and culture is highlighted in narrative inquiry, so too is the influence of the researcher on how stories are expressed, what is and is not said (Smith & Sparkes, 2009b). Once again, this attention to the co-construction of knowledge between researcher and participant is consistent with the study’s life history methodology.

Narrative inquiry also acknowledges the understanding that stories can change over time (Smith, 2015). This idea is pertinent to the findings of this study, as there were many instances where Bryn’s perspective on her experiences changed as a result of the storytelling process throughout the course of our conversations. Narrative inquiry emphasizes that although a given research study ultimately reaches a conclusion, the individuals’ lives which are examined, their stories, and experiences continue on as the person remains living (Frank, 2010; Riessman, 2008). Therefore, while conclusions may be made about the snapshot of Bryn’s life to which I had access, inherent in the analysis process is the recognition that our final conversation and the findings described in this document do not represent the end of Bryn’s story.

In terms of some of the benefits of adopting this analytic approach in the current inquiry, it is an excellent method for addressing the particular research questions that this study sought to examine. The primary purpose of this thesis was to examine the potential role of elite sport participation in an athlete’s experience of mental health issues. Thus, the characteristics of the elite sport context which positively or negatively influenced Bryn’s experience with an adjustment disorder became the focus of analysis. In this sense, in the process of analyzing Bryn’s life stories, it was necessary to pay attention to both social and cultural context as well as
Bryn’s personal and highly individual experience. Fittingly, “narrative inquiry allows researchers to move beyond an individualistic focus to a more complex exploration of people as both social and individual beings” (Smith & Sparkes, 2009b, p. 6). As I was endeavouring to explore Bryn’s entire sport history, from her earliest participation through her experience with elite sport and retirement, in addition to her mental health history, an analytic approach that could address Bryn’s developing perspective over the course of an extended time period was necessary. In their discussion of the use of narrative inquiry in sport and exercise psychology, Smith and Sparkes (2009b) point out that studying narratives can provide much information about how individual and group experiences, including emotions, sense of health, and motivations, change through time.

**Dialogical narrative analysis.** Narrative researchers consider narrative analysis an umbrella term for a number of specific methods that can be used to analyze stories, all of which are informed by the approach of narrative inquiry, and all of which attempt to describe and interpret people’s perceptions of reality, their identity and behaviours in a social world (Griffin & Phoenix, 2016; Riessman 2008; Smith, 2015; Smith, 2016). The early stages of each narrative analysis method are very similar, with the later stages differing in the emphasis the researcher places on particular questions about the content of the stories being examined and how and why particular stories were told. I chose to engage in a dialogical narrative analysis for the current inquiry because this method allowed me to consider the details of what Bryn’s story contained, how she told the story, and what happened to Bryn’s perspective and understanding of her experiences as a result of telling the story (Smith, 2016).

A dialogical narrative analysis (DNA) combines aspects of thematic and performance analyses (see Smith, 2015), in addition to asking what stories do for people and how well people
are served by their stories. Along these lines, Frank (2010) describes DNA as “the mirroring between what is told in the story – the story’s content – and what happens as a result of telling that story – its effects” (p. 71-72). This method is dialogical in that it directly addresses how stories and narratives are interactively produced and performed, and the researcher is present in the production and presentation of the study findings (Reissman, 2008). Reissman (2008) describes this approach as pushing the boundaries of what is and is not included in narrative analysis, in part because of how strongly it emphasizes the role of the listener and reader in the process of storytelling, and she notes how critical it is to include these parties in the meaning-making process. In this sense, the researcher is encouraged to identify hidden discourses and locate gaps within individuals’ stories of which they may not be aware (Reissman, 2008). For example, an individual may share a story that he or she feels is simple or benign, yet from the researcher’s perspective may include an undercurrent of structural inequality or other cultural influence. Thus, as evidenced by the results and interpretation below, this method gave me room to acknowledge the influence of various storylines that Bryn drew on from the elite sport context to inform her sense of self. This method also allowed for an examination of the way in which Bryn’s storytelling process shaped her understanding of her life experiences.

In terms of the specific process that I took to perform a dialogical narrative analysis, I drew primarily on the work of Smith (2015; 2016) to inform the stages of analysis. Narrative researchers note that structured rules and steps for analyzing stories can be too restrictive; rather, it is more appropriate to think of narrative analysis as a heuristic guide to interpretation, one that “encourages movement of thought” (Frank, 2010, p. 73). That being said, Smith (2015) encourages beginning with guidelines to establish systematic and rigorous analysis, and he summarizes a number of strategies to do so when working with data pertaining to psychological
phenomena and experiences. Based on these guidelines, as well as the iterative and cyclical approach to data analysis encouraged within a life history methodology (Cole, 1991), the first stage of analysis involved listening to and transcribing each conversation shortly after it occurred. Similar to the experience of Papathomas and Lavallee in their life history work (2006), this early submersion in the data allowed for initial interpretations to be recorded and then discussed and clarified with Bryn in our subsequent meetings. During the transcribing I added to notes made in a reflexive journal immediately after each conversation, and I specifically made note of topics I hoped to build on in the next conversation. Transcribing the conversations as soon as possible also meant that I was able to bring copies of the transcriptions to my subsequent meetings with Bryn, which contributed to our collaboration in the initial data analysis stage. The second stage of the dialogical narrative analysis involved considerable time “indwelling” with the data (Smith, 2015, p.216); reading the transcripts multiple times and making notes of initial thoughts in the margins. At this stage the goal was to gain an understanding of Bryn’s point of view, to get a feel for both the detailed content of the stories Bryn shared and how her story developed as a whole across all of our conversations. Furthermore, I focused more closely on the content of potential themes that described Bryn’s experiences, whereas consideration of the larger-scale narrative principles took place in later stages. While re-reading the transcripts I resisted focusing only on issues pertaining to mental health in order to examine Bryn’s experience as a whole. When conducting this initial coding, Smith (2015) urges researchers to keep the stories under examination intact and to create summarizing notes about multiple lines of text rather than engaging in the typical, line by line coding often used on qualitative data.

After familiarizing myself with the content of Bryn’s stories, the focus of my analysis shifted to the structure of Bryn’s shared experiences, and at this point I identified themes that I
believed would inform our understanding of the relationship between Bryn’s sport participation and her experiences with mental health issues. To assist with conceptualization of the themes and storylines in this phase of analysis, I created a graph to depict the change in Bryn’s story across time in relation to her perception of her psychological well-being. Creating this simple visual representation of Bryn’s story prompted me to view the story as divisible into three distinct phases which became Act 1, Act 2, and Act 3.

After creating this general structure, I began writing the results of the research. In narrative research, continuous writing throughout data collection and analysis is encouraged as it prompts the progressive discovery of ideas and contributes to the iterative process of analysis inherent in this approach (Richardson, 2000; Sparkes and Smith, 2014). Therefore, I began writing the study report using the thematic structure developed in the early stages of analysis described above, and continued the analysis process by layering in multiple levels of interpretation. When considering the structure of a story, Smith (2015) encourages researchers to notice participants’ reflections on specific experiences in their lives, evaluative comments, changes in tone, motivations and objectives of different characters, challenges and conflicts faced, emotions (both expressed and underlying), and attitudes toward others and circumstances. Therefore, the first level of interpretation was developed by paying attention to these components of Bryn’s stories.

Subsequent interpretation involved considering a number of dialogical questions which Smith (2015) describes as prompts to shed light on initially unnoticed components of stories. The types of questions that were most relevant to my understanding of Bryn’s story were resource, identity, and function questions. Resource questions involve asking what narrative resources the storyteller has access to and uses to shape how his or her story is told. In this sense, I considered
the narrative resources within the elite sport context that Bryn drew upon to make sense of her experiences, as well as alternative narrative resources that were not available to her. Identity questions ask how stories impact an individual’s sense of self. A theme of Bryn’s story that I identified early on was how her sense of self developed and drastically changed over the course of her sport career and life since retirement. Therefore, asking identity questions in the analysis process allowed me to examine this theme in detail. Finally, function questions involve considering what each story does “for and on” an individual (Smith, 2015, p.219). In other words, these questions ask how a particular story might be useful or positive for someone’s life versus how it might have negative or dangerous implications for the individual. Function questions thus consider how a story impacts people’s behaviours. These types of questions were particularly useful for gaining an understanding of how the stories that guided Bryn’s self-understanding within the sport context and after retirement played a role in her experience with mental health issues. Addressing all of these types of questions required drawing information from the conversation transcripts as well as from my reflexive journal to include Bryn’s and my personal reflections on the topics discussed. Asking these questions of the data represents an analysis of the “hows” of Bryn’s stories, which is a critical component of a DNA. These questions allowed me to layer on another level of interpretation which included more of my personal reactions to and ideas about Bryn’s experiences. At this stage, I also began drawing on existing literature to inform my interpretations, which are woven into the research findings. Inclusion of multiple excerpts from the conversation transcripts in the write-up also illustrate the themes of Bryn’s story and help communicate her personal perspective.
Methodological Rigour

There are a number of considerations in the design of this study that contribute to its rigour and methodological strength. To begin with, the emphasis placed on developing a research-participant relationship founded on relationality, mutuality, and empathy within the life history methodology helped ensure that the knowledge produced between the two individuals was authentic and reflective of the participant’s point of view (Cole & Knowles, 2001). Additionally, the belief inherent to life history research and narrative inquiry that the participant is an expert when it comes to her stories and experiences, and the researcher’s commitment to this perspective, contributed to maintaining a balance between participant meaning and researcher interpretation (Cole & Knowles, 2001; Smith, 2015; Williams & Morrow, 2009). Achieving this balance involved interplay of reflexive strategies and careful attention to the manner in which Bryn’s stories were portrayed. Early in the production of the current inquiry I engaged in the self-awareness activity of writing a personal history account to acknowledge my experience with the research topic and my motivations behind engaging with it. Consistent entries in a reflexive journal and consultation with my graduate supervisor, committee members, and related experts also allowed me to gain perspective on my personal ideas about and interpretations of the data. In terms of highlighting Bryn’s perspective, I included extensive quotations throughout the report to give life to her voice and provide evidence for the interpretations I made. In addition, Lincoln and Guba (1985) recommend member checking to honour participants’ points of view, which involves asking participants for feedback on initial interpretations and ideas generated by preliminary analyses. The commitment in life history research to facilitating the co-construction of knowledge between research and participant meant
that member checking, in the form of reviewing interview transcripts with Bryn, was an integral part of the early stages of analysis in this inquiry (Cole & Knowles, 2001).

As mentioned, consultations with my graduate supervisor and committee members were extremely important for ensuring that my personal agenda and research interests were not the sole drivers behind the design, implementation, and conclusions of this inquiry. These individuals represented critical friends who offered alternative interpretations and meaningful contributions to the understanding of Bryn’s experiences.

There are also important strengths inherent in the single-subject design, life history methodology, and use of narrative inquiry in the data analysis phase of the study which are outlined in the detailed descriptions of the philosophical underpinnings and study procedures above and are summarized as follows. Including a sole participant in this type of inquiry was the responsible way to do justice to the complexity of an individual’s life and experiences within the time constraints of this master’s degree. This design gave Bryn and me the flexibility to engage in multiple, in-depth conversations which was necessary to gain a holistic understanding of the multiple personal, social and cultural dimensions which shaped her experiences with sport participation and mental health. Furthermore, the ontological and epistemological foundations of life history research and narrative inquiry are consistent with the interpretivist paradigm from which I approached my research questions. Coherence between research paradigm, methodology, methods, and the presentation of interpretations is critical in ensuring rigorous and high quality qualitative research (Chamberlain, 2000). Finally, the detailed and transparent description of my process for organizing and analyzing the conversations I had with Bryn indicates the informed and specific approach that was taken to develop the interpretations, implications, and conclusions of this work.
Ethical Considerations

There are a number of significant ethical issues to consider when engaging in a research project that involves the formation of a personal relationship between the researcher and participant and the sharing of sensitive information that may result in both parties feeling psychologically vulnerable. Working in such depth with one participant in order to develop an understanding of her experiences with sport and mental health issues undoubtedly represented a challenging, though hopefully mutually beneficial, endeavour. The first step to ensuring that Bryn would feel safe throughout the entire inquiry was to establish open and honest communication. From the beginning of our relationship, I was clear about the aim of the study and the role that Bryn would have as a co-collaborator throughout the process. Our research-relationship began with a discussion of the ethical issues involved in a study of this nature, including the absolute confidentiality of Bryn’s identity which would only be shared between me and my graduate supervisor, Gretchen Kerr. I informed Bryn that publication of parts of the research project was a possibility for the future and that any identifying information would be carefully omitted if that was Bryn’s preference, which it was. That being said, I made Bryn aware that achieving complete anonymity throughout the research report would be unlikely if it was read by individuals who are familiar with her and her experiences. I explained that although specifically identifying details would be omitted or changed, the in-depth manner in which her life is presented would likely make it possible for Bryn to be identified by family and friends. Bryn expressed to me that she was comfortable with this risk, already having shared the details of her experiences within her close relationships.

The process of securing ethical approval from the Research Ethics Board (REB) at the University of Toronto for this inquiry was lengthy and involved a number of steps. As a
preparatory measure, my supervisor and I met with the research ethics manager of the Health Sciences REB, to discuss the ethical processes and safety measures that would allow the study to be approved. We were provided with numerous suggestions, namely that the proposed participant be in a state of recovery from mental health issues during the inquiry and that I, as the principal investigator and interviewer, undergo specific training to be able to assist the participant if she were to experience a psychological crisis. Therefore, before the inquiry began I participated in three workshops at the Centre for Addictions and Mental Health (CAMH) in Toronto designed to teach individuals how to create a safety wellness plan to manage negative psychological triggers and reactions. At our initial meeting, I explained the benefit of such a plan to Bryn if she was concerned about her reactions to some of the planned interview discussion topics, however she expressed that she was confident in her current mental well-being and did not feel that having a safety wellness plan in place was a necessary precaution. I also provided Bryn with a collection of resources (see appendix C for a list of resources) at our initial meeting that she could access in the case that she became psychologically distressed or desired counselling or medical services during or after participating in the project. Additional details of the ethical procedures involved in this inquiry can be found in the approved ethics review application form found in Appendix F.

Within a research project of this nature, there is the potential for much power to be held by the researcher in terms of how the participant’s life is represented in the write-up of the study. Douglas and Carless (2015) suggest that the result of not developing a deep familiarity with a life that is being studied is abstractions and theorizations on the part of the researcher that do not actually capture the experience of the subject. Atkinson (2007) in turn advises that letting participants’ voices be heard, letting them speak for and about themselves, can reduce this risk.
Therefore, I had a dual responsibility as the researcher in this study. It was my responsibility to both carry out my role as an interpreter with knowledge of the psychological and cultural influences that may have affected Bryn’s life and to collaborate with Bryn in the development of a holistic and fair representation of the meaning of her experiences. An additional important ethical consideration within a researcher-participant relationship of this nature is exiting the relationship once the research project is completed. Although I was already acquaintances with Bryn, my hope was that we would develop a friendship that would persist upon completion of the study. I was purposeful in keeping Bryn informed of the timeline of the project in terms of how many conversations I thought remained to prepare her for the conclusion of our meetings. At our final formal meeting, I made it clear that we could stay in touch and continue to discuss any reflections or questions that Bryn may have about our conversations related to the study. In addition, part way through writing the study report I asked Bryn if she would be interested in meeting to read the report together once it was completed and she was enthusiastic about the prospect.
CHAPTER 4
Results and Interpretations

As the focus of this inquiry was to use a life history-style approach to explore, in an in-depth manner, Bryn’s experience with sport and mental health issues, the phases of her life as an elite athlete and since retirement were the focus of our conversations and thus the focus of the stories that were analyzed and presented here. There are three relatively distinct phases that, together, represent the plotline of Bryn’s experiences with sport and mental health issues. These phases have been labeled as Acts 1, 2, and 3 to provide a sense of Bryn’s experiences as a developing story, with different themes, characters, and plotlines coming to the forefront in each Act. Each phase of Bryn’s story plays a meaningful role in her experience with mental health issues and corresponds roughly to the following periods in her life: the years in which she was a high performance athlete and university student (Act 1), her transition out of sport and experience with mental health issues (Act 2), and finally her ongoing process of recovery and redefining herself (Act 3). These Acts will also serve as a means to organize Bryn’s experiences and demonstrate how her sense of self evolves across the acts, and how the storying process has shaped her self-understanding.

Act 1. The Build-Up: How Sport Can Be a Coping Resource

*I had set the goal of going a certain time at nationals because I knew that was what it would take to win. The race ended and I had done it. I literally remember after that I was sitting in class the next week and I watched [a video of the] competition and I got goosebumps. I had literally told myself, ‘be brave now, just go hard’…and then I won and I was like holy shit. It was a big deal and people were like ‘oh my gosh!’ and I was*
like ‘holy shit, I said I was going to do it and then I actually did it’. That feeling was oh my gosh so good…it just became so fun…It was just so fun, I don’t know, it was so good, I had so much fun. Everything was fun, I loved every minute of it.

This first phase of Bryn’s experience with sport and mental health issues encompasses the time she spent as an elite athlete from the beginning of university to her graduation and retirement from sport five years later. Bryn began her primary sport at the age of eight when her mom signed her up for lessons. Each year, Bryn dedicated more and more of her time and energy into training and competing until she had reached a level of engagement such that sport was a significant factor in her choice of university. Beginning in high school and throughout her years as a university athlete, Bryn achieved considerable success, in both athletic and academic arenas. Act 1, for the most part, is characterized by positivity, recognition, validation, success, and enjoyment, all of which contributed to Bryn’s development of confidence and comfort in this environment and a strong athletic identity. For these reasons, when threats to her psychological well-being did arise, Bryn was able to draw on her sport as a significant coping resource. During this time, sport provided Bryn with a confident sense of self, social support and easily accessible resource networks, and the drive to maintain both her physical and mental health to be able to perform. While these benefits contributed to five years of considerable happiness and satisfaction in her life, a parallel consequence was the development of a state of relative vulnerability to psychological challenges upon later and simultaneous retirement from sport and graduation from university. With this in mind, the focus of Act 1 is on understanding how and why elite and university sport participation played a positive role in Bryn’s life while she was in this context.
Positive and Protective Characteristics of Elite Sport Participation

Bryn had an overwhelmingly positive experience during her time as an elite athlete. She seemed to avoid many of the obstacles and challenges that many athletes face over the course of their careers, such as serious injury, illness, performance slumps, or difficult relationships with coaches and teammates (Hammond, Gialloreto, Kubas, & Davis, 2013; Jacobsson et al., 2013; Mellalieu, Shearer, & Shearer, 2013). As we can see from the quotation which opens this Act and from additional examples, when Bryn spoke about this time period her speech was positive, energetic and enthusiastic: “I was around all my friends, and we loved each other and it was so fun…it was such a good time, it was so great.” Bryn exuded confidence, self-assurance, and pride:

I would sometimes be faster than the boys, I would be going as fast or faster than them at practice [talking about high school]. Then at university it was exciting to train with girls who were faster than me. I wasn’t the slowest but I wasn’t the fastest, and I liked that because that’s how I got fast. I picked one person, beat them, picked another and beat them, so I was like oh this is so great.

It was just so fun, I don’t know, it was so good, I had so much fun. Everything was fun, I loved every minute of it.

Whether some temporal and contextual distance from this time period has impacted her perspective on her sport career or she felt just as positively about her experience as an elite athlete at the time is less relevant than the values that she attributes to it from her current perspective. To try to understand the relationship between her sport experience and her mental health, the significant role that sport undoubtedly played in shaping Bryn’s sense of self must be
examined in order to fully grasp why facing threats to her psychological well-being after retiring from sport impacted her mental health so greatly.

**Development of robust and confident sense of self.** Sport participation, and specifically achieving great success in her sport, provided Bryn with confidence and a positive sense of self which appeared to translate to other parts of her life. The generalizability of her sport-derived confidence is demonstrated by Bryn’s ability to draw on it as a coping resource when facing challenges both within and outside of sport. Bryn evidently began developing confidence within the sport context in high school. Starting university with the built-in confidence that her sport successes and community had given her eased the transition from high school to university-level academics, which is widely considered to be a stressful adjustment for young adults (Sears, 2004):

> Right away in my first year, on my first ever exam, I got 95, and I was like I can do this, I so can do this. I mean I had to study way more than I ever had, I didn’t do anything in high school…but then I didn’t like one of my other courses and I remember I sat in my dorm room and cried and was like ‘university isn’t for me, I don’t really like studying’. I wasn’t used to having to do so much work because I found high school so easy…then I got used to how much time I would have to put in. I would get to a test and always be prepared once I got there, whether it was me convincing myself that I was prepared or I was actually prepared, I didn’t know. Maybe it was a bit of both, but I always knew I could do it.

The confidence with which Bryn discussed this adjustment stands in stark contrast with her difficulties coping with the uncertainty of finding a worthwhile career after she has retired from elite and university sport in Act 2.
As mentioned, the majority of Bryn’s sport experience was positive and she continuously improved and performed well over the course of her five year university athlete career. Bryn clearly internalized many memories of success and achievement based on how readily she accessed stories of this nature when she was telling me about her sport experiences. While the sport context can create opportunities for failure when internal and external performance expectations are not met, Bryn’s stories provide considerable evidence for the opposite being true as well, that sport can provide opportunities for tangible and undeniable success when the aforementioned expectations are met and/or exceeded. For Bryn, the successes she had as an athlete and the recognition and fame within her community that those successes garnered were framed by her as surprising, unanticipated, yet a significant part of what made her experience so fulfilling:

…I would just go in there and see what happened, and then people would be like ‘holy smokes’! But I wasn’t really thinking about the response. Even in my first two years of university I wasn’t thinking about it either, I didn’t even realize I was doing something impressive, but then people were like ‘oh man, that’s really good’. And after my second year at provincials, I got to nationals and all these people that I knew from [the sport] were like ‘good job, you did so well.’ And ya, I was happy about it but I didn’t realize that people thought it was a big deal.

…I felt so, so good, I had the provincials of my life, I was undefeated. I won this prize, that prize, athlete of the year, all this stuff that I didn’t know was a big deal.
…My coach said that we’ve got some people that could be national champions here, and he said me. And I was like what the fuck, why did he say me? But then I don’t know, I just took it and ran with it.

So I get my medal and whatever, I’m thrilled, to me it was a big deal but I didn’t realize how big other people thought it was. I wasn’t thinking okay this could get you a big award at school. I didn’t know all that comes with that kind of stuff and the attention you get. I came back to school and people wanted to do interviews and pictures and stuff and I didn’t know that was a thing. So so fun, it was so fun and I was so happy.

