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Exploring the lived experiences of Player welfare officers within elite football and rugby league environments.

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by

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Table of Contents

<i>Acknowledgements</i>	<i>IV</i>
<i>Abstract.....</i>	<i>v</i>
<i>Chapter 1: Introduction</i>	<i>1</i>
1.1 Increased acknowledgment of athlete mental health and wellbeing	1
1.2 Previous research	2
1.3 Player Care Standards	4
<i>Chapter 2: Literature Review</i>	<i>8</i>
2.1 Mental health within elite sporting environments.....	8
2.2 Eating Disorders	9
2.3 Anxiety in elite sport	11
2.4 Substance Abuse	13
2.5 Transitioning.....	15
2.6 Help seeking.....	16
2.7 Care within sports coaching	18
2.8 Player support within sporting environments.....	23
2.9 Sport psychology	23
2.10 Sport Chaplaincy.....	25
2.11 Safeguarding Officers.....	27
2.12 Player welfare officers	28
2.13 Theoretical Framework.....	33
<i>Chapter 3: Methodology</i>	<i>37</i>
3.1 Brief introduction.....	37
3.2 Qualitative research	37
3.3 Philosophical Orientation.....	38
3.4 Participants and sampling approach	41
3.5 Qualitative Interviews – a rationale.....	44
3.6 Interview Process	46
3.7 Data analysis and judging quality	50
<i>Chapter 4: Findings</i>	<i>55</i>
4.1 Theme One: Mental Health Support and Life Skills Preparation	55
4.1.1 Sub-theme One: Managing Common Stress Related Concerns.....	55
4.1.2 Sub-Theme Two: Taking an athlete-centred approach to care and support	60
4.1.3 Sub-theme Three: Preparing athletes for life beyond sport	65
4.2 Theme Two: The Challenge to Care in Sport	70

4.2.1 Sub-theme One: An Ambiguous Role	70
4.2.2 Sub-theme Two: Fighting indifference and overcoming the stigma of help seeking	77
4.2.3 Sub-theme Three: Work life balance and establishing boundaries	83
4.3 Theme Three: The Micro-politics of Care	88
4.3.1 Sub-theme One: Increasing visibility and gaining buy-in.....	88
4.3.2 Sub-theme Two: Rapport building and ‘getting to know’ athletes as ‘human beings’ ..	91
4.3.3 Sub-theme Three: Spreading the ‘responsibility’ for care	98
<i>Chapter 5: Discussion.....</i>	<i>103</i>
<i>5.1 Methodological strengths and implications</i>	<i>110</i>
<i>5.2 Future recommendations</i>	<i>113</i>
<i>5.3 Final Reflections</i>	<i>115</i>
<i>Chapter 9: References</i>	<i>117</i>
<i>Chapter 10: Appendices</i>	<i>137</i>
Appendix A: Approval of Ethics	137
Appendix B: Interview Guide	138

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Abstract

Background

The rising concerns regarding the increase in mental health problems has compelled elite sport to consider the structures they have in place to support the complex needs of high-performing athletes. One outcome of this development has been a focus on creating player welfare officer (PWO) roles within elite environments (EFL, 2022; Rugby League Cares, 2022). The primary aim of this research is to investigate the lived experience of these practitioners and to identify the challenges they face on a daily basis.

Method

Using a combination of purposive and snowball sampling, a total of six full-time PWO's were recruited from a professional football and rugby league background. Semi-structured interviews enabled participants to discuss the PWO role in detail (Smith & Sparkes, 2016). The interviews were individually transcribed and analysed using thematic analysis (Braun & Clarke, 2013; 2019; 2020).

Results

Three overarching themes were identified, which included mental health support and life skill preparation, the challenge of care in sport and the micro-politics of care. Overall, it was clear that PWO's evidenced engrossment and empathy, when helping players during important career milestones (Noddings, 1988, 2003, 2005). However, the role presents a number of challenges including feelings of uncertainty regarding job expectations (Armour, 2011; Cronin & Armour, 2018; Dohnsten et al., 2020; Lewis et al., 2022). PWO's implemented various strategies such as boundary setting, in attempt to deal with challenging workloads. PWO's also attempted to create care webs with the intentions of developing a 'climate of care' that may encourage athletes to help-seek (Cronin, 2019; Lewis et al., 2022).

Conclusion

Unfortunately, it is clear that player care is underfunded, requires long hours of work, and is not widely accepted within elite environments. These challenges require PWO's to employ a series of micro-political strategies to enhance or sustain their own position and to provide a web of care. The findings have implications for governing bodies of sport who value the provision of care.

Chapter 1: Introduction

1.1 Increased acknowledgment of athlete mental health and wellbeing

Elite athletes are exposed to a considerable number of physical and psychological challenges including heavy training loads, injury, precarious contracts, and fear of disappointment. These stressors are thought to increase their risk of developing ill-health, or even mental health disorders (Foskett, 2018). Indeed, research has shown that 47.8% of 143 athletes in the UK exhibit signs of depression and anxiety at some stage of their professional career. Clearly, finding like these emphasise the need for an increase in support structures (Foskett, 2018) that seek to foster athlete health and well-being. Greater consideration is now being given to the challenges that athletes are facing in regard to their mental health and emotional wellbeing, with some organisations employing player welfare officers to introduce support structures and facilitate athlete care. In addition, many elite clubs have introduced counselling qualifications and encourage staff to undergo a mental health first aid qualification to educate themselves on common mental health disorders such as depression and anxiety (Roberts et al., 2016). Even though mental health awareness is becoming increasingly acknowledged, player care is still evolving at a slow rate due to a range of barriers.