Bryn described many instances when being praised by her coaches in front of the team or in interviews, or being recognized with awards and honours from her school made her feel exceptional. She evidently thrived under the glowing admiration of her coaches and sport administrators and valued the recognition her successes drew in the university community:

After the first couple of meets my coach was talking to the guy who had convinced me to go to this school and he was like ‘this is our star, and our academic all-star, she’s doing so well.

My coach called me the altitude queen because I raced all these long events and great times.

Performing well made it feel like coming to this school was the best decision of my life, and I wanted to be there. I got to do a speech, and I love speeches. They put my picture up everywhere and it just felt so good…Everybody was so cool and everybody was so good. My coach always said this thing: ‘we get used to winning here’. 
…that goes to show how much I value what [my coach] says, but that’s a big deal for him. He deals with people who are fantastic all the time, his job is to find people who are fantastic and help sell them. So for me to be one of those people means a lot.

When Bryn and I re-read these parts of the transcripts of the conversation she was able to realize just how much this external validation contributed to sport success making her feel good about herself:

I can call myself self-motivated all the time, but would I have wanted to be as fast if being fast didn’t mean feeling good? The reason you feel good when you are fast is because everybody loves you and praises you because you’re fast. There’s no other reason, I’m not like ‘oh I love looking at the clock and seeing fast times, I mean I do because I know that time means people are going to be like ‘shit that girl is fast’.

Rather than this climb to sport stardom making Bryn feel immense pressure to continue to be better and better, it gave her a sense of confidence; it was a place where she was comfortable, felt like she belonged, and a vantage point from which no challenge was insurmountable. This process echoes Adler and Adler’s (1989) description of a “gloried self”, derived from their examination of college basketball players (p. 303). These authors describe how the gloried self became part of the way these athletes viewed themselves when they internalized the heroic and aggrandized images that their communities projected on them (Adler & Adler, 1989). In addition, in their examination of current, elite male athletes’ experiences with depression, Doherty and colleagues (2016) reported that the participants’ athletic identities became more salient through positive reinforcement received from the wider sport community.
Evidently, the glory manufactured by an admiring sport community can become embedded in a successful athlete’s sense of self.

Indeed, as she progressed through her university degree and continued to be a star on her team, I developed the sense that Bryn began to internalize the external recognition and validation that she was receiving for her accomplishments to inform her sense of self because of the way she would draw on them as resources to boost her confidence when her self-esteem was threatened in other contexts. For example, Bryn began a tumultuous relationship early in her university career which ended in a serious and distressing manner. The aftermath of this incident caused Bryn significant emotional distress: “Up until that point that was the most hurtful thing I had ever had to deal with…I couldn’t envision my life without him.” However, she described dealing with her damaged feelings by immersing herself in training for her sport and in her sport community, as well as by reminding herself that as a high-achieving student-athlete she felt superior to the individual who was causing her so much emotional pain:

For a couple of years I was ‘seeing’ this guy and it went super, super sour really fast and it hurt a lot. That was really hard. It was really, really hard because I loved the guy to death, regardless of what our actual relationship status was. So that happened in the fall and my [sport performance] didn’t really suffer. One time we were fighting around my birthday and then I had a competition that weekend and I had never been so fast in my life…I was sad and so heartbroken but it was great. So that was kind of like one of those moments when I was like ‘you’re so good, you’re fucking awesome! You can be so sad and still be so fast!’ And I’m not even saying just ‘so good and so awesome’ as an athlete, just a bomb-ass chick.
It was so much better [to go to training] when I was emotional. I felt better when I had a good training session, even if it was just one good interval. It made me feel like in the relationship I could think ‘whatever, his loss, look how awesome I am’.

We should not have been together…because look, I’m this quote on quote ‘poster girl’ at my school. You know what I mean? I’m trying to sum up like eight hundred words in that, but anyway, and he was a fuck up.

When I would have a good training session it was just like footsteps, one step away from that bad thing and it just kept getting better and better and further removed and further removed.

Surprisingly, minimal research has been conducted examining the effect of competitive sport participation on global confidence or self-esteem, particularly in young adults. In their phenomenological examination of depression in female collegiate athletes, Jones and colleagues (2013) briefly mention that sport was a source of confidence and enjoyment for the athletes, however this sentiment was susceptible to being shaken by poor performances. Research with high school students has reported that adolescents high in femininity who participated in competitive sports actually reported lower levels of global self-worth compared to their peers who were involved in noncompetitive sports (Bowker, Gadbois, & Cornock, 2003). Furthermore, Daniels and Leaper (2006) examined sport participation, peer acceptance, and self-esteem in a large sample of adolescent boys and girls and found that peer acceptance was a significant mediator of the self-esteem derived from sport participation. Level of sport competitiveness was not measured in this particular study. Therefore, the robust confidence and sense of self that Bryn derived from her sport participation was likely strengthened by the fact that she almost
exclusively experienced performance success and had a positive experience with peer acceptance.

The process of reflecting back on this time in her life, prompted by participation in this inquiry, allowed Bryn to develop new insights into how sport protected her from serious psychological challenges as a result of this incident. Evidence for this phenomenon is found in a later conversation when Bryn and I were discussing a second traumatic breakup:

Like I said before with the other guy, it was like I’m still so fucking awesome and you’re shit, like you’re a joke. Look at me, I can still win and all these people are going to clap for me. You don’t realize that this is me reflecting on what made me feel good about that scenario from the outside. When I was that athlete and had that amazing performance, I just felt good. I wasn’t trying to figure out…like when you feel good you’re just like ‘oh I feel good’, you’re not trying to figure out what exactly it is from that scenario that made you feel good. But when you feel shit, you’re trying to figure out exactly what it is so you can fix it. Or at least that’s me, I’m a fixer.

An additional reflection that Bryn shared with me in one of our later conversations demonstrates how deconstructing her sport experience has resulted in Bryn developing a more holistic perspective on the benefits she derived from her sport participation:

I think back now because I’ve had so much time to reflect and this is just my outlook on life…it’s such a blessing that I had those feelings because I think differently about things. It wasn’t performing well and winning, it’s not the act of performing well that makes you feel good, it’s that everyone else is like ‘oh my gosh you are so good’. It’s all the friends and going to a sport-related event and feeling like you belong there because you’re a
national athlete. Right? It’s like ‘this is my place…that’s my thing that I’m supposed to go to.’

Reviewing the transcripts of previous conversations served as another opportunity for Bryn to reflect on the things she had told me and provided more insight into her views on how the confidence she derived from her sport improved her ability to cope:

Of course I keep thinking of all these things that I never thought. If only I had thought the same way with my most recent break up, I would have snapped right out of it. What do I care, you’re not even nice to me, why would I want to hold on to you?

These reflections are examples which demonstrate how the process of storytelling has played a role in shaping the way Bryn interprets her past experiences, a concept which is expanded further in Act 3.

**Performance-driven motivation to maintain physical and mental health.** One consequence of Bryn’s drive to perform well in her sport was motivation to be active in maintaining her physical and mental well-being. By comparing her help-seeking behaviours pre- and post-sport retirement, Bryn and I determined that the perceived necessity she felt to maintain her performance compelled her to seek out support when she was injured and when she was trying to cope with the traumatic relationship mentioned above. This was made much easier by the fact that support resources were considerably more accessible while she was a university-athlete compared to once she retired. In this sense, her participation in elite and university sport acted as a coping resource for Bryn because it provided the impetus to be diligent in maintaining her daily physical health by eating, sleeping, and recovering from training well to keep
performing well and be confident, in addition to maintaining her mental health by seeking out social and counseling support.

I wasn’t hugely on the nutrition bandwagon. I ate what I wanted in high school. I mean I ate good food because I wanted to have good energy, like I felt dead in training if I didn’t. When I was in university I was pretty good about what I ate, but now I’m kind of like whatever about it, I’m not going to be worse at my exercise class tomorrow because I ate M&M’s.

I was pretty good about my selections, I wanted to eat to be energized, I didn’t just choose garbage. I would eat a big bowl of pasta and stuff like that at that time [in first year], whereas in my second year I didn’t do that anymore. I think the adjustment was positive for my training and recovery and stuff.

Interestingly, when the suggestion was made to Bryn by her coaches and a senior sport administrator at her university to make an appointment to see a counselor after the dramatic end to her relationship, she did not imply any hesitation to do so:

When shit went so, so horrible, I was so upset for so long. I went and used the counseling services and stuff. And my motivation to use that was that it couldn’t bother me for a long time, like I have too much going on that I want to be good at and I’m not going to let my [sport performance] go way down because I can’t sleep because I’m too emotional or I can’t do school because I can’t think straight. I was literally like right away I need to go talk to someone. I called this number and I called that number and I sat down with this counselor to jump start my recovery.
For Bryn, it felt critical that she did not allow the incident to impact her sport performance, both in training and upcoming competitions, and seeing the counselor was a way to ensure that:

…it literally was the fact that I still wanted to perform really well, so I had to keep training for me to get over it. I wasn’t going to throw away nationals by sucking in training until then and then not have any confidence…I could never leave that to chance and I really, really think that’s what made me okay.

Prompting this help-seeking behaviour is an example of how the sport context, and principally Bryn’s strong desire to maintain her sport performance, was a positive and effective coping resource for addressing Bryn’s psychological distress:

That was the biggest break up or traumatic emotional experience I had ever experienced in my life and the sport kept me together because I was like ‘I have to be okay or I’m going to perform badly.

I really think that it was feeling like I had to stay good, for me, I’m not going to let my training fall. Everything is not going to crumble around me because you are mean to me, because that would be stupid.

Bryn decided to address her emotional distress with the help of a counselor, which she described as a helpful preventative measure for ensuring that the incident did not cause irreparable psychological damage.

The salience of sport performance as a motivator for maintaining her physical and mental health is reinforced by Bryn’s comparison of how the absence of this drive impacted her behaviour once she was retired. The pro-active coping behaviour she engaged in in Act 1 starkly
contrasts with the coping behaviours Bryn demonstrated post-retirement: “I got to the point where I couldn’t, like I wasn’t even thinking about fixing it anymore and that had never been me, ever.” When contrasting her experiences pre- and post-retirement Bryn was able to notice and express an interesting commentary about the healthism discourse in current society which emphasizes individual responsibility when it comes to health behaviours; that the failure to maintain good health represents a personal deficit (Crawford, 1980; Fusco, 2006). Without explicit awareness, Bryn drew on this discourse when she expressed that it was up to her to pick herself up and maintain her health once her performance-driven motivation was no longer salient:

I did that lickety split [saw a counselor] because I wanted to perform well and I think that’s something that I did differently that I won’t do should I end up in that situation again. I was like well it doesn’t matter if I get better right now or not because I’m not going to perform badly. But it’s like okay, your whole life though, the rest of your things suck. Like okay it’s not sport but you’re not being physically active, you’re not being as productive, all of which are of equal importance now. Those things are what being good at the sport was, like being vibrant and being vibrant as a human outside of sport…Maybe because it was tangible, like it was measurable. If I’m performing badly in my sport it’s very easy to see. Versus if you’re spiraling out of control, which I was, always going to sleep and not doing things you normally would do, there’s no measurement. Typically, the way society is, is that nobody is going to tell you that you’re doing shit, you know? Like nobody is going to tell you that you’re doing fuck all and to get off your ass, to get it together and not just lay down and die. But in sport, if you lay down and die the clock will tell you that you’re laying down and dying. That was a good
learning experience because now I know other things matter too. Fresh out of the sport you’re like ‘oh whatever’. And I used to say it’s a good thing I was an athlete because I probably wouldn’t have slept a lot, you know, like I wouldn’t take care of myself as well if I wasn’t an athlete. Now that I say that out loud I kind of don’t take care of myself as well as I could. I don’t eat very much real food…I mean I never really thought of that until we are talking about it now, like it is equally as important.

Bryn’s drive to be healthy in order to perform well in sport may suggest that athletes, because of their need to maintain an optimal health status, may be more inclined to seek assistance such as psychological counseling, and this may be a highly appropriate coping behaviour. Unfortunately, however, previous literature examining the perceived barriers for athletes seeking mental healthcare has described athletes being hesitant to access such support because of concern over potentially being recognized by their peers or the public in such spaces and thus being stigmatized or labelled as mentally weak (Gulliver et al., 2012; Lopez & Levy, 2013). Contrary to this perspective, Bryn did not express feeling any shame associated with seeing a counselor on her university campus or hesitation to give this resource a try when dealing with the emotional fall-out of the trauma she experienced. There are a number of reasons that may explain why this was the case for Bryn. First, the context in which Bryn was sharing her experiences, conversations with me for which the stated purpose was to explore her experiences with sport and mental health issues, likely felt like a safe environment to share her experience with mental health help-seeking. In addition, Bryn was encouraged to seek counseling by her coaches and a senior sport administrator which demonstrates that these individuals supported this type of help-seeking and would not perceive it as admitting weakness. Whether the coach and administrator were motivated to support Bryn in seeking professional mental health services to
optimize her performance outcomes or her personal well-being, they evidently viewed this resource as acceptable and valuable. The fact that advice from these individuals prompted Bryn to access mental healthcare speaks to the importance of coaches and sport administrators demonstrating support for their athletes seeking mental healthcare and addressing mental health issues to reduce athletes’ perceived stigma around accessing such services.

**Comfort derived from the control and structure imposed by the elite sport context.**

As Bryn and I discussed the circumstances that contributed to her mental health issues after retiring, we were able to reflect back to why she did not experience these challenges to the same degree when she was an elite athlete and university student. One of the characteristics of the sport context that contributed to sport being a significant coping resource for Bryn was the control, structure, and focus on progressing toward her performance goals that she was used to having in her life as an elite athlete and university student. The influence of this structure was only evident upon comparing Bryn’s life before and after retiring and graduating. This is an example of how the act of storying her experiences and how being prompted by me and this project to reflect in such depth on her experiences before and after elite sport, resulted in Bryn and I identifying influences on her mental health that she had not previously thought of.

Requiring the body to perform at its physical potential often demands strict control of physical training, nutrition, rest and recovery, and other lifestyle choices. There is also structure imposed by continuously setting performance goals and expectations and having objective feedback as to whether progress toward those goals is being made, which was a salient motivator for Bryn:

> My mom and I tried to pinpoint it and it was just not having a thing to work on. With [my sport], I’m continuously trying to get better, It’s not getting better in four years, it’s trying
to be fast by the next nationals. So it’s like okay I need to do this, this, and this, so I’m at this point at the right time. Versus you stop [the sport] and you’re like okay, I need to be a surgeon or I’m shit…I need to make sure I’m maximizing the use of my degree.

In addition to these elements of the elite sport context, additional annual structure existed for Bryn in the form of the school year schedule around which, for five years, Bryn organized her life. These components of Bryn’s life as an elite and collegiate athlete, in a way, made life and decisions simple. When a disruption to the structure, perception of control and progress toward achieving her goals occurred in the form of a relatively serious injury early in a competitive season, Bryn’s emotional well-being was threatened. She described feeling frustrated at the failure of her body and in her inability to keep up with her usual performance standards, sentiments that have been consistently reported by athletes who have struggled with disruptive injuries (Clement, Arvinen-Barrow, & Fetty, 2015; William, 2000). Bryn told me a story about how she was unable to stay and watch a competition that the injury forced her to sit out on, which was the first time that Bryn exposed vulnerability in her relationship with her sport. Once she was able to train normally and was back to performing to her usual standards, Bryn reverted back to talking about her sport experience with enthusiasm and energy.

Although Bryn clarified that the injury she experienced was minor compared to those she had witnessed in some of her peers, and only disrupted her training for a couple of months, the sharing of this story and the distress Bryn portrayed about the injury suggested the fragility of the self-esteem and confidence that Bryn derived from sport. Many athletes report depressive symptoms and anxiety associated with not only the physical pain of injury but also the challenge of injury inhibiting normal training and performance, and the social relationships associated with sport (Gould, Udry, Bridges, & Beck, 1997; Johnston & Carroll, 1998). This is understandable if
we consider this relationship from Bryn’s perspective; performing well in training and competition made her feel awesome, made her feel like she was an exceptional young woman. When she faced a brief period of injury and thus temporarily lost the almost daily reinforcement of these affirmations, it is unsurprising that a result was emotional distress.

**Benefits of the compartmentalization of time, thoughts, and stressors.** Sport represented a coping resource for Bryn in the simple fact that it was a place of refuge, both physically and mentally, from the demands of her academic and personal lives. Throughout our discussions, Bryn consistently mentioned the characteristics of her particular sport environment which allowed her to set her other stressors aside and focus wholeheartedly on her physical training. These features included the physical experience of the sport, and the fact that in the hours she spent training each day she was physically and mentally removed from other parts of her life:

> I don’t think I consciously blocked it out [relationship issues] but I didn’t care when I was there. I talk like I was really serious, like I was having fun at training but I was there for a reason. So I was focused on what I was doing in that very moment. Like my mind didn’t wander that much really…I don’t think I was making a conscious effort to be like ‘okay don’t think about this here, this is your space’, but I just wouldn’t think about it because I was so focused on what I was doing.

To expand on this ability to focus on training despite other stressors in her life, the nature of Bryn’s sport entails a dampening of the senses when she is engaged in it. These characteristics helped to immerse her in the task at hand, the training session:
It’s something to focus on, and there’s almost a therapeutic aspect of it. When you’re totally overloaded, when I would be stressed out and starting an assignment that was due the next day and know that I would be up all night writing it, I could train for two hours and not think about that assignment. After training I could feel refreshed and go sit down in the library and do it.

When I was [at a training session] I would feel like nothing else mattered, I can’t do anything, I can’t text you, I can’t lurk you, I can’t do anything while I’m here so I would just do what I needed to do, at least make that part of my day purposeful.

I think part of what made [the sport] an escape, and my mom and I have talked about this too, is the therapeutic nature of it. Your thoughts are dulled, you just mechanically repeat the motions. You know what I mean? But at the same time there’s so much to think about, like if I’m on pace, am I doing what I need to do. You don’t have time to think ‘woe is me, who is he sleeping with?’ You don’t have time.

This therapeutic effect that Bryn articulated suggests that rather than training and competing in her sport adding anxiety and stress to her life, this participation had a calming effect when other parts of her life felt like they were in turmoil. Interestingly, this very real potential for the simple engagement in strenuous physical training to have a calming effect and thus be a source of coping with psychological challenges, at least in Bryn’s life, has been explored with inconsistent findings in stress and physical activity literature. Hegberg and Tone (2015) found a significantly positive association between self-reported physical activity engagement and self-perceived resilience to stress in individuals who also reported high trait anxiety. In addition, Rimmelle, Marti, Wirtz, Ehlert, and Heinrichs (2009) compared elite male athletes with untrained males and
found that the athletes reported less state anxiety in response to psychosocial stress. On the other hand, some research has found that physical activity-induced changes in physiological stress responses did not extend to psychological stress responses (Klaperski, von Dawans, Heinrichs, & Fuchs, 2013). Additional research on the impact of strenuous physical training in elite athletes on their ability to cope with stress would be worthwhile in attempting to understand the nature of sport as a coping mechanism for elite athletes.

In addition, Bryn described how she developed the ability to compartmentalize her attentional focus toward each sphere of her life and dedicate almost complete attention to each sphere in turn as it became the priority. For example, when Bryn had a school assignment to work on or an exam to study for she would focus exclusively on that, pushing thoughts of her sport aside, and vice versa:

I think this is a good takeaway for anybody: how effective would you be if when you’re at work you do work and forget about work when you go home…you know, and do school when you’re at school. I used to say that to younger athletes, as an athlete, at least for me, I would focus on school at school because odds are by the time this exam comes around there’s a chance that I may not have revisited this particular portion ever again. So I would try, when I could, to be fully focused on what I was doing.

When Bryn was in her element at training and competing in her sport, the other demands in her life were set aside. Rather than this strategy resulting in Bryn neglecting academic or personal responsibilities when she was immersed in her sport, the distraction of training sometimes allowed for a distancing from schoolwork which resulted in enhanced clarity and focus when she returned to her work:
It was almost like the effect that sleep has sometimes. You know when you’re working on an assignment all day and then you go to bed you can’t look at it again that night and you go to bed that night and then the next day you look at it and you’re like okay I’m good. It was the same thing, I would study all day, maybe think ‘oh shit I don’t know if I’m prepared’ Then I would go and train, come back, and be like ‘heck ya, I’m good, I know this.’ I guess just having a break and then being able to see it with fresh eyes.

Previous research in the context of anxiety and stress associated with public speaking found that participants who were distracted before giving an in-class speech were less stressed compared to those who underwent a reappraisal exercise or had no intervention (Priem & Solomon, 2009). Thus, the simple distraction from stress-inducing school work that training represented for Bryn was an important benefit of her participation. Travelling for competitions also created the opportunity for Bryn to physically and mentally escape from stressful situations at home; within a few days of the incident with the male relationship, Bryn’s team travelled to an exciting competition out of the country which her coaches encouraged her to take part in:

The same week that all that shit happened we were going to [city name] and my coaches were so supportive. They were like ‘all you need to do is get on that flight’. They were like ‘if you’re not training today, no problem, if you’re not training tomorrow, no problem, but you need to get on that flight’. They weren’t saying it meaning they wanted me to come so I would win, they knew that I needed to go for me.

This opportunity provided a physical and mental escape from the situation at home and contributed to mending her damaged self-esteem when she subsequently performed well.
**Easy access to structural and social support systems.** As a successful university athlete, and as an individual who has a supportive family and friends, Bryn had access to a considerable amount of social and physical support systems which contributed to the sport context being a significant coping resource for her. This theme is another area that can be compared pre- and post- retirement and graduation and provides an example of sport being an excellent coping resource while it was available to Bryn. These same sport-related supports however may have contributed to vulnerability once she retired and could not access them.

In terms of social support, there are a number of individuals in Bryn’s life who provided different types of support including her family, coaches, a senior sport administrator at her university, and teammates. Bryn’s mother and father have played important roles as social support providers both during her time as an athlete and since. Not having been involved in any way in Bryn’s sport before she showed her own interest in it as a young child, Bryn described her parents as not being very knowledgeable about the sport context or interested in it outside of their interest in her success and well-being. Bryn’s parents showed their support by encouraging and facilitating her early participation in the sport, by watching her compete and celebrating her successes, and by demonstrating their faith in Bryn’s ability to make decisions about her participation. Of note is Bryn’s comparison of the way her parents were involved in her sport career compared to those parents who are overly involved and integrated into their children’s sport participation, she describes them as not being “sport parents”. There were a number of perceived benefits to this detached yet supportive relationship that her parents had with the sport. As we discussed how her parents’ relationship with her sport made her feel, Bryn and I concluded that not demonstrating significant investment in the outcome of her performances meant that Bryn did not have to cope with another source of pressure and expectation. The fact
that her parents responded with support whether she won or lost competitions meant that Bryn did not have to spend emotional energy worrying about how her parents would react to an outcome. This may be a valuable lesson for parents who find themselves overly invested in their children’s sport careers and thus contribute to perceived pressure, which has been found to negatively impact youth’s sport experiences (Bremer, 2012; Gould, Tuffey, Udry, & Loehr, 1996). Providing an even keel of emotional responses to a variety of competition outcomes and supporting a young athlete’s participation in sport based on his or her overall enjoyment of the activity may be effective strategies to maintaining a positive relationship with sport for both parents and athletes.

The relatively passive support of her parents can be contrasted with the types of support that those individuals associated more directly with Bryn’s sport sphere of life provided. Drawing on social support literature, it is not surprising that Bryn’s coaches and sport administrators, who could be labelled experts within the sport context, provided much more informational support when Bryn faced challenges. Informational support refers to giving advice and providing someone with relevant information (Freeman, Rees, & Hardy, 2009). Bryn went to her coaches for guidance regarding training and competition technicalities (informational support), as well as for support when coping with psychological challenges which represents emotional support or the provision of comfort and care (Richman, Rosenfeld, & Hardy, 1993):

I was always very open with them [coaches] about how I was feeling and things that were happening. I would talk to them. Like I said, not a lot of bad shit happens to me so it’s not like I would constantly be talking to them about stuff, but when I really didn’t feel good I would talk to them.

In turn, it is evident that her coaches often did not hesitate to provide very direct advice:
My coaches never steered me wrong, ever. There was a situation where a girl wanted to move into my apartment when an old roommate left. I told one of my coaches and he’s like ‘no’. He’s like ‘she can’t live with you.’ And I mean that caused huge drama with me and my friend because she didn’t understand why and I was like ‘I don’t know but my coaches said it’s not something I should do and they have never in my life steered me wrong.

This type of support can be tied into the concepts of control and structure discussed above. When faced with difficult decisions, Bryn was able to relinquish some control to her coaches to heavily inform her decisions, thus reinforcing her dependence on the control and structure inherent in the elite sport context. From a developmental perspective, researchers have suggested that adolescents should be given the opportunity to learn decision-making skills in order to progress in their ability to make autonomous decisions (Klacznyski, Byrnes, & Jacobs, 2001). Interestingly, the process of examining these relationships and the distance that she gained from this context afterwards led her to be somewhat aware of the power that coaches can develop over their athletes:

I spent way more time with my coaches than I have with my parents…I never thought of this before but they kind of shape you a little bit. You spend a lot of time with those people, or if you’re not with them you’re still under their guidance, or at least you’re thinking about what they might think of something. Like if you don’t go to a training session, and this isn’t my thing because I liked to train, but the guilt isn’t coming from you not going, it’s from thinking about them saying something about you not going. They almost play a parent role for sure.
Even with this awareness, Bryn interpreted this type of support from her coaches positively because she trusted that they had her best interest in mind, not only in terms of optimizing her sport performance but also her well-being and personal development. When Bryn described the considerable emotional support her coaches provided her she states:

I really, really appreciate that…and I think they would do that for anybody, and that’s not in their job descriptions. It’s not their responsibility to make sure…I mean partly it is because if I’m not emotionally okay I’m not going to perform well, but they most definitely went above and beyond.

Bryn clearly felt comfortable exposing vulnerability to these individuals by relying on them as sources of emotional support: “One of my coaches, I would cry and she would just hold me, she’s so cute.”

Bryn also discussed the social support that her school’s sport administrators provided, particularly in relation to the turbulent romantic relationship that she experienced. Similar to the type of support her coaches provided, this individual gave Bryn informational support in the form of specific advice, as well as provided emotional and empathetic support:

So with [name of sport administrator] she was only really super involved with the boy, that stuff that happened with the boy. She kept me focused on what my things were. She almost kept me grounded a little bit when I was in a tornado, upside down…She’s a great person to talk to. She makes you feel like you’re in a safe bubble, like a hug. It’s a stupid explanation but that’s how she makes you feel.
I reached out to the counselor after the boy incident under the guidance of [a senior sport administrator], she told me to do that. And my coach too, she told me that the sport administrator thought I should do that and recommended the counselor.

These relationships serve as another example of Bryn’s comfort level with the members of her sport community and her lack of shame revealing emotional distress to them. Bryn clearly felt that seeking support from these individuals would not lead to their perception of her being unable to cope and thus weak in some way. This may be due to the particular culture that her coaches and athletic department fostered, it may be due to her particular relationship with these individuals, or it may be a result of a combination of these influences and others. Regardless of the intricacies of the relationships and attitudes within Bryn’s specific sport context and experience, her willingness to express some of her psychological challenges with her coaches and sport administrators represents a coping resource for Bryn that was facilitated by her participation in elite sport. This experience also speaks to the fact that certainly not all sport communities foster a culture of silence around mental health issues, a perspective that is salient in the limited literature examining the sport context and athlete mental health (Bauman, 2016; Gulliver et al., 2012). While this is undoubtedly the case in potentially a majority of sport cultures, the exposure of Bryn’s experiences highlights the importance of taking individual experience into consideration when investigating the different stressors that face athletes with mental health issues as well as the positive aspects of sport participation that may help them cope.

Bryn also identified the social support she received from teammates and a very close friend whom she met when competing for her country internationally as very important for her day to day enjoyment of sport and mental well-being. Bryn clearly thrived socially among her
teammates and spoke about how the opportunity to be around these friends was uplifting when she was struggling psychologically with the aftermath of her break up:

Maia was literally my saviour, and she was just there…she was awesome. She had gone through some of her own stuff so she could relate. Whether she had answers or not didn’t matter, it was just for someone to say ‘I know’. That was enough.

Based on her level of openness with me during our conversations and the ease with which she carried the conversations, it is easy for me to picture Bryn being a vibrant personality among her teammates. In addition, based on her evident drive to work hard in training, her enthusiasm for the sport, and her performance successes, it is easy to see how Bryn became a leader on her team mid-way through her university career. Sport provided an opportunity for Bryn to develop close relationships with her peers and introduce her to an enduring best friend who she would not have met if not for her international sport experience. This individual came up consistently throughout our conversations, indicating her significant presence in Bryn’s life and the significant degree to which Bryn valued her support.

When she was a university athlete Bryn also had free and easy access to a range of health-related services including sports medicine, physiotherapy, sport psychology, and counseling services. Due to injury, some performance anxiety, and emotional distress over the traumatic relationship, Bryn took advantage of all of these sectors. She never had to seek these services out by herself nor had to pay for them, and she often received special treatment at times as a result of her star-athlete status:
I wanted therapy for the whiplash but they said they didn’t deal with motor vehicle accidents at the sports clinic. They pulled some strings and they did though because I was needed to train and they knew me.

I loved going to see [my physiotherapist], it was so good. He would get my in whenever I needed. I would come in and be like ‘this is what’s up’. I would text him here and there if I couldn’t get an appointment. He would do what he could for me, even if it was just setting me up on a modality at the side when he was supposed to be seeing somebody else. He was awesome.

The ease of access to services meant that Bryn had minimal barriers to getting the help she needed when challenges and obstacles arose. When discussing the one disruptive injury Bryn experienced during her career she described the care she received:

I did so much therapy…they were concerned because it’s a risky area…I got so much attention, I was in therapy so much and I was taking such good care of myself. I would go into the ice tub after every training session…you get good and they [referring to coaches and physical therapist] want to protect you, like they’re on top of you about doing rehab and about how you’re feeling, telling you to be careful.

They [coaches and physical therapist] were so supportive because, and I really think it was because I always worked hard and I was getting really good…they took great care of me. I felt like they were genuinely concerned about me.

Being strongly and internally motivated to ‘be okay’ in order to perform well in her sport also meant that Bryn perceived limited internal barriers to using these services, internal barriers
such as perceived stigma from her peers or coaches, or lack of motivation to seek help. These types of support can be thought of as structural supports that were contingent upon Bryn’s membership in the exclusive community of elite and collegiate sport. Unfortunately, once Bryn’s membership in this group came to an end upon her retirement from sport and graduation from school, she was exposed to the same barriers as the general population to accessing these services which, arguably contributed to her vulnerability to struggle with psychological challenges. Current, elite male athletes with depression have reported they felt that their sporting careers had prevented them from developing skills to cope with life outside of the athletic domain (Doherty et al., 2016).

Research specifically examining the positive impact of elite sport on mental health from athletes’ perspectives is limited, although the athletes in Jones and colleagues’ 2013 study described positive psychological experiences as a result of participation in this context. Given Bryn’s experience, the role of elite sport participation as a coping mechanism may warrant further investigation. Bryn’s case clearly indicates that the nature of the relationship that elite sport participation has with mental health issues can be highly individual and the potential for sport to be a coping resource as well as a source of psychological distress at times should not be discounted by mental health professionals working with athletes.

ACT 2. The Breakdown: Facing Life Outside of the Elite Sport Bubble

[It was] like the center of a tornado and the colour scheme in my mind was grey and black and literally what you think of when you look at a tornado. That colour scheme is how things felt, my feet were on the ground most of the time but like here and there the wind would catch me.
Whereas Act 1 can be characterized by such adjectives as solid, firm, fun, exciting, confident, Act 2 represents a transition to a new phase of Bryn’s story characterized by turbulence, darkness, chaos, and sadness. In terms of the way Bryn saw herself, her sense of her identity, a stark contrast arises. While the character of Bryn could be described as confident, powerful, and enthusiastic in Act 1, a number of circumstances that arose post-retirement from sport and graduation from school transformed this vibrant young woman into a muted, insecure version of her former self. Compounding the challenges Bryn faced in her transition out of the sport and university environment in which she had become so comfortable, was the deterioration of a serious romantic relationship approximately six months later. Act 2 represents the phase of Bryn’s story when she faced the most significant, in terms of length and depth, period of psychological distress in her life thus far. This experience was eventually diagnosed as an adjustment disorder with mixed moods, anxiety and depression. In trying to understand and ultimately represent what this experience was like for Bryn, and the role elite sport participation played in this experience, I have examined the physical and psychological sensations that characterized the experience as well as the circumstances that contributed to Bryn’s breakdown.

**The Raw Physical and Psychological Experience of the Breakdown**

Based upon her retrospective vantage point, having essentially recovered from her adjustment disorder, Bryn described it as being very difficult to remember exactly how she felt during Act 2. That being said, as we discussed her experience, Bryn was able to recall certain details about how the disorder felt in both a physical and psychological sense. In the opening quotation for this Act Bryn uses a very visual and kinesthetic metaphor to try to explain to me the way the disorder felt to her. The imagery this metaphor inspires allowed me to picture what the anxiety, discomfort, and lack of control may have felt like for Bryn. During this time, Bryn
feels a combination of despair and uncertainty over the end of a second turbulent relationship. She questions her partner’s previous commitment to her and obsesses over his actions. She experiences racing thoughts about how the relationship ended as well as what she should do with her life:

I would wake up and search something and be like okay well what can I do, and I’d be on google searching like what job is good for your personality. I would also lurk my ex online, see his stuff and what he was doing. And then your chest gets tight and I’m wide awake, it might as well be day time.

I really think truly that I had pinpointed that the anxiety was coming from not knowing what I was doing. So I would lay down and I would think wow I should start searching for jobs and I should be sending my resume and I should be looking at going back to school, what credentials do I need for a certain program, what do I need to do for this and that. So I couldn’t rest and then I’m exhausted and I’m overly emotional because I can’t rest. And I’m exhausted.

I would think well if I don’t go to this particular event, maybe I won’t meet some person who would offer me an opportunity. So I would think if I do go, maybe I’ll get this opportunity and maybe what I should do is go back to [the sport], et cetera. That’s how it went, always wondering what I should or shouldn’t be doing, and you’re like fuck, just cut off all my hair. You feel so crazy. It makes you feel crazy. It almost gives me compassion for people who lose their mind, because I felt crazy. As though my feet are on the ceiling, I can’t even get grounded and be like okay stop that, this is okay. If I eat this bagel the world’s not going to end.
Clearly, these racing thoughts and anxiety led to a number of physical repercussions. Bryn had difficulty sleeping and the daily exhaustion she felt exacerbated her discomfort with her psychological state:

I couldn’t move, like I literally could not move. I couldn’t get up, I couldn’t do anything. Everything was exhausting, everywhere felt far, like I was walking and it would feel like I was walking against the stop hand. It’s like I couldn’t see and I didn’t know what to do. I was so embarrassed, I thought about how I would have to go to my doctor and tell her that I’m not sure the person I’ve been with has been faithful to me. That was so humiliating because that’s my body and my health, and I literally thought ‘I don’t know, I just don’t know’. He didn’t try to fight for it, he didn’t try.

I would be in bed and I couldn’t move, like I was crying to the point where I couldn’t feel my fingers because I was just too emotional. I would call my mom and she would be like ‘what’s wrong’, and I would be like ‘I don’t know what’s wrong.’ And she would ask ‘is it asshole?’, and I’m like ‘I don’t know if it’s him’.

Bryn was highly insightful in her recognition that trying to recreate and articulate the emotional and physical sensations that she experienced months ago in the context of the conversation with me was an imprecise endeavour, an issue that is inherent in this method of research:

I feel like myself now. It makes it hard to talk about exactly how I felt back then, the perception gets skewed. I can try to put myself back in that place when I didn’t feel good, but now that I do feel good it’s hard. It’s the same thing as when someone else goes through a break up, which one of my close friends did. I cried and my heart hurt because my friend was so upset. I can’t feel the heart hurt…so that’s kind of how I’m thinking
back, like I don’t feel it so I can say all these things but I don’t know, like it’s hard to recreate how I felt.

However, there are certain advantages to analyzing how the process of reflecting has contributed to Bryn’s understanding of, or altered her perspective on her experiences. The dialogical narrative analysis used to understand and analyze Bryn’s story creates room for this level of interpretation.

**Bryn’s Experience of a Breakdown**

Over the course of our conversations, Bryn and I were able to identify and deconstruct a number of circumstances and influences which she perceived as contributing to her experience of a psychological breakdown. Bryn raised a number of these within the stories she shared with me about her experience with significant psychological distress post-retirement, while others were developed as a result of my probing during our conversations as well as during our process of interpreting the conversation transcripts. This process is a specific example of the dialogic nature of this narrative analysis as it takes into account my influence, as the researcher, on the meaning-making process of this inquiry and thus the role that my interaction with Bryn had on her story and self-understanding.

**The transition out of sport and university.** One can think about Bryn’s retirement from sport as having two phases; the first comprising the initial few months after her final competition which were carefree and fun:

At first I was okay and I was dancing and enjoying it. I thought it was so fun, being able to do all these new things and literally try everything, taking exercise classes, free trials everywhere.
The second phase began in the months following this exploratory time during which Bryn began struggling with an adjustment disorder, anxiety, and depression.

Bryn came to the decision to retire from sport after her final university competition during the weeks prior to it. Bryn experienced some uncertainty about the timing of her retirement because of a couple of major international competitions that would be occurring within a few years after her university graduation which she had the potential to qualify for. Ultimately, Bryn decided that the possibility of qualifying for these national teams was too slim in relation to the sacrifices she felt she would have to make to continue training and competing after graduation. With the quiet reassurance that she gave herself that if she decided she was not in fact ready to retire there was nothing stopping her from getting back into her sport, Bryn made the decision to forego the chance of qualifying for another national team and stepped away from elite sport upon the completion of her final university competition:

I remember my mom being like ‘up to you babe, up to you’. I would think about it and she would tell me, I lost a lot of sleep actually and a lot of hair trying to decide. Not trying to decide because I was so hung up on the sport, I knew if I stayed I was only going to go for one more year to try to qualify for the Olympics. So really the challenge I was having was whether to try for the team or not try and regret it. Not regret not continuing in the sport, just regret for my whole life that I maybe could have gone to the Olympics…So I made the decision and I’m like ‘okay so I have trained my whole life, even if I take two months off and then decide I want to come back there’s no harm in that. If I say I’m done and I’m not good and want to start again, I just start again. I think that is what made me able to make the final decision.
That’s what made it so comfortable for me, was that I had made this decision but it’s not permanent. And maybe without thinking of it, that’s why I wasn’t talking about it too much because I didn’t want to be that girl who makes a big deal of it and then decides to come back. I didn’t really put any thought into that but I think maybe that was why.

The first few months post-retirement and graduation from university were filled with new experiences and reveling in her new-found freedom from the control, structure, and physical and mental demands of the elite sport world. Bryn felt comfortable trying new physical pursuits that she had shied away from due to fear of injury and enjoyed relaxing some of the constraints she had placed on her lifestyle while she was an athlete:

And then I retired and was having a blast. About a week or two after I went on a ski trip with friend. I had only skied once before in my life, when I was a kid, but this time I had a private instructor for half a day every day. I was skiing double black diamonds by the end, so fun. Something I never would have done before because I didn’t want to get hurt, [the sport] was so important.

Bryn tells a story of how after her final competition she felt content to move on, not looking back or questioning her decision in these first few months:

My final national championship was awesome, no tears at all. Before my last event I had a tiny little, little tiny feeling…and that was that, I finished the competition and I was like okay let’s party.

This comfort with her retirement lasted for a couple of months, until the time of year when she would be gearing up for another year of school, training and competition. At this point
Bryn entered phase two of adjusting to retirement and graduation and a number of repercussions of this transition started to impact her mental health. Bryn faced threats to her confidence and self-esteem such as changes to her body, moving away from campus, lack of satisfaction with her work situation, and uncertainty surrounding some of her sport-related relationships. As described above, many of these influences are related to the aspects of sport participation that had served as coping resources for Bryn and had contributed to the development of her sense of self over the previous five years. When the reality of post-retirement life had settled in, and many of these coping resources were no longer available to Bryn, she was left vulnerable to the collapse of her psychological well-being:

When I was [in the sport] I was okay, everything was fine, I was in control of my life, I felt good. Then you lose everything, like pull the surface out from under your feet and you’re kind of floating, and you’re like okay, what do I do?

**Adjusting to a new body.** The discomfort and self-consciousness that Bryn felt as a result of weight gain post-retirement did not come up frequently in our conversations, however when they did, I could sense their impact on her well-being by how differently Bryn spoke about her physical self when she was an athlete versus when her body had changed as a result of reduced physical training post-retirement.

When Bryn spoke about her experiences when she was an elite athlete she told a story of purposefully focusing on her body weight and the potential performance benefits associated with losing weight after competing internationally for the first time and being exposed to the bodies of competitors who were more successful than her:
I remember feeling kind of not super fit compared to some people. My roommate was in a program where they do more heavy weights and dryland training so she was so cut. The girls on her team were so fit. I was like ‘I want to do that, I want to be super fit and be a bit faster’, so I lost some weight.

She was impressed with how strong these women looked and wanted people to think the same about her. Bryn’s motivation for changing her body composition was framed as wanting to look intimidating and powerful, while her subsequent improvements in performance were framed as a bonus, a positive side effect:

I didn’t want to feel like that girl who is kind of, sort of a good athlete. I think that was part of it, I thought to myself, ‘you don’t look crazy fast’. And I wanted to look crazy fast. I didn’t want people to be like ‘oh that girl is not super fit’ I thought it would make me a little bit more confident and stuff. It worked so I kept doing it, I kept running with it.

During this time in her sport career Bryn described feeling like a machine, and feeling great about her body:

I wasn’t trying to diet, I was trying to eat better food, I was making better choices…my body literally started to feel like a machine. I felt like I would eat and my body would be churning it up and I felt so energized and awesome. I was losing weight and I was lean, I would go on the scale and I was starting to see abs. I had lost almost ten pounds and going so fast.
In contrast, when Bryn had been retired for a few months and her body started to change, she lost muscle and gained some weight. Bryn surprised herself by feeling self-conscious about how others would perceive her body:

That has been a whole new thing too, I’ve gained 20 pounds and I go back and forth between thinking I’m okay with how I look but then I think, I weigh 170 pounds, how can that look okay?

When I would go back to campus [where she trained for her sport] I felt kind of weird and I was like ‘is everyone looking at me and thinking I’ve gained weight?’ Because that’s the first thing I see. When I was training and would see someone who hadn’t been training I would think ‘oh damn, they’re soft’. And to me right now I don’t care, but I was caring about that.

The way Bryn talked about herself during this time starkly contrasts with the confidence she seemed to exude during Act 1. She fell victim to an internal dialogue of negativity and self-doubt which is exemplified in the following quotation:

At the time I was like ‘oh shit’ because I was 159 and thought ‘oh my god if you’re 160 pounds you’re so fat. It wasn’t controlling my life by any means, like I never want to be stick skinny, but I was like ‘oh man this is a downward spiral and I’m just going to be fat and nobody is going to want me. I can laugh about it now but that was literally what I thought, that I used to be an athlete and I was so fit and now…

Upon reflecting on this aspect of her transition out of sport in a later conversation, Bryn recognized the double standard she had for her own body compared to how she viewed
attractiveness in other women. Bryn also acknowledged how strongly her mood was connected to the numbers on a scale. These sentiments are not entirely surprising given that Bryn was facing a significant change to her body image:

If I see someone and they’re like, their body is kind of soft and they’ve got rolls, I think that girl is still so pretty, like she still has a good body even though she’s not…but if I have a roll, oh my god, like fucking hell. It’s so weird, because I actually think most females look great…I’m like who cares how much you weigh and then I get on the scale and it says a certain number and I feel good, but it it’s a higher number I’m like oh my god the world sucks.

These perceptions and the concern over how others would view her retired body, contributed to Bryn feeling uncomfortable being around her previous sport environment, a place which had once been a positive, safe haven:

I was kind of shy to go around the training area because I would worry that people were thinking the things I used to think when I saw people who hadn’t trained in a long time. I would think ‘oh damn, they’re big, out of shape. Obviously they haven’t been around for a while’.

Many athletes have reported body changes after retirement being a stressful component of the transition out of elite sport (Stephan, Torregrosa, & Sanchez, 2007). These athletes become used to their bodies being in peak physical condition, their bodies being responsive to the demands placed on them (Gairdner, 2015). When the necessity to strictly control the energy that goes into the body and the energy that is outputted in training and competing in elite sport is removed, the body then becomes less controllable and accompanying unanticipated changes
threaten the way an individual has become used to viewing his or her body. Bryn was less comfortable with and more self-conscious of her post-elite sport body, and it was in the context of this discussion that she expressed concern over what others might think of her, a sentiment that was absent in Act 1.

Another interesting component of the physical nature of Bryn’s retirement experience was the way she thought about some of her psychological symptoms of the adjustment disorder as being the result of physiological changes from her body adapting to a significantly reduced amount of intense physical activity. Bryn’s mother suggested this theory to her:

In terms of the retirement, we’ve talked extensively [referring to mother]. I don’t know if all the feelings were associated directly with retiring because so much else was happening, but like she would remind me that it’s just physical, whether it’s true or not. She’s like ‘this is not a shortcoming on your part, it’s not a short-coming characteristic, it’s not something that makes you any less fantastic and fabulous. It’s physical. All these physical changes are making you feel something you’ve never felt before because you’ve never been in this situation before…I think she probably knew what I needed to hear because I was compounding the situation by thinking there’s something wrong with me, that this is a fatal flaw in me as a human and not in me physiologically, in this current state…like you’re not a depressed person, you’re feeling depressed because you’re sick, or there’s some kind of imbalance.