Although the likelihood of athletes experiencing a mental health disorder is influenced by their ability to cope with the challenges of elite sport, it's likely that most athletes will need to help-seek at least once in their career (Holland et al., 2010; Mellalieu et al., 2009; Rice et al., 2016). It is encouraging to see an increased number of athletes speaking up about their personal experiences of dealing with high pressure and expectations. In one high profile example, a recent documentary directed by Smith (2022) focused on the English footballer, Wayne Rooney, and his personal account of the challenges he faced throughout his career. For example, Rooney revealed that he was expected to balance the pressure of his education and a teenage social life alongside his athletic career, which led to him engaging in anti-social behaviour within his recreational time. Throughout his early career, the media portrayed Rooney as the 'golden boy' who was going to become the next David Beckham with his original playing style. The documentary highlighted how much was expected of Rooney from a young age alongside other challenges such as media coverage, injury, social pressure to perform and the lack of opportunity to develop within the 'norm of society' (Stead, 2003; Kristiansen et al., 2003; Larkin, 2017), that young athletes are often exposed to. It is evident

that athletes require access to sustained and structured care but little is understood about how care/ support is made available to athletes and what guidance practitioners receive to aid in the facilitation of care. With the increasing emphasis placed on athlete welfare, it is important to briefly map previous research that has sought to understand care systems that are currently in place.

1.2 Previous research

Research has tended to view athlete development through a bioscientific lens, employing various disciplinary perspectives to accelerate and improve athlete performance. Over many years, there has been a wide range of research surrounding the development of elite athletes and the various factors that can affect the physical and psychological development within this field. Take, for example, Lloyd and Oliver's (2019) work covering a variety of strength and conditioning practices, ranging from agility training, flexibility training and periodisation strategies, to talent identification and monitoring of young athletes. Additionally, there has been an increased focus on the physiology of elite athletes including aspects such as oxygen consumption, and the tests that can be undergone to better understand how these aspects can be changed to gain an advantage in competitive scenarios (Tanner & Gore, 2012). In elite sport, a wide variety of practitioners are in place to contribute to an athlete's development, including sport scientists. This role primarily focuses on factors that can enhance physical development, such as exercise physiology and biomechanics. Sports Scientists use technology such as GPS to determine factors like athlete workload (Kim, 2019). The ultimate goal of these scientists is to improve the physical performance of athletes, but these practitioners also devote considerable attention to injury prevention and sport rehabilitation. For example, Shield and Bourne (2018) explored how hamstring injury might be prevented within running-based sports through the monitoring of workload. Furthermore, sport psychologists form an integral part of multi-disciplinary teams, using specific techniques (such as self-talk) to induce psycho-behavioural change in athlete performance (Anderson et al., 2002). These practices aim to positively enhance an athlete's mental performance. Researchers such as Cook et al (2014) investigated mental toughness among an English premier League football academy, and Cumming and Williams (2012) investigated the use of imagery as a performance enhancing technique. These researchers revealed how the expertise of psychologists can improve the mental performance of athletes.

In addition to the above roles, performance analysts also form an integral part of a multi-disciplinary team by investigating actual sport performance, with the aim of developing a wider understanding of a sport to inform decision-making processes that can enhance technical and tactical performance (Haines, 2013; O'Donoghue, 2010). A performance analysts role involves providing athletes and coaches with feedback on performance, with the aim of athletes reflecting on and improving their future performances (Haines, 2013). Performance analysts use video clips and statistics on performances to give feedback to athletes. These statistics may come from the GPS units that sports scientists encourage athletes to use, enhancing the importance of a multi-disciplinary approach towards athlete development. Although this body of research contributes towards an understanding of the many roles that influence athlete development, It does not enhance awareness surrounding the care and support systems that are made accessible to elite athletes throughout their careers. There is also a lack of research revealing why elite sport needs to increase caring roles such as player welfare officer roles and a lack of research surrounding the importance of these roles in relation athlete wellbeing and development.

Until recently, little effort has been made to put systems in place that provide athlete's with access to care. This has changed with the advent of roles that aim to prioritise the mental and emotional wellbeing of athletes. It is clear that the concept of athlete care needed to be revisited due to the rise of mental health concerns among existing and retired athletes. Research has revealed the wide-ranging pressures that athletes face on a daily basis and revealed how these challenges can have a negative impact on their mental and emotional wellbeing. For example, Wolanin et al. (2015) and Bauman (2015) note that elite athletes are increasingly likely to develop mental health disorders due their increased exposure to stress and high pressurised environments, with as high as 21% of 257 young athletes experiencing symptoms of depression at least once in their career (Wolanin et al., 2015).

Although there's a scarcity of research surrounding the lived experiences of player welfare officers, a number of recent papers have shed light on the nature of this role. In one such study, Lewis et al. (2018) focused on the role of a player welfare officer (PWO) within rugby league and addresses some of the challenges that player welfare officers face within rugby league environments. The research mainly focuses on athlete perceptions of PWO's rather than the personal accounts of player welfare officers themselves (Lewis et al., 2018). Similarly, Lewis et al. (2016) also explored the challenges that super league player welfare

officers face and how they support athletes and their mental health. This research has clear relevance to the current project as it sheds light on the nature of the role. Furthermore, Lewis et al.'s (2016) explored the actions and strategies of player welfare officers and how they enact care.

Although the above research is evidence of mental health being acknowledged, it is also evidence of mental ill health being highly prevalent among athletes and the need for increased awareness surrounding the openness of experiencing mental ill health. As the percentage of athletes thought to be experiencing symptoms of mental ill health rises (Rice et al., 2016; Wolanin et al., 2015), it is clear that athletes need increased access to care and that support systems need to be put in place in order to support athletes emotional and mental wellbeing.

1.3 Player Care Standards

Concerns regarding the increase in mental health problems has compelled sporting organisations to consider the structures and support networks they have in place to support the complex needs of high-performing athletes. One outcome of this development has been a focus on creating player welfare officer roles within elite environments such as rugby league and football. For example, organisations such as Rugby League Cares (RLC) have a team of PWO's that aim to support player care through the implementation of mental health and wellbeing support, counselling, post-sport transitioning and education support (Rugby League Cares, 2022). Furthermore, the English Football League (EFL) have introduced further funding for player care, encouraging the appointment of player welfare roles within first team and academy environments. In order to understand the overall expectations of the role, the EFL (2022) created a template that outlines player care standards within an academy, highlighting the responsibilities of the role. This document is referred to as "Academy Player Care Standards" and outlines the minimum standards of care that need to be implemented within academies by PWO's. See Table 1 below for examples extracted from the EFL's player care standards document.

Table 1.0: EFL Examples of Academy Player Care Standards

Inductions for new players	To safely and properly induct new players to the academy and its development program, catering for individual needs. There needs to be a time-based induction plan/strategy to include pre-signing, signing and post-signing for all new players across all age groups at the academy.
Exiting Players	The academy needs to follow an age-appropriate exit strategy and player care needs to be informed at the earliest point. There needs to be a time-based transition plan for before, during and after exit. This plan needs to be age-appropriate and be tailored to all age groups across the academy.
Mental and Emotional Wellbeing (MEW)	Workshops focusing on MEW should be made available for players, parents, and staff. The club should have methods in place to identify concerns (such as screening) and have access to referral pathways.
Equality, Diversity, and Inclusion	Equality and diversity training should be delivered to all academy staff and players each season.
Life Skills	The academy should deliver a life skills programme focusing on age-appropriate workshops that address relevant skills. All age groups should have access to the life skills programme and this should be regularly reviewed. Attendance logs of each workshop should be logged against a players records.

As seen above some of the EFL's responsibilities consisted of helping players during their induction and exiting, providing mental and emotional wellbeing support, implementing the Equality, Diversity, and Inclusion programme, and helping players develop life skills. In comparison to Rugby League Cares, the standards are broadly similar in respect of player welfare and transition support but some differences are evident. Rugby League Cares and the EFL differ because Rugby League Cares is a charity that requires funding to offer support to players (Rugby League Cares, 2022), and therefore have different programmes/standards to the EFL. See Table 2 below for some key details relating to the Rugby League Cares programmes.

Table 2.0: Rugby League Cares

Player Welfare Programme	Rugby League Cares works in partnership with the Player Welfare Officers within the Super League clubs, Championship Clubs and RFL to protect and nurture the health and wellbeing of players. Rugby League Cares offers practical advice and signposts players towards experts who have the skills and experience to help them. The charity has a dedicated player welfare team who can help guide players to gain medical advice, counselling, and family support. Players can approach the player welfare officer at their club to ask for advice on signposting or they can directly contact Rugby League Cares themselves.
Transition Programme	Rugby League Cares offers players a range of grants and awards to help them gain the academic or vocational qualifications to become successful off the pitch. They also provide access to professional careers advice for all current and former players

	gain the qualifications they may need to begin careers off the pitch.
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Using the preceding information as a starting point, the current study aims to better understand how player care is implemented as well as understand how role expectations may differ and affect a player welfare role within an elite football and rugby league environment. To understand the perceived differentiation, personal accounts from PWO's within these sports are used to enable a broader insight into the roles they are expected to fulfil. It is hoped that by shedding light on this subject, it will be clearer to sporting organisations what they need to improve upon to make player care standards increasingly consistent across the board. Even though sporting organisations are attempting to increase the number of caring roles within elite sport with the aim of addressing athlete welfare, the answer to whether athlete care will be made a priority in the future and how long this will take to implement still remains vague. By broadening research within this area, it may be possible to assist in the development of caring roles, by building awareness on the importance of the role and addressing the barriers that caring practitioners face on a daily basis.

As outlined above, there is previous research that has addressed the job role of a player welfare officer, such as Lewis et al.'s (2016) work exploring players perceptions of PWO's. The current study hopes to build on existing research by shedding further light on the role played by player welfare officers within a rugby league environment but also to explore the experiences of those within football. It is hoped that this research can not only assist in building a culture of openness in relation to athlete care and mental health, but also help assist those within existing caring roles through outlining the challenges they are faced with and the strategies that they attempt to implement to overcome these. For this reason, this research aims to address the welfare of athlete within elite sport and investigate the emotional and educational support that is made available to them throughout their athletic careers. In summary, the primary aim of this research is to investigate the lived experience of player welfare officers including an exploration of the challenges and strategies they implement to fulfil their role and responsibilities.

Chapter 2: Literature Review

2.1 Mental health within elite sporting environments

Recent years have seen an increase in research addressing the mental health and wellbeing of athletes within sporting environments. This research has highlighted the importance of athlete support (Rice et al., 2016) at various levels, but less attention has been devoted to the support systems made available to these athletes. In general, most research has focused on the benefits of taking part in ongoing physical activity but paid less attention to the challenges faced by elite athletes including the relationship between athlete performance and mental health disorders (Kola-Palmer et al., 2019). The likelihood of an athlete developing a mental health disorder is heightened by the presence of stressors and challenges associated with elite sport (Bauman, 2015). It is difficult, however, to identify the exact percentage of elite athletes that develop a mental health disorder over the course of their career but nevertheless, Longstaff and Foskett (2018) conducted a study on the mental health of elite athletes within the UK, consisting of 143 elite athletes completing an online survey on their mental health. 47.8% of participants had shown signs of depression and anxiety at some stage in their professional career. Although the research by Longstaff and Foskett (2018) may not be illustrative of all professional athletes, the research suggests that elite athletes are vulnerable to mental health challenges.