The comfort that Bryn derived from this physiological explanation for the feelings of depression, and anxiety she felt during this time, reflects the stigma that surrounds mental health issues. Bryn’s sentiments here could be a subconscious response to the tendency of the general public to disapprove more of people with mental health issues compared to physical illnesses (Rusch,
Angermeyer, & Corrigan, 2005) and to frame psychological issues as a label which defines someone versus physical illness or injury as something that happens to the individual (Link & Phelan, 2001).

**Moving only a few blocks but feeling a world away.** Another factor which contributed to Bryn’s deterioration of self-confidence and the challenging psychological state she experienced in Act 2 was moving away from her university campus to a new area of the city. For the first time in years Bryn felt unrecognizable, isolated, and detached from many of the sources of confidence she drew on while she was an athlete.

It was lonely. If I didn’t get up and go out, I wouldn’t talk to anybody, whereas at training you’re guaranteed to talk to someone first thing in the morning. I was just nice to have that. I miss seeing my friends every day; especially when I was living here and my boyfriend moved out, no one else knows who I am. When they see me they’re probably like there’s that girl who looks like maybe she was crying earlier. Whereas on campus people who I knew lived down the street and no matter where I was walking around, I would run into somebody. People knew who I was, and that was fun, I liked to see friends around.

Validation and recognition were two significant sources of confidence that accompanied Bryn’s success in sport discussed in Act 1. Bryn described feeling good when she saw the familiar faces of her peers on campus and associated personal value with being known by these peers because of her outgoing and friendly personality, but also because of the fame associated with her sport participation:
I kept going back to thinking if I was still [in the sport] I would cut this guy off in a heartbeat and I would have no problem doing it. Like I would miss him, and I would question whether it was the right thing to do, as would any human being but like I would have so much more to do and constantly seeing these people. I had moved here and nobody knew who I was, like I’m just that decently tall, kind of big girl. Like that’s it. Whereas when I would walk around the neighbourhood at school people knew me and people would say hi. If I don’t go up there, there’s nobody that cares about me here. Like nobody out here is going to ask how my day is other than for the purpose of small talk.

When Bryn moved away from campus, these continual reminders of belonging in her community were lost and she felt anonymous. Bryn articulated this contrast when she described herself as “that smiling, kind of big girl”, whereas while she was a student-athlete she described herself as “the [school name] poster girl.” This direct comparison of how Bryn viewed herself during the period described in Act 1 versus the period in Act 2 reflects the significant drop in self-esteem that occurred post-retirement and post-graduation. If we once again consider Adler and Adler’s (1989) concept of the gloried self, and the tendency for it to result in the suppression of other facets of the self, it is not surprising that Bryn’s sense of identity was diminished when the sources that fed her glorified self were no longer present.

Lost without a new source of achievement. Feeling anxious, stressed, and negatively about herself because she had not transitioned from university and sport to a job that she was proud of and felt satisfied in was a very salient contributor to Bryn’s mental health issues. Warriner & Lavallee (2008) described a similar theme in their examination of the experiences of retired elite gymnasts, in which disengagement from sport led to a disintegration of their senses of direction and purpose. This was a concept that Bryn and I discussed in great depth when...
trying to understand what it was about retirement that was so psychologically challenging for Bryn. During Act 2, when Bryn was in the heart of experiencing an adjustment disorder, she was almost frantically trying to find something new to put her energy into. Not only did Bryn want to make money to be able to support herself, which came with relative ease, but more importantly she wanted to find a job or activity that she would feel proud telling people about and that she gained satisfaction from:

Last year when I was coaching, I absolutely love children, I love love love them and teaching and I love my sport. But you put those together and I hated it. I shouldn’t say I hated it, it definitely wasn’t my favourite thing. I pretty much like everything I do, I got a lot out of it that I did like, but I was thinking it was going to be this magical thing that I loved so much and it would be like doing the sport…but I felt like I had more to offer than a baby-sitting service, so I was like I can’t do this.

Bryn: I was having such a hard time, such a hard time. I didn’t like coaching, you know like every day I’m like what the fuck am I doing, like I did so much work and built this fantastic resume and persona and now what…when people ask me what I do I had to say [job]. Why the hell am I so smart and I’m a [job].

Rachel: Was how you felt telling people you were a coach the reason you didn’t like the job, or do you think you actually didn’t like coaching?

Bryn: I did not like saying I was a coach. When someone asks me ‘what do you do’ and I would say ‘I coach’, it made me feel like I went from being able to say I go to a great school and I’m an elite athlete, which felt good to say. It didn’t feel good to say that I’m a coach and I used to be this.
This sentiment, the shame that Bryn clearly associated with going from being an elite athlete to coaching youth in the sport, caught me by surprise. Evidently, this pursuit was not congruent with her previous self-image, one of high status, fame, and achievement. Still, I had developed a strong sense that Bryn felt a deep level of respect and appreciation for her own coaches, and the way she spoke about the job when referring to her personal experience with it seemed utterly inconsistent with this. I decided during one of our later conversations that I felt Bryn trusted me enough at that point to question her on this topic. I made a point to do this when we reviewed this section of the transcript in a subsequent conversation:

**Rachel:** I just want to unpack that a little bit because I think a lot of…something that has been really important to you, and correct me if I’m wrong, with like feeling good and feeling good with work is feeling proud and satisfied with your work. In your job.

**Bryn:** Yep.

**Rachel:** And having coaches, I mean obviously your coaches were at the pinnacle of their careers. What was it so much that bothered you about saying ‘I’m a coach’?, you know?

**Bryn:** Hey…that is very good. That is very good, because I think very highly of them. I think what good jobs they have and what awesome lives they have. But for me I don’t feel good about it. Um…I think it was because…I mean it was partly because I was thinking I was going to jump from elite this, like smart student, great athlete, to feeling like I was doing high-level coaching. Not that I really wanted to coach high level but I was like, I don’t coach these kids, I literally babysit them. I don’t know why, ya that’s a very very good question that I never thought of. But I just didn’t feel good about it, I felt like that’s not what I should be doing.
Clearly Bryn’s struggle was not about just finding a job to be independent, it was about finding something that she felt was as impressive as what she had been able to achieve as a university athlete:

I thought I was just going to go up from here [indicates high level with her arm] into something else up here...I got a retail job and I felt really good about getting that job because it was something to do. Then I started doing the job and I gave my head a shake and was like ‘what are you doing? You have a degree with high honours, what are you doing as a sales associated in retail?’ I was working with people who had college or high school diplomas. I’m not meaning to down that but it’s like I didn’t do this for five years to work at a job that I didn’t need a degree for...I’ve never been complacent in my life since I was two years old.

This proved to be much more difficult than Bryn anticipated and was a hunt that left her feeling inadequate and ashamed. Interestingly, Schacher, Brewer, Cornelius, and Petitpas (2004) found that athletes who engaged in coaching after they stopped competing in their sport, and thus prolonged their connection to the similar environment, were more likely to experience identity foreclosure. Bryn had become used to being able to live up to the high expectations that she and others had set for her as an athlete, and had achieved an excellent academic record while balancing elite sport participation. She came out of this environment feeling like superwoman and then found herself in uncharted territory, asking herself the terrifying question of “what next?” An integral part of Bryn’s identity was the belief that she could achieve whatever she put her mind to: “Anything I’ve ever wanted, there’s nothing that can stop me, and I’ll do whatever it takes to get what I want.” In Act 2, Bryn was still motivated to satisfy this part of her identity but was unable to identify the next thing to direct this motivation toward. Bryn also described
how the lack of structured goals and tangible progress which she had become so used to being part of her day-to-day well-being and motivation to achieve, contributed to feelings of depression as each day blended into the next with no change or perceptible progress:

That was definitely part of it, feeling like you’re progressing toward something. That is what I figured out was making me feel so shit, because I was just up here with my feet off the ground, not knowing what to do. I thought I was building this fantastic relationship with all these fantasies that were stupid. And that’s done. And then I was like okay [sport] is done, nobody wants to hire me.

Not to mention I already don’t feel good because I don’t have anything to call my thing anymore. I don’t even know if it was that I didn’t have anything to call my thing, it’s that I wasn’t working on anything. Like going to [retail job] every day, I would work for the day and then go home. It’s not like I’m on a continual project or there’s some end goal. Whereas with [sport] there was always that end goal where I’m like okay I need to be here in November, here in December, here in February, and then here in April. I literally felt like I was on a treadmill, just doing day to day to day.

Maybe it comes back to me feeling not in control, like what am I going to do. What am I going to be doing in the next amount of time? Is today going to turn into a week and two weeks and then four weeks and look back in six months, where am I? No progress made. Instead of, okay at this competition you went your best in season time, okay at this one you were another best time, next one you were a bit slower but you had been training heavier so that’s okay. Do you know what I mean?
Upon discussing some of the influences which later contributed to Bryn’s recovery from the adjustment disorder, certain realizations further illuminate the extent to which this lack of direction contributed to her psychological distress:

I was good about trying to use my resources. I went to the doctor a lot and even going to the doctor, whether he gave me something or not, helped me feel a little better because I didn’t feel good that day but I tried to do something about it. It was the limbo, not working on anything that was uncomfortable for me. I started a XXX course and it was like okay now I can say I’m working on getting into XXX school and that felt better than saying I’m a coach and a retired athlete and I feel shitty about my life. You know, like that felt way better.

I didn’t know that’s what I needed, but I needed to be doing something. So taking that course served its purpose, whether I wrote the exam ever or not, because that got me going.

This feeling of being direction-less, of monotony and purposelessness has been reported by other athletes facing the process of transitioning out of sport (Kerr & Dacyshyn, 2000; Lavallee & Robinson, 2007). It appears that regardless of how diligent elite athletes may be at fostering identities outside of sport, for example completing a university degree with high honors, protection from experiencing psychological challenges and difficulty transitioning away from the lifestyle of the elite sport context is not guaranteed. This finding begs the question of what can change or what else can be done to improve athletes’ transitions out of sport, including characteristics of the elite sport context which potentially leave athletes vulnerable upon retirement. In the case of university athletes, not only are they transitioning out of the student
context into the workforce, but they are also faced with the loss of a context which has structured significant portions of their external and personal lives.

**Uncertainty about the status of relationships and support resources.** Finally, upon retirement and graduation Bryn faced some uncertainty about the status of her relationships developed within the sport context, including those with teammates, coaches, administrative, and physical support staff. Bryn was compelled to ask herself whether some of her friendships were authentic and enduring outside of the sport community, which Bryn felt she was no longer a part of after retiring:

…even with Amelia, our relationship is definitely strained. I try to reflect and it makes me think about whether we even hung out a lot when we were at school or did we just hang out when we were training? We were such, I mean we still are good friends, but I never see her and she literally lives across the street.

…with your friends, they are your friends and will always be your friends. But there are some teammates who you wouldn’t hang out with unless you are at training, but they are still your friends. So that it’s like, you don’t have that same relationship anymore so then you think is that a person who, if I see him around, would I approach casually? Do you know what I mean? If I saw them somewhere would I just go chat or like do I small talk?

When you’re on the outside, you feel like when you’re around you’re going to someone else’s thing. So with [sport] friends the relationship kind of changed. There are people who will always be my friends but I bring up Amelia here because I question sometimes
whether our friendship was strictly a [sport] thing because we don’t talk anymore, we
don’t hang out anymore.

In the context of sport retirement, other athletes have reported that friendships formed with
teammates tended to fade without the mutual bond that daily sport participation fostered
(Warriner & Lavallee, 2008). This space that was created between Bryn and her teammates is
contrasted with the daily accessibility she had to them when she was still an athlete:

It’s part of every day, you’re like okay I know I’m going to see this person and you don’t
miss them because you just saw them. Even if you just say ‘hey what’s up’ and then they
trained on the other side of the gym. One of my favourite parts of training was the
showers after because everybody would chat. I would be standing there feeling like I had
nowhere in the world to be, except of course I was going to be late for class. But that’s
what I miss.

Bryn also had to consider whether she could draw on the same degree of social support
from her coaches and the senior sport administrator as she had when she was a university athlete
and when it was part of their job descriptions to help her:

So right away [after breakup from Act 1] I was very close with the senior sport
administrator and she helped me. I met with her right away. Everyone was so supportive.
That’s another thing that makes it hard retiring; can I still use those resources? Now that
I’m not…and those are people, like of course I can still use those resources but it doesn’t
feel like…not like you don’t deserve them, but like that you would be asking for a favour
whereas when I was in it, that was the expectation – that those people were supposed to
help me because it is their job to help university-athletes.
As discussed in Act 1, Bryn indicated minimal hesitation to access services that were available to her when she was an athlete, and gave the impression that she felt confident and secure in her friendships on her team. When discussing her experience in Act 2, there is a perceptible change in the way Bryn viewed these relationships, characterized by uncertainty and doubt that was an additional blow to her confidence.

A final piece to consider in the area of supports is the change in accessibility to structural support services once Bryn retired and graduated. In Act 2 she experienced the most challenging psychological breakdown of her life, a period when all of the supports she had access to as a university athlete would have potentially been most beneficial. For example, even though she had a successful experience working with a counselor when she was coping with the relationship incident in Act 1, Bryn did not seek out these services during her breakdown because of the financial cost and barriers to access. Warriner and Lavallee (2008) found that the retired gymnasts they interviewed expressed frustration at the lack of access to resources that would have been useful for coping with the emotional challenges of the transition, such as advisors or counselors, which mirrors Bryn’s sentiments. Also similar to Bryn’s experience was these athletes’ drawing on their families for social support in the absence of other sources:

Because I didn’t have coverage anymore, from not being in school and being too old for my parents’ coverage, I needed to be bat shit crazy. They won’t give you a referral to a psychologist unless you’re super fucked up. Basically they’re telling me because I look healthy, I look strong and fit, so I’m fine…My mom is like ‘you need me to come with you because they look at you and automatically think you’re not sick. Because, and I wasn’t sick…well whatever you want to call it, I was sick, I didn’t feel good. Because
you don’t look sick they’re like well it can’t be serious, you don’t look frail. So he referred me to counselors and stuff that I would have to pay for.

Bryn also discussed feeling a lack of urgency to prioritize her mental health because she no longer needed to stay motivated to maintain her health to perform well in her sport, which was so salient for her in Act 1. The change in Bryn’s perception of her sport-related relationships and ability to access the same support services as when she was a university-athlete, are important influences when considering the context surrounding Bryn’s breakdown in Act 2. These were significant coping resources Bryn was accustomed to drawing on and which became much less accessible post-retirement and graduation. In this sense, the context of elite sport, and particularly university sport, can be seen as being quite sheltered; successful athletes, like Bryn, are somewhat hand-held and rarely left to cope with their problems independently, or with supports outside of the sport system. While this can be immensely beneficial during a university athletes’ career, and may be seen as necessary to craft and maintain elite athletes, it arguably sets them up to be stranded when they reach the end of their careers.

The Breakup: Insufficient Resources to Cope with Challenges

While the circumstances and influences related to Bryn’s retirement from sport and graduation from school contributed to a gradual decrease in her confidence and self-esteem, and threatened the identity which she had established as a successful university athlete, the deterioration of a serious romantic relationship approximately six months after retiring dealt the devastating blow which would lead Bryn to her darkest psychological state yet. Bryn makes use of a descriptive metaphor to illustrate for me how the break up made it very difficult to cope with the already challenging nature of her transition out of sport:
I think I would have been fine, you know if I started out here [indicates high level with her arm], maybe come to a little bit of a flat line for a while, but it was the confounding of the relationship issue that I think brought me too low. Then it took me too long to get back up. If I were to draw it I would have gone from up here [indicates high level again], maybe slightly lower and then gradually gotten back up to the high level. But because I went from so high up to so low, that gradual recovery seemed too long and it was just too long before good feelings. If I hadn’t gone so low I think I would have been okay.

I think it would have been challenging [the transition out of sport] but it was like, you know like knock you down too many pegs and it’s like oh my gosh do you even have motivation to keep going. You know, you were almost at the top of the hill and if you have to go a little bit back down because you forgot your mittens and then go back up, that’s alright. But if you have to go all the way back to the bottom and then turn right around it’s like hell no. By the time you get a little bit up you’re like I can’t, it’s too much.

As the metaphor reveals, Bryn was already in a vulnerable psychological state as a result of the influences outlined above which were intertwined with her transition out of sport and school. The betrayal and disappointment that she felt upon discovering that her partner had been unfaithful brought her to a low that took too long to recover from. In a way, all of her doubts about her self-worth and value that had been triggered by retiring and graduating and not being able to find another worthwhile occupation to pursue, felt like they were confirmed by this relationship failing. Upon reflecting back to when Bryn shared the story about the deterioration of this relationship with me, I was struck by how this version of herself contrasted so starkly with the confident, unshakeable woman that Bryn had presented so far. This was the only time Bryn
became emotional, crying over the pain and betrayal that this individual had inflicted. It was disarming at first, as I had become accustomed to the playful, lighthearted side of Bryn’s personality that had dominated our early conversations. In this moment I felt that Bryn’s emotions revealed her frustration at the extent to which this relationship had threatened her happiness, the core of her psychological well-being.

In the past, as we saw in Act 1, Bryn had been able to draw on the confidence she had built from her success in sport and academics to mend her damaged self-esteem during relationship challenges. In Act 2 however, these sources of confidence are no longer available:

I was always [doing the sport] and now that I don’t, it’s like when you’re upset what do you do? When you don’t feel good, what do you do?

The difficulty Bryn faced coping with this breakup allows for a revealing comparison to her Act 1 relationship when she saw herself as an exceptional and ‘awesome’ woman, as someone who was valued by her sport community which protected her against a severe plummet in self-esteem. Without these coping resources that she had access to as a university-athlete, Bryn became extremely vulnerable to the self-doubt that the end of this Act 2 relationship fostered in her:

I didn’t have that time [that she used to have while training] where I could just get out of my thoughts and I was constantly re-evaluating, okay what did he do? Why did he do that? Did he not love me? Is someone else better than me? You know, I didn’t have that time to shut those thoughts off. Even when I was sleeping I don’t think I was shutting them off. I think [still being in sport] would have helped me get over it and be like ‘oh well whatever, you’re an asshole and I’m still an amazing athlete.
It is in the wake of this breakup that Bryn began to consider whether returning to her sport would make her feel better and help her “get over” the pain of the failed relationship:

I had never been like ‘oh I wish I was still in [the sport]’, except when I broke up with my boyfriend and I was literally a disaster. I already wasn’t feeling good because I just wasn’t sure what I wanted to do, I felt so uncertain. I didn’t know what to do. And I was telling myself, you would have handled this better if it happened when you were still in sport…I think if I was still [in the sport] I wouldn’t have needed so much from him. Instead, you see your friends all the time, you’re fit and you look good…

…I should have cut it off when I felt better because now I feel like ass. I had said to him [ex-boyfriend] so many times if this happened when I was still an athlete I would have been fine, like I literally would have been fine…If I had been [in the sport still] my life would not have turned upside down like it did.

I had only dealt with a situation like this that one time before [referring to incident from Act 1] and that’s what kept me together. I talked to my mom and I was like maybe I should go back to [the sport] just to get over it.

I don’t know, I just think it was like too many things and too much uncertainty at once. That’s why I kept going back to it, I was like if I had [the sport], that’s my thing, I know that’s comfortable, that gives me pleasure. I’m passionate about it, I can focus all my attention into that. I would have been okay. You know what I mean? Maybe I wouldn’t have, but that’s what I wanted to be okay.
This consideration during Act 2 indicates that, although this research process prompted us to retrospectively identify specific characteristics of and influences within the sport context which were positive influences on Bryn’s mental health, Bryn was aware of the benefit that sport brought to her well-being at the time that she was experiencing her breakdown. Bryn described it as being relatively simple: if she returned to the context in which she felt so good, surely she would feel good again. Recognition of the specific influences embedded within the sport context that contributed to ‘feeling good’ came partly as a result of engaging in this research project:

**Bryn:** I still feel that way, like the thought of going back to [the sport] wasn’t that I needed to be amazing, although obviously I was going to have the same work ethic. I had only been out for like 6 months, I would have been fine. It was like I just wanted to be back in that headspace. Do you know what I mean? When you have a good competition and you put yourself back, you do all those things that you did before, to put yourself back in the that state of mind, to set yourself up well to do it again. That’s kind of where I was going with that. Not necessarily that I wanted to have all my friends around, I guess that comes with it but that wasn’t my thought. My thought was just go back to what you know and what you’ve always been good with and try again from there.

**Rachel:** To try to recreate that psychological state?

**Bryn:** Ya, but I guess…it is probably for the friendship and the schedule and all that stuff… but that’s not how I was thinking of it, but I’m sure that’s what would have made me feel good.

I thought just go back to the place where you felt good. So I was an awesome athlete, go back and be that because that’s going to feel better. Like is that the answer? I have no fucking idea.
I just felt like I needed to do what I know how to do…I thought maybe if I put myself back in a situation where I was good, then I’ll be able to figure out how to be good…In my head I was like okay let me put myself back in the situation. That’s what you learn as an athlete, to put yourself back in scenarios, like you come up with rituals, to recreate the situations when you performed well. Whether it works or not it’s psychological because I’m recreating the situations where I had success. So it was like I was spiraling out of control so let me put myself back to where I was good, and that was in [the sport].

Interestingly, however, Bryn never introduced this desire to her coaches and felt confident when we were discussing the point that they would have advised against it and told her that she did not need the sport to make her feel good again. Reflecting back and analyzing this time period to the extent that we did in our conversations, Bryn was confident too that returning to sport was not the answer, that it would have been a superficial fix to a deeper issue that she was grappling with: to be able to find value doing something else:

I don’t think my coaches would have thought it was a good idea, [my coach] would have been like ‘you don’t need this’. Because I didn’t, I really didn’t. Then I was rationally thinking about how it would only put me backwards because then I would have to do this all over again. I mean maybe this time without the breakup but like [doing this sport] eventually had to be done, like it’s either going to be that you choose to be done or you’re too old and too broken and too hurt to keep doing it, which is probably harder.

They [coaches] never would have said ‘yes, that’s the right thing for you to do’. They never would have said that because they knew when I stopped that I didn’t need to do it anymore. And like I know that now, but in that situation I was like maybe that’s what I
need to do. But when I stopped I was ready to stop. I don’t know. And obviously like you wonder if you made a mistake, I think everyone feels that way about some decision in their life.

Finding the solution to this issue and examining the ways in which reflecting on and sharing her experiences with me have shaped her understanding of how she has been able to slowly build her confidence back up and start to feel more like her old self will be the focus of Act 3.