Due to the rise in concerns surrounding athlete mental health and wellbeing, efforts have been made to increase the support on offer to athletes. For example, many elite sports clubs have introduced counselling services and encourage members of staff to get basic training on supporting athletes with common mental health disorders such as depression and anxiety (Roberts et al., 2016). Sport psychologists argue that an athlete's ability to cope with challenges posed by elite sport (e.g., overtraining, injury, and fear of failure) determines the likelihood of them experiencing anxiety and depression (Holland et al., 2010; Mellalieu et al., 2009; Rice et al., 2016). To fully understand the demands placed on elite athletes, it is important to acknowledge that they are expected to perform under highly controlled and pressurised conditions, while overcoming the physical and psychological pain that accompanies efforts to push the limits of performance (Jones et al., 2002; Larkin et al., 2017). These pressures include the fear of being dropped, maintaining competitive success, retaining a new contract as well as staying injury free (Larkin et al., 2017). Morton and Roberts (2013)

found that various practitioners that were supporting athletes with mental health concerns, admitted that success within a club, fear of failure and balancing other life commitments increased the development of negative affect. These, and other pressures, might lead to some athletes playing through pain or rushing the recovery process (Appaneal et al., 2009; Cresswell & Eklund, 2007). The proceeding evidence points to the wide range of factors that might compromise athlete mental health and wellbeing. The remainder of the literature review will identify some of the mental health conditions faced by elite athletes including eating disorders, generalized anxiety and substance abuse whilst considering how the nature and demands of elite sport might contribute to these conditions. Following this, the review explores the challenges presented by sporting retirement before considering the importance ‘help-seeking’ represents in dealing with these and other challenges. Next, I introduce and explain the concept of ‘care’ before detailing the various roles that exist within elite sport to improve athlete mental health and wellbeing. The review concludes by providing an overview of the theoretical frameworks that will be used to structure and guide the current study.

2.2 Eating Disorders

With the added pressure of being publicly evaluated, some elite athletes may place pressure on themselves to maintain a certain weight and conform to a certain bodily ideal (Miller, 2012). With these expectations, many athletes turn to self-surveillance to control their diets and sometimes develop disordered eating (Jones et al., 2015; Lang, 2015; McMahon & Dinan Thompson, 2012). Atkinson (2019) found that athletes may engage in unhealthy dietary routines to lose weight and gain an advantage during performances such as swimming and athletics. Glazer (2008) argued that athletes may engage in disordered eating to change their appearance to increase the efficiency with which they move when performing skills. In addition, research also suggests that in sports such as figure skating, gymnastics and bodybuilding, there is an increased risk of developing eating disorders due to other athletes perceiving mass weight loss or weight gain as an achievement, encouraging role model perceptions of teammates who take on board these approaches (Bar et al., 2016; Baum, 2006; Cosh et al., 2019). Among team sports there is increased pressure to engaging in unhealthy practices such as disordered eating if these are normalised by coaches and other authority figures. A number of studies have pointed to the prevalence of disordered eating amongst high level athletes and suggested that institutional attitudes and expectations about what

constitutes a 'fit' and healthy athletic body has a profound impact on an athletes' relationship with food. Indeed, we see a discourse in performance sport that adherence to a strict and highly regulated diet is required to improve performance (Atkinson, 2019). For example, Nutritionists may suggest high protein diets in sports such as rugby to enhance muscle building. Sports (such as swimming) maintain ideologies such as having to be 'slim to win', resulting in athletes engaging in dangerous eating practices to fulfil the dominant social idea of being 'fatless' to increase performance achievement (Atkinson, 2019; McMahon & Dinan-Thompson, 2008). However, there is little evidence to support the need for weight regulations in sports such as swimming and little evidence to support the claims that lower skinfold results improve athletic performance (McMahon, 2020). Furthermore, previous research has highlighted concerns surrounding the ideologies of 'slim to win' and 'win at all costs' mentalities, revealing that some athletes experienced verbal abuse from their coaches when their body did not meet the coaches expectations (Monsma & Malina, 2004; Muscat & Long, 2008; McMahon, 2020). With this in mind, it is important to acknowledge that eating disorders do not only affect an athlete during their athletic career but can have long-term effects for up to thirty years after they have left sport (McMahon, 2020). A study conducted by McMahon (2012) surrounding eating disorders and female athletes, for example, found that female athletes who were using unhealthy bodily practices such as starvation throughout their careers, admitted to still using the same practices for a number of years after transitioning out of sport. McMahon (2012) findings suggest that eating disorders may follow athletes beyond sport and throughout their lives.

In addition, Rosendahl et al. (2009) conducted research based on dieting and eating disorders among male elite athletes and found that 59% of young male elite athletes were dissatisfied with their body, whilst 19% were on a diet and 11% had existing eating disorders. Compared to the males in the general population, male elite athletes are increasingly vulnerable to developing eating disorders (Baum, 2006; Souter et al., 2018). The aspect that remains concerning is that eating disorders among male athletes are less recognised compared to female athletes, increasing the danger of these disorders going unnoticed (Baum, 2006). In many male-dominated sports there are perceptions of male athletes conforming to traditional male gender norms such as dominance and power, these norms can often lead to male athletes being dissatisfied with their body and muscle mass, turning to eating disorders to change their appearance (Griffiths et al., 2015; Eichstadt et al., 2020). Furthermore, it is common for males to avoid seeking help due to shame and the general stigmas surrounding masculinity

and mental health disorders resulting in athletes suffering long-term throughout their athletic and non-athletic careers (Martin & Anderson, 2019). With the extensive research surrounding eating disorders and elite athletes, it is clear that athletes face various pressures that can lead to conformity within different sporting environments and this conformity can be influenced by coaches, general stigmas or the athletes surrounding them (Baum, 2006; Eichstadt et al., 2020; Griffiths et al., 2015). What remains less understood are the reasons surrounding why athletes do not seek help for these disorders and why these disorders can go unnoticed for long durations (Darko, 2009).

2.3 Anxiety in elite sport

Due to the demands placed on elite athletes, it is not uncommon to hear of athletes who struggle with anxiety disorders such as generalised anxiety. Combined anxiety disorders affect around 12% of the general population and around 8.6% of elite athletes (Rice et al., 2019). Anxiety is typically characterised by feeling such as fear, worry, apprehension, and tension in response to something we perceive as a threat (Rice et al., 2019). The most common types of anxiety disorders experienced by the general population include Generalized Anxiety Disorder (GAD), Social Anxiety and Post-Traumatic Stress Disorder (PTSD) (Freeman, 2012). When individuals experience anxiety, they may get a sense of worry and feel that something is wrong in their lives or current situation (Hanin, 2010). In relation to sport, some athletes may experience performance anxiety which relates to the worry, fear or apprehension associated with not being able to perform in line with their own expectations or those of significant others (e.g., coaches, parents; Hanin, 2010). Having anxiety not only affects an athlete's personal life but also their athletic career due to anxiety symptoms disrupting stimulus processing and information selection, which are important attributes within elite sport (Rice et al., 2019). Athletes who have suffered previous injury or had to undergo surgery are suggested to be increasingly likely to suffer from common mental health disorders, with evidence from Souter et al. (2018) highlighting that athletes who face injury have higher depression and anxiety scores than non-injured athletes. With this being said, it is important to acknowledge that sports injuries not only have a physical effect on an athlete but can also have a further emotional impact on an athlete (Walker et al., 2011) owing to the emotional and psychological challenges associated with the rehabilitation process or concerns about how an injury might impact their future performance.

Anxiety may be common among injured athletes because they fear re-injury which may have a further negative affect on self-confidence due to a lack of trust in the previous area of injury (Heil, 1993; Taylor & Taylor 1997; Walker et al., 2011). Walker et al. (2011) highlighted that 57.1% of injured athletes among a U.S. ski team reported the fear of re-injury, with the fear of losing out on daily practices and losing out on their normal schedule outside of sport. Depending on the seriousness of their injury an athlete may become increasingly worried about being able to continue day to day activities such as family quality time and interacting with their children. Although athletes feeling anxious about re-injury is normal, help-seeking for this anxiety is less known. Help-seeking may be affected by the stigmas associated with anxiety and injury.

Athletes might avoid help-seeking for fear of being labelled 'soft' by teammates if an injury isn't obvious or visible or seen as 'lazy' if they need a recovery period from training (Roderick, 2006a). These stigmas may heighten an athletes general anxiety due to being perceived negatively by others around them and they may fear that the public may also perceive them in a similar way when out of a sporting environment. Heightened anxiety may make an athlete feel reluctant about help-seeking and without an athlete communicating their injury, it is difficult for medical practitioners to understand an injury and support the recovery process (Roderick, 2006a). Research highlighting the reluctance of athletes to seek help emphasises the need for practitioners to continue normalising help-seeking and portray help-seeking in a positive manner (Glick & Castaldelli-Maia, 2016).

Furthermore, athletes might experience heightened anxiety because of disappointment, fear of deselection and performance dissatisfaction, leaving them vulnerable to distress (Souter et al., 2018). Longstaff and Foskett (2018) conducted a study that investigated anxiety, depression and distress among 143 elite athletes across a range of sports in the UK. The survey responses helped to identify factors that may cause anxiety, depression and distress to athletes. Overall Longstaff and Foskett (2018) found that 47.8% of the sample displayed signs of anxiety in relation to career dissatisfaction. 32.2% of the 47.8% of respondents that displayed signs of anxiety were aged 16-24. This research could indicate that the ages 16-24 can be an important timeframe in youth sport, with career satisfaction being related to the awarding of scholarships and contracts (Hague & Law, 2022). The additional pressure of 'earning' a professional contract may cause a level of anxiety among athletes, but the additional aspect of transitioning to a new phase may also contribute to feelings of anxiety.

Hague and Law (2022), investigated transition experiences of youth academy footballers by conducting interviews with twelve academy footballers aged 17-19. Findings revealed that some youth athletes aged 17-19 can experience 'initial transitional shock' which can be affected by friendships, learning to adjust to new training regimes and managing new relationships with staff. For youth athletes, the worry of adjusting to more intense training and building relationships with new players/coaches may contribute to feelings of anxiety as coach-athlete relationships can affect athlete future development. Alternatively, athletes may experience anxiety if they have a fear of not being offered a scholarship or contract. Athletes may be worried about transitioning into a new phase within their sport but athletes may also be worried about transitioning away from sport if they are released (Hague & Law, 2022). A 'smoother transition' in sport takes place when one has a strong athletic identity. Athletes who are released may only know of their athletic identity therefore may develop anxious feelings surrounding alternative pathway that they need to plan post career (Hague & Law, 2022). Across a variety of ages in elite sport, it is apparent that athletes display vulnerability of their profession, which could contribute to feelings of distress and anxiety surrounding their position as an athlete (Hague & Law, 2002; Roderick, 2014).

Overall, it is apparent that anxiety can affect athletes in a variety of ways, including injuries and lengthy rehabilitation processes (Walker et al., 2011), career disappointments (Longstaff & Foskett, 2018), and transitions as they progress through the sporting system and transition away from it (Hague & Law, 2002; Roderick, 2014). It is also clear that anxiety can affect athletes across a variety of age groups and this is not just limited to those who have existing professional contracts (Hague & Law, 2022; Longstaff & Foskett, 2018). The question that remains unanswered relates to what support networks surround athletes to help them feel supported throughout the career changes and what job roles help athletes prepare for these changes across a variety of ages.

2.4 Substance Abuse

There are many reasons why athletes may use substances in elite sport. Most commonly, athletes are known to use substances (e.g., Anabolic Steroids) to enhance performance in a variety of ways such as building strength and endurance (McDuff et al., 2019). Certain substances can also help athlete recovery and allow athletes to recuperate quicker by

increasing oxygen in the bloodstream (Gallman, 2011). For athletes who are injured and undergoing rehabilitation, they may turn to substance use to hasten the recovery process, such as Opioids for pain management and/or the use anti-inflammatories (Gallman, 2011). Understandably, being injured can be frustrating for athletes and it is not unknown for athletes to experience higher levels of anxiety and anger when undergoing rehabilitation, therefore, injured athletes may also turn to substances (such as alcohol) as a coping strategy, helping them feel less anxious/worried about when they might return to play (Masten et al., 2014).

Although physical activity is typically known to reduce stress, anxiety and drug use, as discussed above, elite sport can often increase anxiety among athletes due to the pressure to perform, uncertainty of contracts and adjusting to 'life after sport' (Hague & Law, 2022; Longstaff & Foskett, 2018). Knight et al. (2016) investigated the role of sport in the development of substance addiction and found that the termination of sports participation can contribute to an increase in substance use. Athletes who are transitioning away from sport can appear increasingly vulnerable, potentially engaging in substance misuse as a method to 'fill the void' and using substances as a coping strategy to process the loss of their athletic identity (Knight et al., 2016). The use of substances can cause short-term consequences such as changes in physical (such as kidney problems) and mental functioning which can impact an athletes performance (Dunn et al., 2010). Certain substances are prohibited in sport and athletes are subject to randomised drug tests, but this does not deter all athletes from substance misuse as they may find a form of comfort/relief in using (Dunn et al., 2010).