Rachel: so it sounds like you’ve gotten to a place where instead of feeling like ‘what am I supposed to do now’, or ‘I don’t know what to do’, it’s like there are all of these options and I don’t have to do them now but I can explore them. Which is a much more optimistic or positive outlook.

Bryn: Ya and I feel good. I go to work and I come back and I’m like okay, I literally told someone today that I was sitting down with Rachel to do an interview and learn about...like it’s just that I’m getting as much out of it as you are because I like learning, kind of based on the questions you ask me, and diving deeper into my thoughts. Okay so how can I help somebody else who is feeling that way not feel like that way. And it’s not only about like, you’ve brought out things that I wouldn’t think to think...and that’s exciting to me, I’m like ‘well I’m going home to work on making sure athletes aren’t sad. And then I sit on my couch in my home and I’m just hanging out, like it feels good...It’s like ‘real life’. And that’s what we always used to say, ‘it’s going to be real life’. Real life is whatever you’re doing. Doing my sport was real life and that was fricken fantastic, and new life is fantastic too...During that time [during the breakdown] I felt like I was just
wasting time if I wasn’t progressing towards something. And now I literally don’t care. If I’m living here and traveling and having a good time and working at my work and doing everything I am now, and have gotten ten thousand more experiences, whether it’s going places, doing things, meeting people, 6 years from now I’m cool with that. And I wasn’t before, because no I’ve learned that it’s not what you do, it’s how you feel.

The most recent chapter of Bryn’s life was dominated by a process of recovery and rediscovery of her self-worth, sense of self, goals, and expectations for the future. While this process was initiated by a number of specific behaviours and circumstances in Bryn’s life, I suggest that it has ripened and become more obvious to Bryn as a result of engaging in this research process. As we can see in the quotation that opened this Act, Bryn has internalized and taken ownership over the purpose of her participation in this study. Developing knowledge that would help athletes cope with the psychological challenges of retiring from sport was not an aim of the inquiry that I stated at the outset, rather it is a purpose that has developed as the direction of the inquiry has taken shape over the course of my and Bryn’s examination of her life. By stating the value she perceives she brings to our journey of examining the nature of the role of sport in her experiences with mental health issues, Bryn demonstrates how the process of doing so has brought clarity to her understanding of her own experiences. To me, these ways in which the research process has affected Bryn signify that the philosophy of mutual meaning-making, of developing a partnership and reducing the power imbalance between researcher and participant which is so integral to the version of life history and narrative research that I sought to foster, was at least somewhat achieved.

There are a few specific influences which have contributed to Bryn’s recovery and which are highly related to the themes outlined in both Acts 1 and 2. Bryn’s recovery has involved
coming to terms with and, in some instances, re-framing the challenges that the themes from Act 2 created. The process also involved Bryn beginning to draw on some of the resources and lessons from when she was an elite athlete in Act 1. For example, in terms of her retirement decision, Bryn feels confident now that the timing of her transition out of sport was right for her and although she considered returning to sport when she was trying to cope with her breakup in Act 2, her view now is that this would have been a regression rather than a step forward. Another example involves Bryn’s adjustment to the lack of structure and progression of post-retirement and graduation life. It was not until her retirement and graduation and the loss of these characteristics of the sport context that Bryn realized how much she had thrived with them. Therefore, she began to feel better when she was able to foster these lifestyle characteristics within her new context. For example, Bryn described how goal-setting around being able to afford travel brought value to her initially unsatisfying job:

I feel better with these little goals, basically as soon as I booked that trip. It was a big cost but it almost gave me a new motivation to focus now and work and not buy so many meals out and then I can go on the trip and be free and have fun. Just like [in sport] you work work work and then you rest and then you go and compete and you have fun.

As Bryn has gained more seniority and responsibility at her job she has also been able to associate pride and achievement with the position in a similar way as she did with her sport success, which was strongly associated with the external validation she received:

Rachel: Do you feel like at this point that kind of structure and the way you have started to organize your life, does that give you the same satisfaction as [the sport] did?
Bryn: I think it’s starting to. Especially because now, with my work, if people have questions they have to come talk to me. So now I’m this integral part of them getting what they want. I don’t know if that’s an innate human desire, to be the person who fulfills what people want, even if it’s in a very small realm. Where I work is surrounded by very accomplished businesses and I meet all these concierges who deal with high profile clients and they’re like ‘shit look what you’re doing when you’re only in your twenties’. So I’m starting to get that same feeling. I mean I don’t think my job is particularly impressive, but other people do, and that was the same pattern as when I started [my sport]. I didn’t think winning some of the races was a big deal but my school made a big deal about it and then of course I was like oh this is a big deal.

Adjusting to the physical changes to her body which accompanied no longer training and competing at an elite level of sport took time, however Bryn has found new ways to push her body to be fit and strong which has contributed to her developing an acceptable comfort level with her body regardless of her size or weight:

I told myself in two weeks I’m going to have abs and the last two weeks I haven’t trained harder in a long time. Actually yesterday I think I did one of the hardest workouts of my entire life, I almost blacked out, and I loved it…Also just recently I did a fitness test and I destroyed the fitness test. People were like ‘oh my god you’re so fit’, and obviously they have no idea what kind of athlete I am but man it felt good. I felt the same as when I was [in my sport], I was like ya I’ve trained fucking hard and I’m not surprised by my result.

A crucial component of Bryn being able to rediscover her sense of self has been being able to slowly develop a new community where she lives now, which has eased some of the anonymity
and loneliness that Bryn felt as a result of moving away from campus. Even as we sat having one of our conversations over coffee in the lobby of her apartment building, Bryn recognized and chatted briefly with two or three individuals as they passed through. Obviously the semi-public location that Bryn had chosen for our meeting that day exposed us to these minor interruptions in the flow of our conversation, however the small window it provided into Bryn’s social world was invaluable for my understanding of how this Act 2 theme has evolved.

A significant phenomenon that many of these examples indicates, is the process of re-discovering her self-worth and finding new sources of confidence which, in turn, has allowed her to redefine an identity outside of university sport:

**Bryn:** My mom had been saying this but I couldn’t really feel it until now. I can be doing whatever, as long as I have enough money and all this, I’m fine. Because I used to think oh my gosh, you went from being a star to being a nobody. But it’s like no you didn’t! It’s so fantastic, one of my old teammates who is a very very successful athlete, she thinks I’m the best thing that ever happened to the world, and I’m like get a load of who you are! And yet she’s in awe of me, which is very special. I’m the exact same person, I just do something different, so it’s still who I am just not what I do.

**Rachel:** which just goes to show that people like that are impressed with just the way you are, the way you carry yourself, not specifically what you achieve.

**Bryn:** Ya! And I think that goes for everybody, like I was never only friends with teammates because of how fast they were. It really doesn’t make a difference…But when you leave you forget that.
All these things that we talked about and my interpretation and like re-going through all the feelings, if I could have known, or told myself all the things I do know, and actually listened to them, I would have been so much better off. I mean we kind of touched on it today, you are not what you do. That’s not who you are. I think that’s the biggest help in understanding that, that it’s okay not to be [an athlete] anymore because I’m still all the other things. Sure people admire you because you’re good at something, but they love you and find value in you as a person based on your character.

Whereas during Act 2 when Bryn was struggling to find a pursuit into which she could apply her skills and drive for achievement, reflecting on her experience has prompted her to see more potential in her skills being transferable:

**Bryn:** okay here we go [referring to section in transcript], I said I still had the same mind, the same hunger for success. It’s almost like reading it, it’s like ‘ya you do!’ Hell ya you do’.

**Rachel:** Ya it’s like you still had all those things but not necessarily something that you felt like directing it toward, or like not knowing what you wanted to direct it toward.

**Bryn:** Ya! Well it’s like, I mean it goes back to if you’re an [athlete] and all you can do is [your sport], then it’s like well what the fuck am I going to do, like all I can do is [my sport], but that’s not really anybody. For me, I had other skills. I have all these other skills but I can’t use them. These are my skill sets and what am I doing with them? Nothing. I don’t know, you could even take it further. If you’re a doctor and like you can’t find a job as a doctor, how shitty do you feel? You want to be all those things that you have, use those skills, but there’s no thing for you to do and use them. I mean and I guess I’m having a revelation and I guess that’s why it’s so hard…It’s like well what do
you do once you’re done? Those specific skills that you have, that you are very very skilled at, what do you apply them to? Luckily I’m blessed enough that the skills I do have can be applied to multiple things, but not everybody is that lucky. I’m like oh I had a hard time, but in comparison to how hard of a time other people have, maybe I didn’t have that hard of a time. I don’t know. You would know more about that.

Ultimately, it was time and patience with herself that allowed Bryn to adjust to the transition out of sport and nurture new interests and sources of confidence and pride:

**Bryn:** Ya, like it’s a transition. I still have the same mind, I still have the same hunger for success, I still have the same work ethic, I still have all that stuff.

**Rachel:** You just have to find something else to put it into.

**Bryn:** to direct it into, and to get a perspective on sort of.

This rediscovery of her value and ‘awesomeness’ was undoubtedly facilitated by the enduring social support that Bryn received from family, friends, and her past coaches throughout this process:

I can talk to [my coaches] exactly the same as when I was an athlete. I don’t feel like I’m imposing to ask them for advice because it’s not their job now that I’m not their athlete. I don’t feel that way at all. They helped me a lot. It was just so nice that they were…I mean all it takes is someone to say ‘I’m there for you’ and it’s like ‘okay, I’m better’. [Coach’s name] was so good, we had a lot of sit-down chats.

I’m super lucky, which is also why I didn’t expect to not feel amazing when I retired because I’m super lucky that my parents are awesome. They never made me feel like ‘oh
you’re not an athlete now, what’s going to be your thing?’ I retired and they were like ‘oh man, wait until the world gets a load of you’.

Not only did they provide emotional support in the forms of empathy, understanding, and acceptance when Bryn was struggling with her adjustment disorder, they also provided advice that prompted her to engage in help-seeking behaviours and to find new ways to see value in her current context:

So he’s [coach] like okay well you need to make $500 and then you book this trip and that’s what your goal is, making it to $500. So now you’re not working because you’re a coach, you’re working because you want to be a vacationer, or you want to go on this vacation and say that you traveled there. I don’t know if that’s the advice he gives everybody or because he knew that’s what I needed, but it is what I needed.

I guess all these people, the way they help you transition is by not doing anything differently. To them there’s no transition, like one of my coaches will talk to me about anything whenever I need to talk to her, just the same as she would if I was still an athlete.

It is difficult to imagine how Bryn’s recovery would have been possible without the network of support of which she is so appreciative. The importance of social support in athletes’ transitions out of sport is a concept that is largely accepted in athlete retirement literature (Park, Lavallee, & Tod, 2013), and it is reiterated once more by Bryn’s experience. In addition, the male athletes in Doherty and colleagues (2016) study recognized the critical importance of social support in their recovery from depression. Of note is the maintenance of social support from Bryn’s coaches
post-retirement, which has received little attention in retirement literature despite its potential to ease athletes’ transitions out of sport (Park et al., 2013).

Bryn’s recovery process is still ongoing, as evidenced by the fact that the storytelling Bryn engaged in for this study continued to shape her perspective of her experiences. In this way, Bryn’s storytelling process reiterates Smith & Sparkes’ (2009a) description of narratives as both personal and social. A repercussion of engaging in the construction of stories with me was our ability to make meaning out of Bryn’s past and thus formulate expectations about the future by situating her experiences within the social and cultural context of elite sport participation (Atkinson, Coffey, & Delamont, 2003). Frank (1995) has also indicated the positive impact of stories on individuals’ sense of self, their potential to repair damage from threats to their views of reality. Along these lines, Lavallee and colleagues (1997) conducted a study examining the effect of autobiographical account making on 15 former elite athletes’ adjustment and ability to cope with the emotional distress they faced post-retirement. These researchers found that amount of account-making activity directly related to successful coping. A presented explanation was that the opportunity to confide and express one’s feelings about retirement contributed to a significant reduction in negative affect (Lavallee et al., 1997). I argue that engaging in a process of autobiographical account making, which was the storytelling component of this inquiry, prompted Bryn to discover new narratives through which to understand her experiences and has contributed to her recovery and rediscovery of her personal value as being less contingent on sport performance. Based on reflections she shared with me when reviewing the transcripts of our conversations, engaging in meaning-making of her experiences has been a positive and empowering exercise. For example, when reviewing part of our discussion about her breakup in
Act 2 Bryn stated: “That’s awesome, that’s exactly how I felt. It’s so good to read that because you get yourself, I got myself.” Similarly, in a later conversation Bryn stated:

I’m kind of impressed, reading through those transcripts and taking the time to think about stuff, it’s almost like an ego-boost. You’re like ‘okay you are good at stuff, and you do have your shit together. So what if you have a little hiccup. I know all the right things to do, and I have all the tools it takes to be awesome at whatever it is I want to be awesome at. I don’t know if I forgot that for a little bit, I guess I did. Or just wasn’t sure that those were real things, and I thought maybe those were just [sport-related] things. As an athlete you don’t remember that all the things that got you good at athletics can make you good at something else, and it doesn’t have to be another sport for it to be just as good.

In addition, looking back at the stories and experiences she shared with me allowed Bryn to recognize that some of the expectations she had had for herself to be able to achieve exceptionality in a new field so quickly after retiring from sport were unrealistic and psychologically harmful:

You can’t look 6 month at a time. If you did, like if I had done that [in my sport] I can look back and realize that over 6 years I only improved my times by a few seconds. It took me 6 years to improve a few seconds. Are you kidding me? You can’t think of it like that. If you do, or even if you make the timeframe smaller, like I think in the last 3 years I was training I improved my time by .6 of a second. You know, 3 years to drop .6 of a second. But you’re happy as shit when you drop that .6. You know, I didn’t realize that, I never really thought about it. I mean I kind of thought about it because [my coach] had
pointed this out, but it’s just that you need to think more short-term sometimes than getting stressed out by the big picture.

…Often, if you are a good athlete you have this skillset that might be above and beyond a lot of other people: commitment, determination, drive, and perseverance. And then it gets lost because you’re so messed up that you don’t have your thing anymore…I haven’t lost those skills, I’m just still redirecting them and there’s no rush.

Bryn acknowledged that telling me the stories about her experiences played a key role in shaping her understanding of the role of sport in her experience with mental health issues. In this sense, it is clear that the process of mutual meaning-making that Bryn and I engaged in influenced her perspective on her past experiences. Bryn demonstrated this perspective in the following dialogue:

**Rachel:** So it really sounds like to me that sport was a coping mechanism for so many of the reasons we discussed, like as a distraction, source of confidence, the relationships that you had that made you feel good, the validation from performing well, there were so many factors

**Bryn:** Right! It’s way more complex than I thought, and as I say it, it sounds like I had it figured, but a lot of it I’m figuring out as I say it…It’s like a hindsight thing, like now I’m thinking about it and as I talk about it I’m like okay I had that escape. When I was really having a hard time I tried to pinpoint what it was about [the sport].

I came away from our final discussion with the impression that although Bryn has come a long way from the depth of psychological distress she experienced in Act 2, I do not believe she has entirely convinced herself that the road ahead is clear or that it would even be realistic to
be that optimistic about her future. However, she has come to terms with her current, post-sport context and thinks about her future in a much less anxiety-ridden way:

If I could have told myself the decisions you make today do not mean your life is going over here, or your life is going over there. Where you’re meant to be…I mean I’m faithful so like I believe my life Is already planned for me. I don’t need to stress about where I’m going to end up in my life. I know now everyone thinks the same way but there will be nothing that is ever put before me that I can’t handle, or it wouldn’t be put before me. If it was supposed to kill me it would.

You know if I could have told myself that, or if I could tell someone else that, I think that would be helpful, because it really doesn’t feel good, like it felt horrible. I’ve never felt so horrible in my life. But it’s like you get out of it. And am I never going to feel that horrible in my life again? Who knows? I bet people feel the same when they decide to change career paths…change is uncomfortable, but it’s like you’re still friends with all those people and the people who are important to me are still very close to me. I would argue that [my coaches] and I are maybe closer now.

That being said, I also believe that if Bryn was still preoccupied with her life as an elite athlete and was convinced that those were her best years rather than the experiences and opportunities that await in her future, it would have been much more difficult for her to revisit her past and find value in doing so. While there were undoubtedly memories that Bryn shared which caused emotional responses, revealing the psychological pain associated with them, Bryn views her experience with transitioning out of sport as culminating in a positive and helpful message.
Drawing on the work of Frank (2010), Smith (2016) advises that any conclusion of a dialogical narrative analysis must be provisional, that a research study coming to its end should not imply that a conclusion to participants’ stories can be articulated as they are likely still alive and continuing to craft and tell new stories. Therefore, I wholeheartedly acknowledge that while I can describe the process of Bryn’s recovery based on the small glimpse of it to which I was exposed, it will undoubtedly continue to unfold. It is most appropriate to close out this report with Bryn’s voice, in this quotation that captures how she viewed her elite sport participation in our final conversation and also the true complexity of the role of this participation in her psychological well-being:

[My university sport experience] was absolutely phenomenal, I don’t regret any of it. Why would I? I mean, it probably played a role in why I felt so shitty. I lost something that was a big deal to me. I say lost it, but I mean I didn’t lose it, I just had this awesome thing that is done now, without having the new thing that’s also going to be awesome getting going…I’ve said this so many times because I’m like one of those people who doesn’t really want a relationship anymore because it was so painful, and I was like there was no happiness that I felt in my last relationship that is further from baseline above than the sadness was below the baseline. It doesn’t equate. If you add the positive to the negative, you’re still in the negative. But again, one of those things that I never thought of until now, like that horrible feeling and everything that I went through, was worth it. It was worth it for how awesome of an experience I had, that positive does outweigh how negative it was. That positive for five full years cost me whatever, eight months of feeling like ass? That was worth it, that was definitely worth it. And again I never thought of that until right now. Definitely worth it.
CHAPTER 5

Implications and Conclusions

The purpose of this inquiry was to explore the role that elite sport participation may or may not play in an athlete’s experience with depression from a life history perspective. A dialogical narrative analysis was used to examine Bryn’s experiences with elite and university sport participation and mental health issues that arose shortly after her transition out of sport and university. The in-depth consideration of Bryn’s sport, academic, social, and personal worlds allowed Bryn and I to shed light on the complex and multi-dimensional relationship between the elite sport context and her experience of an adjustment disorder with mixed moods, anxiety and depression. The findings and interpretations chapter indicates that sport played a role in the fluctuations of Bryn’s psychological well-being over the course of her sport participation and since her retirement. The three Acts outlined represent a building up, breaking down, and rebuilding process that Bryn underwent in terms of identity, sense of self, and mental health, all precipitated by her participation in elite and university sport. Act 1 provides a vivid account of how aspects of the sport context can be extremely beneficial for an athlete coping with psychological distress and how it can be a powerful platform from which to develop a positive sense of self. Act 2 represents just as strong of a case for the challenges that arise when the ability to cope has become dependent on this platform. In turn, Act 3 teaches us that after a period of turmoil and significant adjustment, an athlete may be able to rediscover pieces of her identity and redefine others. Bryn’s story demonstrates that while an athlete’s mental health may not be contingent upon his or her sport experiences, it may be considerably influenced by them, potentially both positively and negatively. Thus, a contradictory notion of potential relationships between sport and mental health emerges from taking a holistic view of the three Acts. Sport
clearly presents opportunities to develop powerful resilience to psychological challenges and to foster a strong sense of self in athletes. Concurrently, however, there is a degree of vulnerability that results from experiences of thriving being wedded to participation in a pursuit that inevitably must come to an end. The integration of sport retirement literature may be helpful in understanding this vulnerability that I contend the elite sport context created for Bryn upon her transition out of this environment.

Douglas and Carless (2009) claim that researching sport retirement can be a challenging endeavour given the complex and often highly individual nature of the transition. These researchers suggest that embracing “alternative methodologies that allow idiosyncrasies to be identified and understood in the context of an individual life course and career span” may be highly informative when trying to understand how athletes respond to and cope with this experience (Douglas & Carless, 2009, p. 214). The single-subject life history design of the current inquiry, paired with a dialogical narrative analysis, supports this proposition. When considering the idiosyncratic nature of sport retirement experiences, Wylleman and colleagues (2004) also urge researchers not to underestimate the potential influence of specific contextual issues and key life events. This consideration is particularly relevant to Bryn’s story given the catastrophic interaction between her transition out of sport and her breakup in Act 2. Bryn’s mental health difficulties experienced shortly after her retirement and graduation were exacerbated by the blow that the deterioration of the intimate relationship had on her self-esteem. Thus, without the exploration into Bryn’s social context that the flexibility of this research methodology allowed, a holistic understanding of her retirement experience would have been limited.
If we consider the influences connected with the transition out of sport and university discussed in Act 2 and how they impacted Bryn’s mental health, we can relate them to the typical characteristics of a difficult retirement identified in previous literature. A number of variables have been identified that increase the likelihood that an athlete will have a difficult transition out of sport, namely lack of control over the retirement decision and process, lack of social support, and a strong athletic identity (Kerr & Dacychyn, 2000; Lavallee et al., 1997; Lavallee & Robinson 2007; Torregrosa et al., 2015). On the one hand, there are components of Bryn’s experience that do not fit this typical profile, while others are highly consistent with it. First, Bryn had control over her retirement decision. Her performance was still improving, she did not have to retire as a result of injury or illness, and she left her sport with overwhelmingly positive memories and associations. In addition, although Bryn expressed interest in returning to her sport to help cope with her breakup in Act 2, aside from this particular trigger, she did not convey a sense of regret around her retirement decision once it was made or of being preoccupied with missing the sport itself. This situation is unlike many athletes who experience psychological distress post-retirement and who have been forced out of their sport as a result of injury, illness, or age (Torregrosa et al., 2015). Second, Bryn experienced no shortage of social support during her retirement process. Many of the social support relationships that Bryn had developed within the sport context remained intact once she retired. For example, Bryn’s coaches remained involved in Bryn’s life after she retired from sport, providing emotional support and advice when she was experiencing psychological challenges in Act 2. This continued support was obviously critical to Bryn’s eventual recovery and represents one of the few resources from the sport context that was still available after Bryn retired and graduated. The importance of continued social support from coaches in easing athletes’ transitions out of sport has, surprisingly, rarely
been addressed in the relevant literature and represents a potentially critical area for future research (Park et al., 2013). Bryn also had the consistent support of her family members, who she readily relied on during times of psychological distress. In addition, Bryn had the support of her family to retire from sport and she felt confident that her family believed in her ability to achieve in whatever she chose to direct her energy toward next. Not only was social support available to Bryn, it was also effective; she expressed that it was a critical coping resource and contributor to her ongoing recovery process.

A strong athletic identity as a predictor of a challenging retirement transition is an area in which understanding Bryn’s transition experience becomes more complex. The connection between individuals identifying strongly with their role as an athlete and experiencing identity-related challenges post-retirement has long been established in sport retirement literature (Brewer et al., 1993; Kerr & Dacyshyn, 2000; Lavallee & Robinson, 2007; Lavallee et al., 1997; Sparkes, 1998). Doherty and colleagues (2016) reported that many of their elite male athlete participants, who had not yet faced the challenge of retirement, “understood their depression as a consequence of their identity being intertwined to their performance as an athlete” (p. 8).

Lavallee and colleagues (1997) contend that a strong athletic identity can develop as athletes devote greater portions of their lives to sport, thus limiting extension of the self-concept beyond the role of the athlete. From an outsider’s perspective, the significant degree to which sport contributed to Bryn’s positive sense of self in Act 1, paired with the development of an adjustment disorder coinciding with retirement and graduation, certainly seem to indicate the presence and subsequent destruction of a strong athletic identity. From my understanding of Bryn’s perspective, however, she did not view this as the case when examining her experience. While an athlete, Bryn also focused on her school work and achieved academic success, thus
opening doors to career pursuits outside of sport. Bryn was purposeful about prioritizing school to the same degree as her athletic achievement. She even highlighted her concern for her teammates whom she saw developing narrow athletic identities and did not consider herself as falling victim to the limitations this could place on life after sport. Therefore, I believe the development of a strong athletic identity occurred outside of Bryn’s direct awareness which speaks to a partially subconscious nature of identity development (Petriglieri & Stein, 2012). In this sense, the challenges Bryn faced after sport retirement and graduation emphasize the powerful role that athletic identity plays in mediating the connection between retirement and mental health issues. I suggest that, for Bryn, the limitations imposed on her sense of self from her strong athletic identity were powerful enough to contribute to her development of an adjustment disorder despite the protection conferred by control over her retirement decision and effective social support. Bryn evidently had some of the tools and supports in place which the retirement literature has found to be beneficial for athletes facing transitions out of sport. However, these protective resources were not strong enough to counteract the damage done by the absence of a source of confidence and an inability to satiate her desire for exceptionality that a self-concept driven by elite sport participation created room for. Therefore, the context surrounding Bryn’s retirement from sport would not necessarily predict a significantly challenging transition; however, the depth with which the methods used in this study allowed Bryn and me to examine her retirement experience reveals that there were indeed a number of influences embedded in the sport context which contributed to her mental health issues upon retirement.

A significant implication of this inquiry, which was alluded to throughout the interpretation and discussion section, is the identification of the state of vulnerability that
participation and success in elite, university sport created upon the cessation of access to the protective resources that this context provided. Many aspects of Bryn’s experience with sport and mental health issues speak to this conclusion. In Act 1, we saw how the sport context facilitated the development of a strong and confident sense of self and made many protective and coping resources available to Bryn when she faced threats to her psychological well-being. In short, the considerable success that Bryn experienced, the performance-driven motivation to maintain her physical and mental health, and the easily accessible structural resources and social support that this context afforded contributed significantly to Bryn’s resilience when threats to her happiness arose from other life domains. This situation sounds ideal for an elite athlete, and in fact, a significant priority in the structure of many elite and university sport environments is to foster and maintain successful and healthy athletes through the provision of support resources that are integrated into the sport context (Dijkstra, Pollock, Chakraverty, & Alonso, 2014; Etzel, Watson, Visek, & Maniar, 2006; Sudano & Collins, 2017). This leads us to question whether this integrated support structure encourages dependence upon the resource channels specific to the university-athlete world, which in turn leaves athletes who find themselves facing challenges post-retirement without access to such resources. This question is answered in the context of Bryn’s story simply by considering Act 2 of her story.

Much of the state of vulnerability that I contend elite and university sport participation created with respect to Bryn’s mental health can be understood in the context of prevalent narratives that have been identified in the literature. First of all, the performance narrative is a storyline that is prevalent in elite sport contexts and implies that winning and performance results should be the singular priority of an athlete’s life, and the priority with which his or her behaviours and motivations should be aligned (Douglas & Carless, 2009). Once this perspective
becomes the norm for athletes, it is not surprising that they have difficulty finding direction and satisfaction of their desire to achieve when they no longer find themselves driven by the demands of elite sport. Many of Bryn’s experiences from Act 1 reveal the degree to which her sense of self and motivations reflected the performance narrative. For example, it is clear from the stories Bryn shared about her health-related behaviours before and after sport retirement, that she was primarily motivated to maintain her physical and mental health to produce successful athletic performances. Bryn developed a strong association between being healthy and maintaining her success in sport, which in turn contributed to her psychological health because she used her sport success to inform her sense of self. Arguably, during this time Bryn had less room to develop intrinsic motivations toward actively maintaining her physical and mental well-being. Subsequently, once sport performance was no longer a motivator, we can see in Act 2 that her drive to manage and maintain her health was much less pronounced and urgent.

A second example of the influence of the performance narrative in Bryn’s life was how strongly her sense of self was dependent upon her successes, recognition, and external validation derived from her sport participation in Act 1. This development of a strong athletic identity made Bryn extremely vulnerable to experiencing an identity crisis due to “narrative wreckage” upon her sport retirement and graduation from school. Frank (1995) describes narrative wreckage as a consequence of a person’s experiences or context no longer fitting the storyline of available or dominant narrative types. In addition, Douglas and Carless (2009) suggest that when an athlete’s life experiences become misaligned with the performance narrative, as would likely occur upon retirement, his or her mental well-being and sense of self may suffer. This certainly contributes to an understanding of the role of sport participation in Bryn’s experience with mental health issues. Upon experiencing this state of wreckage, Bryn was vulnerable to assaults on her
weakened self-esteem, such as the break up in Act 2, and as a result experienced significant psychological distress, diagnosed as an adjustment disorder. These two examples demonstrate how adherence to a singular narrative in which one’s motivations and sense of self develop, which is a repercussion of the dominance of the performance narrative in elite sport, can leave an athlete with minimal alternative narrative resources to draw upon when access to the performance narrative is removed.

Given that the performance narrative dictates winning and success as the number one priority in the world of elite sport, it is not surprising that sport environments are built with this in mind. As mentioned, many elite and university sport contexts make support services and resources available and easily accessible to successful athletes. With the focus on optimizing well-being in the sport context, researchers tend to recommend heightened awareness by athletic departments of the special needs of athletes, special referral systems and resource access for athletes suffering from physical injury or psychological challenges, and enhanced education and preventative programs to assist athletes with academic demands or career planning (Etzel et al., 2006). Free, on-campus physical and mental healthcare is often provided to university students, which Bryn took advantage of when she was a student-athlete. Furthermore, it is recommended that elite and student athletes have access to integrated support teams in which mental and medical health services are integrated into athlete resources, on-site, and included in athletic department budgets to manage their health and performance (Dijkstra et al., 2014, Sudano & Collins, 2017). In a document created by the American National Collegiate Athletics Association (NCAA) regarding mental health best practices for student-athletes, the authors also recommend a collaborative process for mental health management in which healthcare is easily accessible and within or close to athletic departments (NCAA Sport Sciences and the NCAA, 2016).
Providing easy access to structural resources and social support to maintain the physical and psychological well-being of elite student athletes, as in Bryn’s case, was very effective at optimizing her winning potential. Even though Bryn felt that her particular sport environment and the individuals who fostered it, such as her coaches and sport administrators, valued her well-being and personal development outside of sport, it is very difficult to distinguish purely valuing well-being versus valuing well-being for the sake of maintaining performance. However, the ongoing support from her coaches after Bryn retired speaks to their genuine concern for her happiness and psychological well-being. Regardless of intent, the hand-fed nature of the support systems surrounding successful student-athletes left Bryn with little opportunity to collect and foster resource networks that were not contingent on her elite-athlete status and thus left her unprepared to cope with psychological distress after retirement with the same level of success as when she was an athlete. While the integrated, structurally and financially accessible design of many elite and university sport healthcare resources appears to be an effective way to manage athlete well-being, it may leave athletes less able to overcome barriers to such resources faced by the general population upon retirement (Eisenberg, Golberstein, Ezra, & Gollust, 2007; Sareen et al., 2007).

The culminating message of this inquiry therefore, is the potential of elite sport participation to contribute to an optimal mental health status or thriving as well as its potential to set the stage for vulnerability upon retirement. The conclusions stemming from this examination and analysis of Bryn’s story brings significant value to the burgeoning field of sport psychiatry which seeks to apply psychiatric knowledge to the world of sports (Begel, 1992). As Reardon and Factor (2010) suggested, athletes may participate in sport to cope with mental health issues, their mental health issues may be precipitated or worsened by sport participation, or their mental
health issues may not be associated with sport at all. Bryn’s case demonstrates that all of these scenarios may be relevant in an athlete’s experience with mental health issues. The current inquiry has produced a rich and detailed description and interpretation of specific influences related to the elite and university sport contexts and provides evidence for Reardon and Factor’s (2010) statement.

I must note that I developed these interpretations from my perspective as an outsider looking in on Bryn’s experiences and have tried to understand the role that her elite sport participation did or did not play in her experience with mental health issues. The state of vulnerability that I have presented as a repercussion of Bryn’s development of a strong athletic identity, and the ease of access she had to support and resources that was contingent upon her membership in the elite university sport context, is certainly not the only or most significant role that the sport context played in Bryn’s life. Stating it as so would not do justice to the true complexity of the relationship between sport and Bryn’s mental health. Nor would it appropriately acknowledge Bryn’s stated perspective at the conclusion of our meetings that this vulnerability and the challenges she faced and still faces transitioning out of sport were all worth it for the enjoyment she experienced as an elite and university athlete.

Applied Implications and Future Directions

The above analyses and interpretations of Bryn’s story leave us with the consideration of what an alternative elite sport environment could look like, more specifically, one that does not inherently produce a state of vulnerability for some athletes upon retirement. As a caveat, the intent of this interpretation is not to suggest that elite and student athletes are not unique populations with special needs and that all academic and health-related support services available for these individuals be abandoned and athletes left to independently cope with their mental and
physical health concerns. The purpose is simply to shed light on the potential repercussions of creating an environment where special and exclusive measures are taken to prioritize health and performance during an athlete’s career without due consideration of the bubble this might create around an athlete and its’ effects on some individuals’ abilities to effectively cope with challenges upon retirement when the bubble dissolves. Perhaps a worthwhile strategy to reduce the effect of this bubble would be for coaches and sport administrators to encourage athletes to build networks and establish relationships with support providers who may be accessed once these athletes retire. For example, when Bryn experienced emotional distress over the traumatic relationship in Act 1, she was quickly connected with a mental health counselor at her university’s health center. Although this coping strategy was effective at the time, this resource was no longer available to Bryn once she graduated. Another area of consideration is the role that Bryn’s coaches and a senior sport administrator took on in providing considerable social support when Bryn faced threats to her well-being in domains outside of sport. Fortunately, Bryn’s relationship with her coaches was such that this support continued after her retirement; however, this may not be the case for all athletes who face significant psychological challenges upon the cessation of their sport careers. Therefore, coaches and sport administrators should encourage the development of relationships outside of the sport context that may be more likely to persevere past the transition out of sport.

In terms of the vulnerability that the development of a strong athletic identity can create for elite and university athletes upon retirement, it may be worthwhile for athletes, coaches, and sport administrators to engage in proactive strategies to reduce the likelihood of an athlete experiencing an identity crisis and narrative wreckage (Frank, 1995). In a longitudinal prospective study examining university athletes’ retirement experiences, Lally (2007) conducted
interviews with eight athletes pre- and post- sport retirement and found that these athletes proactively decreased their investment in their athletic identities as their transition out of sport approached. The athletes purposefully explored other facets of their identities by pursuing activities such as graduate studies and full-time employment immediately upon retirement and felt that these safeguards protected them from experiencing a major loss of identity. Thus, engaging in these proactive strategies may be highly protective for athletes who have a sense of when they will retire from sport, which was the case for Bryn. This concept was suggested over two decades ago by Petitpas, Brewer, and Van Raalte (1996) who emphasized the necessity for pre-retirement interventions to help prepare student-athletes for this transition. Coaches and sport administrators should encourage athletes to develop realistic and satisfactory contingency plans to implement once the timing of their retirement has been established.

Another area in which coaches, sport administrators, and academic administrators in the university context, may be implicated in an athlete’s retirement experience, and thus an area where suggestions can be extrapolated from the analysis of Bryn’s account, is the degree to which these individuals support athletes’ autonomous decision-making. Stephan, Bilard, Ninot, and Delignieres (2003) contend that autonomy and control over one’s life are critical in preparing for the transition out of sport and are also positively associated with subjective well-being (Lang & Heckhausen, 2001). These researchers suggest that athletes would benefit from developing more autonomy related to decision-making during their sport careers to ease the transition into a post-sport life in which the imposed control and structure of the sport environment is no longer salient (Stephan et al., 2003). As we learned in Act 1 of Bryn’s story, her coaches told her not to live with a certain individual because of their concern over the negative influence this person would have on Bryn’s elite sport lifestyle. On another occasion,
Bryn’s coaches strongly encouraged her to travel with her team to a competition, implying the distance and distraction would help her cope with her traumatic breakup in Act 1. Bryn accepted her coaches’ decisions pertaining to her life because her relationship with them was such that she trusted their judgement unquestioningly. This aspect of the sport context has been reported in the past with retired athletes retrospectively reporting that their coaches and/or sport associations had been in control of their lives, making decisions such as when and where to train and compete, and making the necessary travel and accommodation arrangements for them (Kerr & Dacyshyn, 2000; Werthner & Orlick, 1986). This lack of autonomy in decision-making in athletes may be compounded in the university sport context where there are often mandatory study hall sessions, structured channels through which to eliminate academic conflicts, and rules which stipulate acceptable student-athlete behaviour (Carodine, Almond, & Gratto, 2001). Given that these external sources of control likely do not extend beyond elite and university sport retirement, and that Klaczynski and colleagues (2001) suggest that decision-making opportunities are an important avenue to develop autonomy, it is advisable that coaches, sport and academic administrators engage elite and student athletes in reciprocal decision-making processes related to the athletes’ lives. While there is certainly value in these individuals providing informational support and advice during an athlete’s career, they should encourage athletes to be equal contributors in important decision-making processes. This strategy may allow athletes to develop skills and knowledge to manage sport related and non-sport related life situations and convey an enhanced sense of control and autonomy during an athlete’s sport career which may translate to post-sport life. In terms of suggestions for future research in this area, there may be value in examining the influence of different coaching styles, for example autonomous-supportive versus controlling, on athletes’ development of autonomous decision-making and its’ relationship with
transition challenges and athlete mental health (Bartholomew, Ntoumanis, & Thogersen-Ntoumani, 2010; Mageau & Vallerand, 2003).

An additional implication of this account is its usefulness as an easily accessible example of how intertwined a current or retired athletes’ mental health can be with the sport context. For a mental healthcare practitioner working with a current or former athlete and trying to understand his or her perspective, it could be a valuable resource for developing an understanding of the characteristics and influences inherent to the elite sport context which may influence an individual’s sense of self, happiness, and ability to cope with threats and challenges to these domains. Markser (2011) suggests that when considering a unique population such as elite athletes, it is necessary to question whether general psychiatric knowledge is appropriate to be able to effectively diagnose and treat such individuals. In addition, in their review of elite athlete mental health research, Rice and colleagues (2016) reiterate that having a comprehensive understanding of the mental health experiences specific to elite athletes “has the potential to advance models of care and management of this population” (p. 1334). Therefore, accounts such as this one contribute to the knowledge base from which mental health clinicians may draw upon to inform their understanding of athletes’ perspectives, an implication of this research which has been called for in a recent commentary on elite athlete and mental health research (Lebrun & Collins, 2017). Finally, the process of storytelling that Bryn engaged in as a result of deciding to participate in this inquiry evidently played a role in her ability to rediscover and redefine her sense of self and thus contributed to her multi-dimensional and on-going recovery from her adjustment disorder. This conclusion, which is consistent with Lavallee and colleagues’ (1997) findings and Papathomas’ (2014) description of the potential value of narrative therapy, speaks to the effective employment by mental healthcare practitioners of autobiographical account
making to help individuals come to terms with difficult life transitions, particularly athletes coping with retirement.

A question that must be considered in this discussion of applied and theoretical implications is the degree to which Bryn’s experiences with elite and university sport and mental health issues are idiosyncratic versus reflective of other athletes’ experiences. Although Bryn’s specific experiences and perspectives are considered unique, there were significant commonalities between aspects of Bryn’s account and previous literature, particularly in the area of athlete retirement. These similarities suggest that the knowledge generated about the relationship between elite and university sport participation and mental health, both its’ resilience and vulnerability generating dimensions, may be relatable to many athletes’ experiences. More research is necessary to examine other potentially salient influences on athlete mental health experiences such as gender, specific sport type, the culture of particular sport environments, the nature of the coach-athlete relationship, and different providers of social support that cannot be thoroughly examined with a single-subject study design. It would be highly informative to conduct multiple life history examinations of a variety of athletes’ experiences with mental health issues to build upon the revealing work that has already been done using similar methodologies (Douglas & Carless, 2009; Papathomas & Lavallee, 2014; Papathomas & Lavallee, 2006; Sparkes, 1998). In addition, an important dimension to add to the understanding of athletes’ experiences with mental health issues is the perspectives of significant individuals in the lives of athletes, such as coaches, mental healthcare providers, family members, and other support providers. As recent reviews and commentaries on the state of high performance athlete mental health research have suggested, considerably more quality research with this population and context is needed to develop our understanding of athletes’ mental
healthcare needs (Lebrun & Collins, 2017; Rice et al., 2016). The current report contributes an important piece to the rapidly developing literature in this area.
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Appendix A

Information Letter

Principle Investigator
Rachel Jewett, MSc Student
University of Toronto
Faculty of Kinesiology & Physical Education
55 Harbord Street
Toronto, ON, M5S 2W6
647.281.0630
r.jewett@utoronto.ca

Supervisor
Dr. Gretchen Kerr
University of Toronto
Faculty of Kinesiology & Physical Education
55 Harbord Street
Toronto, ON, M5S 2W6
416.978.6190
gretchen.kerr@utoronto.ca

Dear potential participant:
I am a Master’s student in the Faculty of Kinesiology and Physical Education and a track and field athlete at the University of Toronto and I am inviting you to participate in a study. The purpose of this study is to learn about a retired, elite athlete’s experiences with sport and depression. My hope is to work with you to develop some understanding of the role that participation in elite sport has had in your experience with mental illness. I would be very grateful if you would agree to participate in this study so that we may have an opportunity to explore your life together and generate knowledge in an area that is largely understudied. Please read through this letter of information and feel free to contact me with any questions you may have. If you think you may be interested in participating, I would like to meet with you in person to discuss the study in detail. You are free at any point to withdraw your interest without consequence.

What is involved?
I am going to be working with one participant only for this study as I hope to delve into the participant’s experiences in great detail. If you agree to participate, I would like to do six to eight interviews together over a period of approximately six months so that we have some time between interviews and flexibility in scheduling. I expect the interviews to last for approximately one hour, depending in part on the constraints of your schedule and the nature of the topics we discuss during each conversation. The interviews will take place in a comfortable, private space, such as your home or workspace or wherever you feel comfortable speaking to me and that is convenient for you. During our conversations I would like to ask you about your childhood and introduction into sport, the development of your sport career and other aspects of your life including relationships with family and friends, interests, and hobbies, the emotional and physical highs and lows in your life, your experience with depression, retirement from sport, your perspective on sport culture and mental illness, and any other areas that you would like to explore. With your consent, I will record each interview and provide you with a written transcription before each subsequent interview so that you can reflect on anything that we discussed and elaborate on or clarify anything. I am also hoping to collect media documents that are relevant to your sport career, either directly about you or about your sport at the time that you were competing. My hope is that we can discuss these documents together and that they may help inform our shared understanding of the role of the sport context in the experience of mental illness in athletes.
What are the benefits?
My hope is that participating in this study will be an enlightening and rewarding experience for you. I believe it will provide an opportunity for us to work together to interpret and understand some of your life experiences and how they have impacted you. From a broader perspective, I believe the information gained from this study may contribute to the improved well-being of athletes suffering with mental illness by providing insight into their experiences from an athlete’s perspective. Another benefit of this study is the potential for it to inform psychiatric treatment for this population.

Are there any risks?
I do not foresee any significant risk associated with participating in this study; however I recognize that I will be asking you to reflect on and disclose very personal and sensitive stories that may cause you to experience psychological distress. I am fully aware that the topics that I would like to discuss for the purposes of this study are serious and personal and I will do my utmost to create an interview environment in which you feel comfortable and safe in your disclosure. To reduce the risk of psychological distress, I assure you that you have no obligation to answer any questions you do not want to, and you can choose to stop an interview at any time. In the event that you would like to discuss any concerns with a medical professional I can provide you with a number of relevant resources.

What will happen with my information?
The interviews will be typed and stored on my personal, password protected laptop. Only my graduate supervisor, Dr. Kerr, and I will have access to the contents of our discussions and the information will be kept for five years, after which time it will be destroyed. The knowledge that we generate from this study will be presented at a research conference. My supervisor and I will also write a paper which will be published in an academic journal. To the extent that you wish, your identity and any identifiable information that you disclose will be carefully protected to ensure your anonymity in any material related to the study. You will have access to the interview transcriptions and papers written about the study, to be provided at your request.

Freedom to Withdraw
Participation in this study is voluntary. My hope is that after an initial meeting to discuss the study we will establish a mutual commitment to the project, however there will be no negative consequences if you withdraw at any point. You can stop the interviews at any time, and you are under no obligation to answer questions that you do not want to. If you would like to withdraw from the study, you can contact me, Rachel Jewett, at any time (contact information can be found at the top of this letter).