Athletes are also known to use a variety of substances for recreational use such as alcohol, nicotine and cannabis (McDuff et al., 2019). Most commonly, it is known for some athletes turn to alcohol. Alcohol misuse is often used by athletes to help with stress relief, and help with negative emotions and withdrawal (Morse., 2013). Du Preez et al. (2017) conducted research investigating alcohol use among elite rugby league players and found that 68.6% of these athletes consume an excessive amount of alcohol pre-season and 62.8% consume an excessive amount of alcohol in-season. Excessive alcohol consumption could be attributable to a number of factors. For example, the desire to celebrate success or 'drown one's sorrows' (i.e., using alcohol as a coping mechanism; Baron et al., 2013). In addition to alcohol consumption, Du Preez et al. (2017) highlighted that 14.6% of the rugby players suffer from anxiety pre-season and 10% suffer from anxiety in-season. Placing large amounts of stress on

athletes not only increases the likelihood of developing common mental health disorders such as depression and anxiety, but also increases the likelihood of elite athletes carrying these disorders into their retirement (Souter et al., 2018; Larkin et al., 2017). Carrying this burden into retirement can often lead to athletes finding other methods to cope with their feelings. This can result in athletes continuing to use substance abuse to mask their emotions (Souter et al., 2018). The long-term effects of substance misuse can have consequences on brain development, liver damage, changes in mood such as aggression and on some occasions weight gain (Boden & Fergusson, 2011). If dependent on substance misuse and experiencing health related issues, one may be required to undergo rehabilitation and transition away from substances. More often than not, the transition away will negatively impact mental health and additional support is needed throughout rehabilitation (Boden & Fergusson, 2011).

2.5 Transitioning

Many of the subjects addressed above, such as substance abuse and eating disorders, may be carried with an athlete beyond sport and into their personal lives. For this reason, it is important to consider how supporting athletes through various transition periods may aid in the prevention or identification of these concerns, by making athletes feel prepared when they are taking a next step such as retirement. The term ‘transition’ has often been related to a variety of topics such as educational processes, occupational planning, and life development but in general, the concept refers to one or more specific event that can change an individual’s assumption about themselves and may disturb social equilibrium within their everyday life (Wylleman et al., 2004). The variety of transition periods throughout sport ranges from beginning a new career, retirement, moving clubs or even supporting younger athletes through their education. In sport, transitioning throughout these periods can often increase emotional difficulties for athletes and potentially result in the development of mental health disorders (Bruner et al., 2008). Elite athletes often dedicate their life to sport from an early age and their identity is formed through this process (Bernes et al., 2009). Particularly when athletes transition into sport, they enter a developmental phase in which they may struggle to adopt a new set of behaviours and beliefs. These include accepting the sacrifice of free time and investing time into relationship building among teammates (Bloom., 1985). The demand of hard work, intensity and commitment is increased and an athlete is expected to manage these demands to further their career prospects (Bruner et al., 2008; Bloom, 1985).

Furthermore, although around 80% of athletes struggle to adapt from transitioning out of sport, many will adjust around two years post-retirement through aspects such as gaining a new career or broadening their identity by gaining a new hobby (Stambulova & Wylleman, 2014; Torregrosa, Reguela & Mateos, 2020). However, the remaining 20% of athletes are described as experiencing a ‘crisis transition’, in which they are unable to cope with the emotional distress the transitioning process and may develop a mental health disorder such as anxiety (Stambulova, 2016; Stambulova, 2017). With the increased awareness surrounding the well-being concerns of athletes transitioning in and out of sport, transition support services have been developed and athletes are being made increasingly aware of the support they have surrounding them (Cosh et al., 2021; Park et al., 2013)

However, the research surrounding crisis and career transitioning and how these phases can affect an athletes wellbeing, remains less examined and broad (Stambulova, 2017). In addition, career assistance programs which are now in place that can advise athletes on aspects such as exit strategies and career paths, but these programs are not widespread and there remains a paucity of evidence to support their utility (Cosh et al., 2021; Stambulova, 2017; Stambulova, 2014). By gaining a better understanding of the transitioning of athletes and the support programs that currently exist, it may be possible to prioritise athlete well-being and adjust the programs and support to better prepare athletes for these dramatic changes (Cosh et al., 2021). By adjusting these programs, it may be possible to decrease the chances of current and future athletes developing mental health disorders through transitioning in and out of sport (Cosh et al., 2021).

2.6 Help seeking

As the above literature outlines, there is a growing acknowledgement of the importance of mental health and of the role that help-seeking might play in increasing well-being. Help-seeking is defined as an attempt to find or seek assistance to improve a situation or problem (Rickwood et al., 2012). It is important for individuals to seek help if they are experiencing any negative feelings and by being encouraged to seek help, the stigmas associated with help-seeking may be broken-down (Gulliver et al., 2012). Although there are some athletes that do utilise support, it is also important to understand why athletes may avoid help-seeking and how help-seeking can be encouraged.

While some athletes find different methods of coping with stress, others may have difficulty distinguishing the difference between normal stress and excessive stress, causing a barrier that stops them seeking help (Boyd et al., 2007). However, more recently there has been an increased number of athletes that have publicly discussed their mental health concerns after their career has ended, with the intentions of normalising help-seeking (Souter et al., 2018). In addition, existing research may help identify the reasons behind a lack of help seeking during careers, suggesting that athletes may be reluctant to seek support because of their lack of knowledge about mental health disorders, and their lack of knowledge about where to seek help (Abram et al., 2008; Gulliver et al., 2012). Another major factor that affects athletes seeking support, are the ‘stigmas’ that are associated with mental health disorders and seeking help. This is highly common among smaller social communities within elite sport, because athletes fear they will be disqualified from social acceptance if they do not have desirable and relatable attributes (Abram et al., 2008; Bryne, 2000). For example, among team sports such as rugby it may be expected for athletes to be mentally tough. If athletes are seen seek help-seeking, they may be perceived as ‘weak’ by others and be excluded or bullied by their teammates for seeking support (Gulliver et al., 2012).