If you have questions about this study, or about the information used for research purposes, you may contact Rachel Jewett (r.jewett@utoronto.ca). You may also contact the Office of Research Ethics at ethics.review@utoronto.ca or 416-946-3273 if you have questions about your rights as a participant.
Informed Consent
Title of Project: An Elite Athlete’s Experience with Depression

<table>
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<th>Part 1: Research Team Information</th>
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<tbody>
<tr>
<td><strong>Primary Investigator:</strong></td>
</tr>
<tr>
<td>Rachel Jewett, MSc Student</td>
</tr>
<tr>
<td>University of Toronto</td>
</tr>
<tr>
<td>Faculty of Kinesiology &amp; Physical Education</td>
</tr>
<tr>
<td>55 Harbord Street</td>
</tr>
<tr>
<td>Toronto, ON, M5S 2W6</td>
</tr>
<tr>
<td>T: 647.281.0630</td>
</tr>
<tr>
<td>E: <a href="mailto:r.jewett@mail.utoronto.ca">r.jewett@mail.utoronto.ca</a></td>
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<th>Part 2: Consent of Participant</th>
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<td><strong>(Please circle)</strong></td>
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<tr>
<td>Do you understand that you have been asked to engage in a series of six to eight interviews?</td>
</tr>
<tr>
<td>Have you received and read a copy of the Information Sheet?</td>
</tr>
<tr>
<td>Do you understand the benefits and risks involved in taking part in this study? (see information sheet)</td>
</tr>
<tr>
<td>Have you had an opportunity to ask questions and discuss this study? (If you have questions, please contact either of the researchers listed above)</td>
</tr>
<tr>
<td>Do you understand that you are free to refuse to participate, or to withdraw from the study at any time without consequence?</td>
</tr>
<tr>
<td>Has the issue of confidentiality been explained to you? (see information sheet) Do you understand who will have access to your information?</td>
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<tr>
<th>Part 3: Participant Signature</th>
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<tbody>
<tr>
<td>I agree to take part in this study.</td>
</tr>
<tr>
<td>Signature of Participant: __________________________ Date: ________________</td>
</tr>
<tr>
<td>Printed Name: __________________________</td>
</tr>
<tr>
<td>Email address: __________________________</td>
</tr>
<tr>
<td>Signature of Researcher: __________________________</td>
</tr>
<tr>
<td>Date: ________________</td>
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Appendix B

**Interview Discussion Topics**

- **Childhood and introduction into sport**
  - Describe your sport background
  - Describe your family’s relationship with sport
  - Talk about why you ended up in your sport

- **Development and progression of sport career**
  - Describe your transition through levels of sport
  - Talk about how sport related to other spheres of life (e.g. school, family, other interests)
  - Describe why you participated in sport
  - Describe your day-to-day life as an elite sportsperson: what did you spend your time doing? What did a typical day look like? Did this ever change or evolve over the course of your career?
  - Talk about your experiences with injuries
  - Talk about competition experiences, good and bad, anything that you remember or that stands out

- **Reflections on sport career**
  - Talk about the highs and lows of your sport career
  - Explore the way you feel about your sport
  - Talk about what your sport meant to you
  - Talk about your emotional experiences within sport

- **Retirement from sport**
  - Describe your retirement process
  - Describe your life since retirement
  - Describe your day-to-day routine now

- **Mental Health (this appears last on this list here but it will be integrated within the other topics during the interviews)**
  - Talk about your experience with depression
  - How has depression impacted your life, your sport participation, your family, other interests
  - Describe your perception of the relationship between your sport participation and experience with depression
  - Discuss what you think about athletes and mental health
  - Discuss what you think about mental illness within the culture of sport
  - Talk about addressing your experience with depression (or not) with your peers within or outside of sport
  - Describe your experience navigating mental healthcare as an athlete
  - Discuss how different experiences in your sport career made you feel
Appendix C

Mental Health Resources

1. Canadian Mental Health Association: https://toronto.cmha.ca/programs-and-services/community-support-services/

2. Centre for Addiction and Mental Health (CAMH)

3. Ontario Mental Health Helpline: http://www.mentalhealthhelpline.ca/
Appendix D

Recruitment Email Template

Dear “potential participant’s name”,

I am reaching out to you because I believe you may be interested in participating in a research study that one of my former athletes is conducting for her master’s thesis. The project is an investigation into the experience of a high level athlete with depression to try to gain some understanding of the impact of the sport context on an individual’s experience with psychological challenges. Rachel, the master’s student, is looking for just one female, retired athlete who has undergone a clinical diagnosis of depression at some point in her life and is willing to engage in a number of interviews with her to discuss her experience with sport and depression. Rachel is a track and field athlete herself and is drawn to this research topic by her own experiences in track and field and those of her teammates.

I have attached to this email a couple of resources for you to look over before you decide whether you would like to participate or not, including an information letter and consent form written by Rachel.

If you think you may be interested in participating, Rachel would like to talk to you in more depth about the study so please contact her at r.jewett@utoronto.ca to set up a meeting. An initial meeting or conversation with Rachel does not mean you are committing to the study, you can decide to withdraw your interest at any time. In addition, Rachel will not inform me as to whether you agree to participate or not so please do not feel as though I have any expectations regarding your decision.

Thank you very much for considering this request and I wish you all the best.
Appendix E

Handout for Coach Assisting with Recruitment

Study Title: An Elite Athlete’s Experience with Depression

Study Purpose: to explore the experience of an elite athlete with depression in order to:
1. Contribute to an understanding of the role that elite sport participation may play in the athlete’s experience with depression
2. Challenge assumptions surrounding athletes and mental illness
3. Generate knowledge that may inform appropriate prevention and psychiatric treatment for this population

Study Design: we will be using a life history approach which is an examination of an individual’s experiences and stories across his or her lifetime. This approach takes into account individuals’ past experiences and considers the impact of these experiences on the individual’s current life. Mental illness tends to effect individuals over the course of their lives and elite sport usually begins at a young age with many phases over the course of a career, such as injury and retirement. By taking a life course perspective we will be able to engage in an unrestricted exploration of these influences. This approach represents a collaborative process of meaning-making between the researcher and participant in which both parties work together to develop interpretations and understandings surrounding the participant’s experiences. This method involves a series of approximately 6-8 interviews lasting approximately 1-2 hours in length.

Interview Topics: the interviews will be discussions about a number of topics related to the participant’s life and experiences with sport and mental illness, including the following:
- Childhood and introduction into sport
- Development and progression of sport career
- Reflections on sport career
- Retirement from sport
- Experience with depression

Participant: we will be recruiting just one participant who represents the following criteria:
- Female
- Retired from sport
- Competed for her country at some point during her sport career
- Has undergone a clinical diagnosis of depression
- Is in a sufficient state of recovery to safely discuss the topics outlined above
- Has the time and interest to participate in the study
Appendix F

ETHICS REVIEW APPLICATION FORM FOR SUPERVISED AND SPONSORED RESEARCHERS
(For use by graduate students, post-docs, residents, external investigators, and visiting professors/researchers)

SECTION A – GENERAL INFORMATION

1. TITLE OF RESEARCH PROJECT
An Elite Athlete’s Experience with Depression

2. INVESTIGATOR INFORMATION

Investigator:

<table>
<thead>
<tr>
<th>Title (e.g., Dr., Ms., etc.): Miss</th>
<th>Name: Rachel Jewett</th>
</tr>
</thead>
</table>

Department (or organization if not affiliated with U of T): Exercise Science
Mailing address: 268 Poplar Plains Road apt. 604 Toronto, ON M4V 2P2
Phone: 647-281-0630 Institutional e-mail: r.jewett@utoronto.ca

Level of Project:

<table>
<thead>
<tr>
<th>Student Research:</th>
<th>Doctoral</th>
<th>Masters [ ]</th>
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Post-Doctoral Research [ ] Visiting professor/External researcher [ ] Course [ ]

CBR/CBPR [ ] Other [ ] (specify: )

Supervisor/Sponsor (must be a UoT faculty member with research privileges):

<table>
<thead>
<tr>
<th>Title: Dr.</th>
<th>Name: Gretchen Kerr</th>
</tr>
</thead>
</table>

Department: Exercise Science
Mailing address: 55 Harbord Street Toronto, ON M5S 2W6
Phone: 416-978-6190 Institutional e-mail: gretchen.kerr@utoronto.ca

Co-Investigators:

Are co-investigators involved? Yes [ ] No [ ]

<table>
<thead>
<tr>
<th>Title:</th>
<th>Name:</th>
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</table>

Department (or organization if not affiliated with U of T):
Mailing address:
Phone: Institutional e-mail:

<table>
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<tr>
<th>Title:</th>
<th>Name:</th>
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</table>

Department (or organization if not affiliated with U of T):
Mailing address:
Please append additional pages with co-investigators’ names if necessary.

3. UNIVERSITY OF TORONTO RESEARCH ETHICS BOARD:

Social Sciences, Humanities and Education □ Health Sciences HIV/AIDS □

To determine which Research Ethics Board (REB) your application should be submitted, please consult: http://www.research.utoronto.ca/about/boards-and-committees/research-ethics-boards-reb/

4. LOCATION(S) WHERE THE RESEARCH WILL BE CONDUCTED:

(a) If the research is to be conducted at a site requiring administrative approval/consent (e.g., in a school), please include all administrative consent letters. It is the responsibility of the researcher to determine what other means of approval are required, and to obtain approval prior to starting the project.

University of Toronto □
Hospital □ specify site(s)
School board or community agency □ specify site(s)
Community within the GTA □ specify site(s) Participant home or mutually agreed upon private location
International □ specify site(s)
Other □ specify site(s)

(b) For all off-campus research, whether in the local community or internationally, the researcher should consult with the Framework on Off-Campus Safety, Guidelines on Off-Campus Safety, and Guidelines on Safety in Field for institutional requirements.

(c) The University of Toronto has an agreement with the Toronto Academic Health Sciences Network (TAHSN) hospitals regarding ethics review of hospital-based research where the University plays a peripheral role. Based on this agreement, certain hospital-based research may not require ethics review at the University of Toronto. If your research is based at a TAHSN hospital, please consult the following document to determine whether or not your research requires review at the University of Toronto. http://www.research.utoronto.ca/faculty-and-staff/research-ethics-and-protections/humans-in-research/ - “Administrative review” heading toward the bottom of the page.

5. OTHER RESEARCH ETHICS BOARD APPROVAL(S)

(a) Does the research involve another institution or site? Yes □ No □

(b) Has any other REB approved this project? Yes □ No □

If Yes, please provide a copy of the approval letter upon submission of this application.

If No, will any other REB be asked for approval? Yes □ (please specify which REB) No □
6. FUNDING OF THIS PROJECT

(a)

<table>
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<td>Fund #: 202113 (6 digits)</td>
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<td></td>
<td>Agency:</td>
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<td>Applied for funding ☐</td>
<td>Agency:</td>
<td>Submission date:</td>
</tr>
<tr>
<td>Unfunded ☐</td>
<td>Agency:</td>
<td>Submission date:</td>
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If unfunded, please explain why no funding is needed:

7. CONTRACTS AND AGREEMENTS

(a) Is this research to be carried out as a contract or under a research agreement? Yes ☒ No ☐

If yes, is there a University of Toronto funding or non-funded agreement associated with the research? Yes ☐ No ☒

If Yes, please append a copy of the agreement with this application.

Is there any aspect of the contract that could put any member of the research team in a potential conflict of interest? Yes ☐ No ☒

If yes, please elaborate under #10.

(b) Is this a Division 5, Health Canada regulated clinical trial that involves drugs, devices or natural health products? Yes ☐ No ☒ (if so, the application must be reviewed by the full board)

8. PROJECT START AND END DATES

Estimated start date for the component of this project that involves human participants or data: July 2016

Estimated completion date of involvement of human participants or data for this project: November 2016

9. SCHOLARLY REVIEW:

(a) Please check one:

I. ☒ The research has undergone scholarly review by thesis committee, departmental review committee, peer review committee or some other equivalent (Specify review type – e.g., departmental research committee, supervisor, CIHR, SSHRC, OHTN, etc.): Thesis committee

II. ☐ The research will undergo scholarly review prior to funding (Specify review committee – e.g., departmental research committee, SSHRC, CIHR peer-review committee, etc.):
III.  □ The research will not undergo scholarly review (Please note that all research greater than minimal risk requires scholarly review)

(b) If box I or II above was checked, please specify if:

☑ The review was/will be specific to this application

□ The review was/will be part of a larger grant

10. CONFLICTS OF INTEREST

(a) Will the researcher(s), members of the research team, and/or their partners or immediate family members:

(i) Receive any personal benefits (e.g., financial benefit such as remuneration, intellectual property rights, rights of employment, consultancies, board membership, share ownership, stock options, etc.) as a result of or in connection with this study?  Yes □  No ☑

(ii) If Yes, please provide further details and discuss how any real, potential or perceived conflicts of interest will be managed during the project. (Do not include conference and travel expense coverage, or other benefits which are considered standard for the conduct of research.)

N/A

(b) Describe any restrictions regarding access to or disclosure of information (during or at the end of the study) that have been placed on the investigator(s). These restrictions include controls placed by the sponsor, funding body, advisory or steering committee.

N/A

(c) Where relevant, please explain any pre-existing relationship between the researcher(s) and the researched (e.g., instructor-student; manager-employee; clinician-patient; minister-congregant). Please pay special attention to relationships in which there may be a power differential – actual or perceived.

N/A

SECTION B – SUMMARY OF THE PROPOSED RESEARCH

11. RATIONALE

Describe the purpose and scholarly rationale for the proposed project. State the hypotheses/research questions to be examined. The rationale for doing the study must be clear. Please include references in this section.

Mental illness among young people in Canada remains a significant public health concern and preliminary evidence suggests that young athletes are no exception (Gulliver et al., 2015). While a substantial body of research exists to indicate the mental health benefits of exercise and physical activity engagement, emerging evidence from the elite context of sport suggests that, contrary to popular belief, elite athletes experience depression at a rate similar to the general population, with
female athletes experiencing higher rates than males (Yang et al., 2007). When sport participation reaches elite, highly competitive levels, it becomes entangled with significant stressors such as injury, performance-related pressures, and societal and internal expectations which pose a threat to psychological well-being (Storch, Storch, & Killiany, 2005). In addition, retirement from elite sport can represent a psychologically challenging transition for athletes (Torregrosa et al., 2015). These risk factors have been associated with symptoms of and clinical levels of depression in elite athletes (Douglas & Carless, 2009; Jones et al., 2013). Far from being an exclusively negative influence on mental health, sport participation may act as an important coping mechanism and source of great enjoyment for an athlete suffering with mental illness (Jones et al., 2013). The nature of how these factors interact to impact an athlete’s experience with depression has not been specifically examined. Depression can lead to significant detriments in quality of life and represents a risk factor for suicidal ideation and attempts (American College Health Association [ACHA], 2008; Sisk, 2006). Little is known about the unique experiences facing athletes with mental illness, as well as the nature of the role that elite sport participation may play in the experience of elite athletes with depression. Researchers have called for further investigation in these areas to inform responsible and effective treatment of athletes with mental illness (Bar & Markser, 2013).

In response to this call, the proposed research project is an in-depth examination of an elite athlete’s experience with depression. A life history methodology will be used to gain an understanding of the role that elite sport participation may play in the development and manifestation of depression. This approach, in which the individual’s past experiences and their impact on current and future life are taken into account, is appropriate in this inquiry for a variety of reasons (Cole & Knowles, 2001). Depression tends to affects individuals over the course of their lives and there are often phases throughout a sporting career that may have different psychological consequences for an athlete, including for example periods with injury, performance success and failure, and retirement from sport (Grove, Lavallee, & Gordon, 1997). Taking a life course perspective in this project will allow for an unrestricted exploration of these factors. There is also a critical shortage of qualitative research within the area of athletes and mental health. The point-of-view of the athlete, unconstrained by survey questions is missing and may illuminate some of the complexities in the relationship between elite sport participation and mental health. Prominent sport psychology researchers suggest that qualitative methods are valuable in developing a holistic understanding of complex social processes and largely uncharted territories, in which elite athletes’ experiences with depression certainly fall (Eklund et al., 2011).

In line with a life history methodology, I will conduct six to eight interviews with one female, retired, elite athlete who has undergone a clinical diagnosis of depression. One athlete will be recruited to do justice to the complexity and depth of the athlete’s life experiences within the time constraints of a two year master’s degree. A female athlete will be recruited due to the higher prevalence of depression in this gender and the importance of developing a trusting researcher-participant relationship when exploring sensitive topics (Cole & Knowles, 2001). The principal investigator believes she will be more successful at developing such a relationship with a fellow female. Data analysis will be an on-going process throughout the interview stage. Each interview will be transcribed and interpreted before the next in order to follow-up on initial reflections and develop meaning and understanding with the participant throughout the inquiry. This strategy reflects the philosophical underpinnings of life history research in which knowledge is believed to be co-constructed between researcher and participant (Cole & Knowles, 2001).

The purpose of the proposed study is to contribute to a deeper understanding of the role that elite sport participation may play in an athlete’s experience with depression with the hope to challenge widely held assumptions that to be successful, athletes must represent the epitome of mental toughness and thus are thought to be immune to psychopathology (Schaal et al., 2011). A potential implication of this study includes gaining an understanding of the nature of the role of sport in an athlete’s experience with depression in order to inform psychiatric treatment for this population.

12. METHODS
(a) Please describe all formal and informal procedures to be used. Describe the data to be collected, where and how they will be obtained and how they will be analyzed.

Data will be collected through a series of one-on-one, semi-structured, conversational style interviews with one participant. The principal investigator will conduct all of the interviews in a private location that is mutually agreed upon with the participant. The goal is to find a location that is familiar and comfortable for the participant. The number of interviews will depend on how long it takes to discuss all of the areas outlined in the interview guide; however we are anticipating between 6-8 interviews, lasting approximately 1-2 hours in length. The interviews will be recorded and transcribed by the principal investigator. Prior to initiating the interviews, the principal investigator will conduct an informal meeting with the participant to discuss the research project in detail and establish the interest and commitment of the participant. At this meeting, risks and benefits to participation, the interview guide, the participant’s rights surrounding withdrawal and confidentiality, and informed consent will be discussed. The principal investigator will also be collecting media documents about the participant’s sport career to be used as tools during the interviews to stimulate discussion surrounding the participant’s perspective on the relationship between sport and her experience with depression. Finally, the principal investigator will keep a reflexive journal throughout the inquiry in which she will make note of reflections during the inquiry and initial interpretations. The interviews will be transcribed and sent to the participant between each interview in order for her to reflect on anything in the subsequent interviews or clarify any parts of the interview if she desires. This process will contribute to an iterative data analysis procedure in which initial interpretations of the participant and researcher will be noted and contribute to the final research report. Thus data analysis will be informed by the researchers’ scholarly knowledge pertaining to the inquiry as well as the participant’s knowledge as an expert of her life experiences.

(b) Attach a copy of all questionnaires, interview guides and/or any other instruments.

(c) Include a list of appendices here for all additional materials submitted (e.g., Appendix A – Informed Consent; Appendix B – Interview Guide, etc.):

- Appendix A- Information letter and Consent Form
- Appendix B- Interview Discussion Topics
- Appendix C- Mental Health Resources
- **Appendix D- Recruitment Email Template**
- Appendix E- Handout for Coach Assisting with Recruitment

13. PARTICIPANTS, DATA AND/OR BIOLOGICAL MATERIALS

(a) Describe the participants to be recruited list the eligibility criteria, and indicate the estimated sample size (i.e. min-max # of participants). Where applicable, please also provide a rationale for your choice in sample size and/or sample size calculation.

One elite athlete participant will be recruited. As mentioned in the study rationale, a single-subject design will be used to more fully understand the participant’s life history and within the time constraints of a two year master’s degree, this is the responsible way to do justice to the complexity of the participant’s experiences and life. The inclusion criteria for this participant include being female, being retired from sport, having had a previous clinical diagnosis of depression, having represented her country at an international level during her sport career, and having the time and sufficient level of health to be able to participate in the study and thus be in a state of recovery from depression. A female athlete will be recruited because depression is reportedly more prevalent in females, therefore it will be more likely to find an elite athlete with depression who is female. In addition, the principal investigator feels more comfortable in her ability to foster a close
researcher-participant relationship with a fellow female, which is a relationship that is critical to the success of a project of this nature. Furthermore, a retired athlete will be recruited because retirement from sport often represents a psychologically challenging life transition and being able to explore the participant’s experience with retirement is an important component of the study and is better understood by the participant with the benefit of time to reflect. In addition, because the study will require the participant to reflect, in-depth, on personal and sensitive experiences which may cause some psychological distress, we want to avoid the possibility of this impacting current sport performance. Having had a clinical diagnosis of depression is an inclusion criteria because minimal research has been conducted with clinically mentally ill athletes, and researchers have recommended adding a diagnostic delimitation to participant selection to compare these athletes’ experiences with those who simply self-identify as being depressed (Reardon & Factor, 2010).

Whether the diagnosis was given shortly before, during, or shortly after the participant was involved in sport at a high level, having the diagnosis occur during her sport career is necessary so that it will be likely that the participant’s experience with clinical depression interacted in some way with her sport experience. That being said, it is possible that the participant may have suffered from depression for a time during her sport career and not received an official diagnosis until years later. Therefore the exact timing of the diagnosis is not as important as the fact that a clinical diagnosis had occurred at some time in the past and the participant has since undergone treatment and is able to safely and comfortably participate in the study, which implies a state of recovery. A state of recovery also implies that the participant is not experiencing a depressive episode during the time of the study which may make her more vulnerable to experiencing psychological distress. If antidepressants and/or ongoing therapy are part of the participant’s long-term recovery plan, these will not exclude a potential participant. The current state of a potential participant’s mental health will be discussed in the pre-interview meeting surrounding the discussion of potential risks to participation and in the case that a potential participant is concerned that much of the content of the interviews will not be conducive to maintaining her psychological health, the principal investigator will suggest that perhaps participation in the study is not in her best interest. These criteria have been developed in discussion with the sport psychiatrist who we have consulted with on the project. Finally, having represented her country at an international level will be how we distinguish an elite-level athlete, for whom sport has been a significant priority and part of her day-to-day life.

In terms of exclusion criteria, current, severe mental health issues such as a depressive episode or suicidality will exclude a potential participant. It will be too risky to ask a person in this state to share stories and experiences of a potentially stressful and distressing nature. In addition, a potential participant will be excluded if she is in a mental state that makes her unable to fully understand the details of the study and the consent process. Requiring informed consent at the outset of each interview will facilitate an ongoing discussion between the principal investigator and participant about the risks involved with participation as well as the capacity of the participant to provide consent.

(b) Where the research involves extraction or collection of personally identifiable information, please describe the purpose, from whom the information will be obtained, what it will include, and how permission to access the data is being sought. (Strategies for recruitment are to be described in section #15.)

The principal investigator will collect the relevant personal contact information from the participant once the participant has contacted the principal investigator expressing interest. This information will be collected to be able to contact the participant to set-up interviews and discuss the study. If a potential participant withdraws her interest from participating in the study, any record of her contact information will be deleted. Demographic information that may inform the interpretation of the data generated in the interviews will be collected, such as the participant’s age and gender. The gender of the participant will be explicitly stated in the final research report/paper.
because it is a significant factor in the inclusion criteria of the participant, and gender analysis will likely be part of the study results. Age will be collected but only reported generally, such as “young adult”, “middle-aged”, or “senior adult”, to provide a sense of who the participant is to the reader. Demographic information such as race and ethnicity will only be noted and included in the research report if it is deemed by the researchers and participant to be meaningful to her experiences and life stories.

(c) Is there any group or individual-level vulnerability related to the research that needs to be mitigated (for example, difficulties understanding informed consent, history of exploitation by researchers, power differential between the researcher and the potential participant)? If so, please provide further details below.