A focus group study by Delenardo et al. (2014) found that male athletes felt worried about others finding out that they were seeking help for mental health concerns. The participants feared that they would be seen as ‘weak’ for help seeking and in order to be good at football they needed to be both mentally and physically tough. Participants also highlighted that they feared the individual they were seeking help from would only associate them with weakness and view them as weak-minded for wanting help. This study highlights the stigma of masculinity and mental toughness might reduce help-seeking within sporting environments (Delenardo et al., 2014).

Furthermore, the stigma of being viewed as feminine can often deter male athletes from seeking support and from acknowledging they might be struggling with their mental health (Atkinson, 2019). Many male dominated sports such as rugby and boxing are perceived to be a ‘man’s sport’, therefore many male athletes assume they have to acquire masculine attributes such as being mentally and physically tough to take part (Markula & Pringle, 2007). More often than not in sports such as rugby and boxing, it is common for injury to occur leaving athletes in need of recovery time. Some athletes find it difficult to accept they need physical and psychological help to fully recover, leading them to conform with the

stigmas that suggest they should be physically and mentally tough and not seek support (Markula & Pringle, 2007; Rice et al., 2016). With the existence of these stigmas, many athletes may feel pressure to engage in problematic behaviours including overtraining which merely increases the risk of injury (Lemyre et al., 2007). Research suggests that approximately 10% of elite athletes have reported over training and burnout, resulting in chronic fatigue, depressive episodes, and lack of motivation (Armstrong & Vanheest, 2002; Peluso & Andrade, 2005; Lemyre et al., 2007).

With these issues arising, athletes should be encouraged to ask for help and not feel ashamed about seeking support (Glick & Castaldelli-Maia, 2016). Additionally, clubs and teams should prioritise the health and wellbeing education amongst athletes and help them understand where they can seek support. This may help athletes distinguish the difference between normal feelings and excessive feelings of stress and encourage athletes to seek support to prevent these feelings from escalating into a mental illness (Abram et al., 2008; Gulliver et al., 2012). By doing so, athletes may start to normalise common mental health disorders and help-seeking, understanding that sports practitioners and player welfare officers aim to improve their mental health and athletic performance by diagnosing and managing disorders (Kola-palmer et al., 2019; Glick & Castaldelli-Maia, 2016). Overall, it is clear that there is a growing body of evidence relating to athlete mental health but less is known about the prevalence of mental health disorders that arise and the support that is offered to overcome these within an elite environment.

2.7 Care within sports coaching

As athletes are being encouraged to seek help and some systems are gradually being put in place to support, help, and care for athletes, it is important to consider the caring practices that are adopted to prioritise care with a sporting environment. Newton et al. (2007) defines a caring climate as a place which individuals perceive as inviting, supportive and safe, as well as a place where they feel valued and respected. Within these climates of care, the actions of those responsible for providing care can be understood by drawing on Noddings' care theory and her ethics of care (Noddings, 1988). Noddings care theory built upon a number of key concepts including engrossment, motivational displacement, and recognition (Noddings, 2003, 2005). Engrossment refers to an individual seeking to understand another person's needs (e.g., goals, interests, passions) and motivational displacement involves actively

engaging in support from another individual who intends to care for others (Cronin et al., 2019; Gano-Overway, 2021). By a coach understanding an athlete's needs and interests, it is possible to help an athlete meet their goals as well as helping them understand how these goals might be achieved (Gano-Overway, 2021; Noddings, 2003). Lastly, recognition refers to the other individual recognising the caring actions and responding to the care offered (Gano-Overway, 2021; Noddings, 2003). In addition, Nodding (1988) theory of care is informed, in part, by Gilligan (1982) feminist work, arguing that care should be the heart of relationships. Nodding (1988) argues that caring relationships, which involve nurturing and are typically maternal, are essential to guide pedagogical practices. The caring interactions that take place between individuals within a sporting environment can certainly be defined as pedagogical, where encounters between the teacher (the coach) and the learner (the athlete) are formed with the intention of meeting the learner's needs (Tinning, 2008).

Another important feminist theorist of care is the American scholar Joan Tronto. Tronto's (1993) ethics of care is an approach to personal, social, moral and political life that conceives of all human beings as needing to receive and to give care to others. Tronto argues that as interdependent beings, it is these care relationships that mark us as human. Tronto's ethics of care deviates from other feminist theorists such as Noddings, by employing the concept of empathy (i.e., an attempt to understand another's mind) in a way that extends care ethics into justice. Importantly, Tronto (1993) sees an ethics of care as involving 'a habit of mind to care' (p. 127). Ethical care, then, requires an individual not only to be emotionally moved by other people's situation but be orientated to help them too. For Tronto (1993), the moral underpinnings of an ethics of care is concerned not with questions of 'What do we owe others?' but rather 'How can I (we) best meet my (our) caring responsibilities?' (p. 137). Tronto's work presents a number of phases of care including recognition of need (i.e., attentiveness to the needs of others), willingness to respond to (i.e., a responsibility to care that we must take upon ourselves), direct action (i.e., the competence required to adequately meet the needs of others), and reaction to the care process (i.e., a responsiveness to those in a vulnerable position).