The participant in the study will have undergone a clinical diagnosis of depression at some point in her life. Mental illness, including depression, tends to fluctuate in severity over the course of an individual’s life and although an inclusion criteria for the current inquiry is for the participant to be in a state of recovery at the outset of the project, there is the possibility that a change in her psychological state may occur at some point during the inquiry. A change in psychological state may impact the participant’s ability to provide informed consent, or cause her to change her mind regarding her level of comfort participating in the study. Therefore, consent will be continually sought throughout the inquiry. At the beginning of each interview, the principal investigator will bring up the topic of informed consent and ensure that the participant is still willing to participate before proceeding with the interview.

(d) If your research involves the collection and/or use of biological materials (e.g. blood, saliva, urine, teeth, etc.), please provide details below. Be sure to indicate how the samples will be collected and by whom.

N/A

14. EXPERIENCE OF INVESTIGATORS WITH THIS TYPE OF RESEARCH

(a) Please provide a brief description of previous experience by (i) the principal investigator/supervisor or sponsor, (ii) the research team and (iii) the people who will have direct contact with the participants. If there has not been previous experience with this type of research, please describe how the principal investigator/research team will be prepared.

The principal investigator, who will be conducting all of the interviews, has over a year of experience working with mentally ill individuals as a volunteer personal trainer at the Centre for Addiction and Mental Health (CAMH). Rachel has worked one-on-one with women in an in-patient unit at CAMH who have a range of mental health issues, including depression. As part of her training for this position, Rachel has undergone crisis management and safety training for working with this population. To supplement this experience Rachel has consulted with her volunteer supervisor at CAMH, who is a recreational therapist, about developing a Safety Wellness plan with the participant. This is a protocol that is used with outgoing patients at CAMH to identify personal triggers of psychological distress and develop strategies to mitigate negative reactions to them. Rachel will meet with the CAMH therapist to learn how to facilitate developing a Safety Wellness plan with the participant as well as shadow a group at CAMH called Keeping Safe in which therapists work with a group of clients to create Safety Wellness plans. This supplemental training will be done before commencing the interviews in the current research project. Rachel is also a high performance track and field athlete and has considerable experience interacting with elite athletes. During her undergraduate degree Rachel conducted two interview-based research projects in which sensitive topics such as the psychological impact of athletic injury and athletes’ experiences with bullying were
discussed. Dr. Kerr also has experience conducting research about sensitive material with vulnerable populations in her work surrounding coaching abuse in underage athletes. The skills that Rachel and Dr. Kerr have developed through their previous research experience in the field of sport psychology will assist them in being prepared for potential issues and challenges that may arise within the current research project.

Additionally, two of Rachel’s M.Sc. committee members are practicing sport psychology consultants and the third is a registered psychologist. There will be a meeting of the supervisor and student after each interview to review the interview process and content; if issues of concern are raised during these meetings we will consult with the registered psychologist on the supervisory committee.

15. RECRUITMENT OF PARTICIPANTS

Where there is recruitment, please describe how, by whom, and from where the participants will be recruited. Where participant observation is to be used, please explain the form of insertion of the researcher into the research setting (e.g., living in a community, visiting on a bi-weekly basis, attending organized functions). If relevant, describe any translation of recruitment materials, how this will occur and whether or not those people responsible for recruitment will speak the language of the participants.

The principal investigator will be enlisting the assistance of University of Toronto Head Track and Field Coach, Carl Georgevski, with participant recruitment. Carl has coached national and international level athletes for 39 years, thus has many connections to retired, elite athletes. The principal investigator will have a meeting with Carl in which she describes the project to him in depth to ensure that he understands all details surrounding the nature of the project as well as the participant inclusion criteria. A handout has been created for Carl’s reference with an outline of the study and participant inclusion and exclusion criteria (see Appendix E for handout). Carl will then be asked to reach out to one potential participant via email (see Appendix D for email template) who fits the inclusion criteria based on his knowledge of her life and experience with sport. In this email Carl will include the information and consent letters for the study and request that the potential participant contact the principal investigator if she is interested, at which point an initial meeting with the individual will be scheduled to discuss the details of the study and establish a commitment to the study or give her an opportunity at this point to retract her interest. Carl will not be informed as to whether the retired athlete he approached decided to participate or not in order to eliminate any pressure the potential participant may feel to participate in the study to appease Carl who was once her coach and thus held a position of power and influence with her. Because the study only has one participant, this recruitment strategy was designed to garner the interest of only one potential participant instead of casting a widespread net to find a participant and then having to turn down interested individuals and potentially cause them distress or disappointment.

If Carl is unable to identify an appropriate candidate for the project the principal investigator will reach out to another University of Toronto coach who has been coaching for a long time and has worked with elite athletes, such as the swim team coach, Byron MacDonald, to assist in the same manner outlined above with Carl. If Byron is unable to identify an appropriate potential participant, the principal investigator will reach out to yet another coach. Given the principal investigator’s position in the Faculty of Kinesiology and Physical Education as a former undergraduate student, and her familiarity with the Varsity program as a former varsity athlete, Rachel has connections with many of the high performance coaches at the university and will solicit their assistance if needed.

Attach a copy of all posters, advertisements, flyers, letters, e-mail text, or telephone scripts to be used for recruitment as appendices.
16. COMPENSATION

Please see U of T’s Compensation and Reimbursement Guidelines.

(a) Will participants receive compensation for participation?

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(b) If Yes, please provide details and justification for the amount or the value of the compensation offered.

We will give the participant a $100 gift certificate to a restaurant in Toronto in appreciation of the significant time that the individual will be dedicating to the research project. The certificate will be provided at the conclusion of the interviews. The rationale for providing compensation at the conclusion of the study is to avoid making the participant feel coerced into continuing participation by providing her with the gift certificate at the outset. The certificate will be funded by Dr. Kerr’s PERA account.

(c) If No, please explain why compensation is not possible or appropriate.

N/A

(d) Where there is a withdrawal clause in the research procedure, if participants choose to withdraw, how will compensation be affected?

The participant will only receive the gift certificate at the conclusion of the interview phase of the study. If the participant decides to withdraw after this point, we will not ask for the gift certificate to be returned.

SECTION C – DESCRIPTION OF THE RISKS AND BENEFITS OF THE PROPOSED RESEARCH

17. POSSIBLE RISKS

(a) Please indicate all potential risks to participants as individuals or as members of a community that may arise from this research:

(i) Physical risks (e.g., any bodily contact or administration of any substance): Yes ☒ No ☐

(ii) Psychological/emotional risks (e.g., feeling uncomfortable, embarrassed, or upset): Yes ☒ No ☐

(iii) Social risks (e.g., loss of status, privacy and/or reputation): Yes ☒ No ☐

(iv) Legal risks (e.g., apprehension or arrest, subpoena): No ☒ Yes ☐
(b) Please briefly describe each of the risks noted above and outline the steps that will be taken to manage and/or minimize them.

Due to the sensitive nature of the inquiry, in which the participant’s experience with mental illness will be discussed, and the fact that the participant has a history of depression, there is potential for the participant to experience psychological distress or discomfort during the interviews. We are asking the participant to share personal stories about her entire life in sport and experience with depression, therefore revisiting some memories and experiences may cause an emotional response which could potentially trigger a depressive episode. We are very aware of this risk and will implement a number of strategies to mitigate it:

1) The principal investigator will enhance her current experience working with individuals with mental illness by undergoing training at CAMH to develop a Safety Wellness plan with the participant before commencing the interviews.

2) A list of mental health resources will be provided to the participant at an initial meeting, before beginning the interview (See Appendix C) process.

3) Consent will be reviewed and obtained prior to each interview.

4) In addition, the research team will establish contact with Dr. Ryan Todd, a psychiatrist at Mt. Sinai hospital who has experience treating elite athletes with mental illness. The principal investigator will consult with the psychiatrist throughout the interview process, without revealing any identifiable information about the participant, to assist in identifying and developing strategies to mitigate any red flags that may arise during the inquiry.

5) The principal investigator will also debrief with Dr. Kerr shortly after each interview to identify any potential issues or red flags early so that psychological risk for the participant can be mitigated immediately. Any potential issues will be discussed with Dr. Lynda Mainwaring, the committee member who is a registered psychologist as well as Dr. Todd.

6) If a severe emotional response occurs during an interview, the principal investigator will contact appropriate emergency services to ensure that the participant does not harm herself or the principal investigator (911).

7) Furthermore, strategies will be implemented within the interviews to help avoid psychological distress. For example, the principal investigator will make it clear that the participant is under no obligation to answer any question that she does not want to. The participant will be given the opportunity to review the interview guide before starting the interviews at which point she may also identify areas that she would prefer not to discuss. If at any point during the interviews the participant would prefer to stop and continue at a later date and time or withdraw from the study, she will be allowed to do so. The participant is also free to withdraw from the study at any point without penalty.

There is the possibility that the participant may experience social repercussions if she is identifiable in the study. For example, the participant may experience stigma related to her experience of mental illness which could potentially impact the way she is viewed by some people. It is possible that the participant’s reputation as an athlete or in other roles may be tarnished in the eyes of those who perceive mental illness negatively. In addition, the participant may share experiences that involve conflicts with other people which, if shared publicly, could negatively affect those relationships. Alternatively, the participant may experience some social benefit and contribute to the reduction of stigma toward those with mental illness by sharing her experiences. In order to mitigate possible social risks the principal investigator will maintain an ongoing discussion about the participant’s comfort level in sharing certain experiences with the public if she can be identified.

18. POSSIBLE BENEFITS

- Describe any potential direct benefits to participants from their involvement in the project
- Describe any potential direct benefits to the community (e.g., capacity building)
Comment on the potential benefits to the scientific/scholarly community or society that would justify involvement of participants in this study

We believe there are a range of benefits associated with participating in this study, principally the opportunity to reflect on and develop meaning surrounding the stories that make up the participant's life. The participant will be provided with the opportunity to relive her sporting career and her perceptions of the role that it played in her experience with depression which will likely be challenging at times but hopefully also gratifying and enlightening. In addition, because the athlete point of view is notably absent in sport and mental health research, the participant will be contributing an important perspective for the improvement of athlete well-being in the culture of sport. Sharing this participant's stories may also encourage other athletes to be more open about their experiences with mental illness and contribute to increasing the acceptability of this population to seek support and treatment for their psychological challenges. Finally, a significant potential implication of the current inquiry is to provide some insight into an elite athlete's experience with depression in sport to help inform appropriate psychiatric treatment for this population. We believe that the individual who is interested in participating in this study will perceive these potential community-wide implications of the research as significant benefits to participating.

SECTION D – INFORMED CONSENT

19. CONSENT PROCESS

(a) Describe the process that will be used to obtain informed consent and explain how it will be recorded. Please note that it is the quality of the consent, not the form that is important. The goal is to ensure that potential participants understand to what they are consenting.

(b) If the research involves extraction or collection of personally identifiable information from or about a research participant, please describe how consent from the individuals or authorization from the data custodian (e.g., medical records department, district school board) will be obtained.

Informed consent will be obtained through a written form during an informal meeting between the participant and principal investigator prior to initiation of data collection. During this meeting, which will take place at a mutually agreed upon, private location, the principal investigator will describe the study in detail and discuss the participant’s interest in participating. At this meeting the interview guide will also be reviewed with the participant and she will have an opportunity to provide input on the topics she feels would be valuable to discuss. During this meeting the principal investigator and participant will review the consent form together so that any questions or concerns can be addressed. The consent form will be left with the participant to review and reflect upon and if she agrees to participate, the principal investigator will ask her to sign the form at the next meeting which will also be the first interview. Personally identifiable information will be collected in the form of media documents about the participant’s sport career which will be used to stimulate discussion during the interviews. These documents will be obtained using internet searches and the participant will be informed by the study information letter and during the initial meeting that this will be part of the data collection process. Given that the participant’s mental health status may change over the course of the data collection, consent will be obtained on an ongoing basis before each interview.

20. CONSENT DOCUMENTS

(a) Attach an Information Letter/Consent Form

Additional documentation regarding consent should be provided such as:
- screening materials  introductory letters, letters of administrative consent or authorization

(b) If any of the information collected in the screening process - prior to full informed consent to participate in the study - is to be retained from those who are later excluded or refuse to participate in the study, please state how potential participants will be informed of this course of action and whether they will have the right to refuse to allow this information to be kept.

If a potential participant decides not agree to participate in the study, no personal information about the individual will be kept.

21. COMMUNITY AND/OR ORGANIZATIONAL CONSENT, OR CONSENT BY AN AUTHORIZED PARTY

(a) If the research is taking place within a community or an organization which requires that formal consent be sought prior to the involvement of individual participants, describe how consent will be obtained and attach any relevant documentation. If consent will not be sought, please provide a justification and describe any alternative forms of consultation that may take place.

N/A

(b) If any or all of the participants are children and/or individuals that may lack the capacity to consent, describe the process by which capacity/competency will be assessed and/or, the proposed alternate source of consent.

N/A

(c) If an authorized third party will be used to obtain consent:

   i) Submit a copy of the permission/information letter to be provided to the person(s) providing the alternative consent

   ii) Describe the assent process for participants and attach the assent letter.

N/A

22. DEBRIEFING and DISSEMINATION

(a) If deception or intentional non-disclosure will be used in the study, provide justification. Please consult the Guidelines for the Use of Deception and Debriefing in Research

N/A

(b) Please provide a copy of the written debriefing form, if applicable.

(c) If participants and/or communities will be given the option of withdrawing their data following the debriefing, please describe this process.

N/A
(d) Please describe what information/feedback will be provided to participants and/or communities after their participation in the project is complete (e.g., report, poster presentation, pamphlet, etc.) and note how participants will be able to access this information.

The participant will have full access to the complete research project. As an important component of the life history methodology that will be used in the study is collaborative knowledge generation between researcher and participant, as well as the production of an authentic research report which accurately and responsibly represents the participant’s experience, the participant’s input and interpretations will be considered part of the data analysis process. Therefore, it is consistent with this philosophy that the participant will be given an opportunity to review the research findings which will be provided to her by the principal investigator.

23. PARTICIPANT WITHDRAWAL

(a) Where applicable, please describe how participants will be informed of their right to withdraw from the project and outline the procedures that will be followed to allow them to exercise this right.

The participant will be informed of her right to withdraw from the study during the initial meeting with the principal investigator. Due to the personal and sensitive nature of the research topic, the participant will have the right to withdraw at any stage of the research project, regardless of the complications that late withdrawal may create for the investigators. At the outset of the inquiry, the participant will be encouraged to contact the principal investigator at any time during appropriate business hours if she has concerns about the project or would like to withdraw her participation.

(b) Indicate what will be done with the participant’s data and any consequences which withdrawal may have on the participant.

There will be no consequence for the participant due to withdrawal from the study. The participant’s data, collected up until the point of withdrawal, including interview recordings and transcriptions, will be deleted.

(c) If participants will not have the right to withdraw from the project at all, or beyond a certain point, please explain. Ensure this information is included in the consent process and consent form.

N/A

SECTION E – CONFIDENTIALITY AND PRIVACY

24. CONFIDENTIALITY

Data security measures must be consistent with UT’s Data Security Standards for Personally Identifiable and Other Confidential Data in Research. All identifiable electronic data that is being kept outside of a secure server environment must be encrypted.

(a) Will the data be treated as confidential? Yes ☒ No ☐

(b) Describe the procedures to be used to protect the confidentiality of participants or informants, where applicable
The interviews will be conducted in a safe and private area that is familiar and comfortable for the participant and mutually agreed upon by the participant and principal investigator. The interviews will be recorded and transcribed using the principal investigator’s laptop which is kept in her secure home or office and is password protected. The data pertaining to the current study will be encrypted. Any playback of recorded material will be done in private and not shared with anyone except Dr. Kerr. A pseudonym will be used to identify the participant in the transcriptions and final project, as well as any other document or report pertaining to the study. In addition, identifying details will not be included in the final research report or presentations related to the project.

(c) Describe any limitations to protecting the confidentiality of participants whether due to the law, the methods used, or other reasons (e.g., a duty to report)

Due to the single-subject design of the study, and the depth with which the participant’s life experiences will be examined, it will likely be impossible to maintain 100% confidentiality of the participant’s identity from those who may be familiar with the participant. Despite the use of a pseudonym and the altering of identifiable details, the participant will be made aware that there is the potential for her to be recognized. The participant will be informed of this risk prior to the initiation of the study and that because this is a thesis project, the final research report will be a public document. If the participant is uncomfortable with this risk she is under no obligation to agree to participate.

25. DATA SECURITY, RETENTION AND ACCESS

(a) Describe how data (including written records, video/audio recordings, artifacts and questionnaires) will be protected during the conduct of the research and dissemination of results.

All interview recordings and transcriptions will be created on a password protected computer belonging to the principal investigator. The interviews will be recorded using the “sound recorder” program on the principal investigator’s laptop which is a local program which simply saves the files to the computer’s hard drive. The interview data will then be transferred to an encrypted USB key and deleted from the laptop. Only the principal investigator will have access to the USB key. Because interview transcriptions will also be provided to the participant throughout the inquiry, the participant will advised to store these in a secure and private location.

Informed consent documents will be stored in a locked drawer in the Dr. Kerr’s office into which she and the principal investigator will have sole access. This location is separate from where the interview transcripts and recordings will be stored with the principal investigator in order to de-link the data and consent documents.

(b) Explain how long data or samples will be retained. (If applicable, referring to the standard data retention practice for your discipline) Provide details of their final disposal or storage. Provide a justification if you intend to store your data for an indefinite length of time. If the data may have archival value, discuss how participants will be informed of this possibility during the consent process.

As per standard practice, the data will be stored for five years after the completion of the study. At this point, all interview recordings and transcriptions will be permanently deleted.

(c) If participant anonymity or confidentiality is not appropriate to this research project, please explain.
(d) If data will be shared with other researchers or users, please describe how and where the data will be stored and any restrictions that will be made regarding access.

The data will only be shared with the graduate supervisor of this project, Dr. Gretchen Kerr. Interview transcriptions may be sent to Dr. Kerr via email at which point they may be saved on her password protected computer. Dr. Kerr will delete her copies of the data based on the same protocol as the original data.

SECTION F – LEVEL OF RISK AND REVIEW TYPE

See the *Instructions for Ethics Review Submission Form* for detailed information about the Risk Matrix.

26. RISK MATRIX: REVIEW TYPE BY GROUP VULNERABILITY and RESEARCH RISK

(a) Indicate the Risk Level for this project by checking the intersecting box

<table>
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<th>Research</th>
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<tbody>
<tr>
<td>Group Vulnerability</td>
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</tr>
<tr>
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</tr>
<tr>
<td>Medium</td>
<td>1</td>
</tr>
<tr>
<td>High</td>
<td>2</td>
</tr>
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(b) Explain/justify the level of research risk and group vulnerability reported above:

The group vulnerability is medium because the participant will have been diagnosed with clinical depression at some point in her life. This inclusion criterion represents a pre-existing vulnerability that may cause the participant to be at an increased risk for a negative psychological response to the topics discussed in the interviews. With respect to research risk, this has been designated as medium because of the sensitive nature of the inquiry. The purpose of the study is to explore the relationship between elite sport participation and mental health, therefore the participant will be asked to discuss her experiences with mental illness. It is possible that the interviews may cause the participant to experience emotional distress, however we anticipate that the protective measures that will be put in place regarding the inclusion criterion of being in a state of recovery from depression and the ability of the participant to cease an interview or withdraw from the study at any time will reduce this risk.

(Please note that the final determination of Review Type and level of monitoring will be made by the reviewing University of Toronto REB)

Based on the level of risk, these are the types of ethics review that an application may receive:
Risk level = 1: Delegated Review;     Risk level = 2 or 3: Full Board Review

For both delegated and full reviews (SSH&E, HS, or HIV), please submit one electronic copy of your application and all appendices (e.g., recruitment, information/consent and debriefing materials, and study instruments) as a single Word document or a pdf. Do not submit your entire research proposal. Please ensure that the electronic signatures are in place and e-mail to new.ethics.protocols@utoronto.ca

The deadline for delegated review (SSH&E or HS) is EVERY Monday, or first business day of the week, by 4 pm. Information about full REB meeting and submission due dates are posted on our website (SSH&E, HS or HIV).

HIV REB reviews all applications at full board level but applies proportionate review based on the level of risk.

All other submissions (e.g., amendments, adverse events, and continuing review submissions) should be sent to ethics.review@utoronto.ca

SECTION G – SIGNATURES

27. PRIVACY REGULATIONS

My signature as Investigator, in Section G of this application form, confirms that I am aware of, understand, and will comply with all relevant laws governing the collection and use of personally identifiable information in research. I understand that for research involving extraction or collection of personally identifiable information, provincial, national and/or international laws may apply and that any apparent mishandling of personally identifiable information must be reported to the Office of Research Ethics.

For U of T student researchers, my signature confirms that I am a registered student in good standing with the University of Toronto. My project has been reviewed and approved by my advisory committee or equivalent (where applicable). If my status as a student changes, I will inform the Office of Research Ethics.

Signature of Investigator: ___________________________ Date: May 26, 2016

***For Graduate Students, the signature of the Faculty Supervisor is required. For Post-Doctoral Fellows and Visiting Professors or Researchers, the signature of the Faculty Sponsor is required.

In addition to the supervisor/sponsor, the chair or the dean of the UoT sponsor’s/supervisor’s department is required to approve and sign the form***

As the UoT Faculty Supervisor of this project, my signature confirms that I have reviewed and approve the scientific merit of the research project and this ethics application submission. I will provide the necessary supervision to the student researcher throughout the project, to ensure that all procedures performed under the research project will be conducted in accordance with relevant University, provincial, national or international policies and regulations that govern research involving human subjects. This includes ensuring that the level of risk inherent to the project is managed by
the level of research experience that the student has, combined with the extent of oversight that will be provided by the Faculty Supervisor and/or On-site Supervisor.

As the UofT Faculty Sponsor for this project, my signature confirms that I have reviewed and approve of the research project and will assume responsibility, as the University representative, for this research project. I will ensure that all procedures performed under the project will be conducted in accordance with all relevant University, provincial, national or international policies and regulations that govern research involving human participants.

Signature of Faculty Supervisor/Sponsor: ___________________________ Date: May 31st, 2016

As the Departmental Chair/Dean, my signature confirms that I am aware of the requirements for scholarly review and that the ethics application for this research has received appropriate review prior to submission.

In addition, my administrative unit will follow guidelines and procedures to ensure compliance with all relevant University, provincial, national or international policies and regulations that govern research involving human participants. My signature also reflects the willingness of the department, faculty or division to administer the research funds, if there are any, in accordance with University, regulatory agency and sponsor agency policies.

Print Name of Departmental Chair/Dean (or designate): Luc Tremblay

Signature of Departmental Chair/Dean: ___________________________ Date: May 31, 2016
(or authorized designate)