In addition, in his work titled "The ethics of care and empathy", Michael Slote adopts a virtuous approach to care. Slote's (2007) "virtue ethics" sought to build upon and re-shape feminist notions of care ethics. A virtuous person, according to Slone, is thought to perform virtuous acts through their wisdom. Virtuous behaviour represents what Slote termed an

‘agent-focused’ virtue ethics, which he sought to differentiate from “agent-based” virtue ethics, which concerns the agent’s actions or motives of a virtuous act. Slote’s work is notable in how it differs from the work of feminist ethicists, including Noddings, by considering care as a virtue. The work of feminist ethicists is predominantly concerned with autonomy, equality, justice and rights. Slote builds on this work by conceiving of care as a virtue and by considering its action-guidingness and the notion of “balance”. Slote was particularly interested in the notion of “balanced caring” which he thought of as an admirable character trait. The balanced person, in Slote’s view (2007), cares for intimates and strangers, however, he argues that the virtuous person cares more for intimates than others. Nodding (2010), by contrast, believes that “Because we are naturally disposed to respond empathically to those closest to us does not imply that we cannot learn to extend our empathy to strangers and distant others” (p. 11). However, Nodding (2010) acknowledges that ‘care at a distance’ (i.e., for distant strangers unconnected to us) often breaks down, and that while we might feel for those who suffer, an attempt at motivational displacement proves fruitless. Despite differences in how they conceive of care, and how it might be enacted, the aforementioned theorists are united in their efforts to present care as a fundamental human condition and one that is an ethically important and relevant issue.

Even though caring tends to be associated with female dominated sectors such as nursing, there has been a rise in case studies highlighting the importance of adopting and reflecting on caring approaches within sport (Cronin et al., 2020). One case study that presents an example of caring within sporting environments is ‘Jane’s Story’, as detailed by Cronin and Armour (2018) in their text *‘Care in Sport Coaching: Pedagogical Cases’*. This case study highlights the importance of caring behaviour through relationships, dialogue and wanting to meet athlete needs (Cronin & Armour, 2018). In addition, Cronin and Armour’s text highlights that adopting a caring approach can enable an athlete to learn, grow and achieve within sporting environments, regardless of whether they are in a beginner, amateur or professional club (Armour, 2011). Further research by Gano-Overway (2021) also highlights the importance of caring behaviour by investigating athlete perceptions of coaches who care. Gano-Overway (2021) focused on the stories of eight former high school athletes by interviewing them about their coach’s caring behaviours. Overall, the athletes stories revealed that their coach can have a meaningful impact on their development by being present in the personally meaningful moments of their lives, whether that be recovering from an injury, transitioning out of sport, or needing a male or female role model for motivation.

In addition, another study that aims to recognise caring behaviours is the research of Lewis et al. (2022) that focuses on how “good” and “bad” care is recognised in women’s football. To gain a wider understanding of the above, Lewis et al. (2022) interviewed eight female athletes about the positioning of care within sports coaching. Findings showed that female athletes may experience ‘superficial’ care and may feel neglected by managers and coaches. Furthermore, the research also highlighted that creating a “climate of care” among athletes and practitioners could enhance caring relationships. By taking the time to meet the needs of an athlete through listening to them and showing sympathy, it is possible to enable the support of their athletic development and future performance (Dohsten et al., 2020; Lewis et al., 2022). Whilst the Lewis et al. study focused on the experience of adults, researchers have also explored the enactment of care within academy or youth settings. For example, Kjær et al. (2022) focused on exploring the care that Swedish athletes received in their early life. As younger athletes, it is suggested that a larger support network is needed to enhance success (Wylleman & Lavallee, 2004). The support is enhanced through the influence of parents in the early years as well as the coach being instrumental to athletic development. To investigate this, seven male and seven female participants from a range of sporting backgrounds were interviewed about their history as athletes. Kjær et al. (2022) found that within the early years, the parents of athletes provided emotional support and displayed commitment towards their children’s participation in sport. As athletes matured, it was revealed that the athletes perspective may change within a sporting environment, utilising and appreciating the support of their coach. As research has identified that many people drop out of sport during their teenage years (Eime et al., 2016), the findings from the research of Kjær et al. (2022) highlighted the importance of coaches believing in athletes and caring for their personal development. Overall, this research highlights that young athletes who have access to ethical and natural care within micro-environments are increasingly likely to flourish as an athlete and a human being (Kjær et al., 2022).

Furthermore, caring also requires taking time to interact with athletes and building relationships (Jones, 2009). Jones (2015) highlights the importance of caring actions through describing caring as a virtuous act that requires moral sense and practical wisdom through personal character and experience. By using actions, such as taking time to interact with individuals to build rapport, it is possible to enhance two-way communication and open-door policies, enabling athletes to accept the care and support that is provided to them (Bennie &

O'Connor, 2012). Jones et al. (2004) also highlights that having an open, honest, and respectful relationship with athletes can enhance physical and psychological development. Further research from Jowett (2007) highlights the importance of coaches being involved in meeting athlete needs, being committed to athletes and being 'close' to athletes to help a build rapport. In addition, Tengland (2007) defined health-related wellbeing as being physically and mentally fit and by introducing ethical principles into a sporting environment and coaches introducing these through listening, showing sympathy and taking time to interact, coaches will meet athlete needs both as an athlete and a human being aiding in the development of mental and physical characteristics over time (Jones, 2009; Purdy, 2016).

Due to athletes spending a lot of their time with coaches, it is common for athletes to turn to their coach for support, on and off the field (Bennie & O'Connor, 2010). There are numerous research papers that suggest how coaches can reflect and develop on their practices, to enable athletes to view them as caring and approachable (Potrac et al., 2002). Lindgren and Barker-Rutchi (2017) examined caring approaches by reflecting on how elite female football coaches used caring approaches in a result-based way. This research found that the coaches engaged in an athlete-centred approach, developing coach-athlete relationships, and made health and well-being the main focus based on the athlete needs (Lindgren & Barker-Rutchi, 2017). This highlights that coaches try to "take care" of athletes as a whole person, emotionally, physically, and socially inside and outside of a sporting context (Dohsten et al., 2020; Jones & Turner, 2006). As mentioned previously, Lewis et al. (2022) suggested that creating a "climate of care" among athletes and practitioners can enhance caring relationships. By creating caring relationships with athletes and practitioners, the athletes may feel increasingly comfortable within their sporting environment because they can understand that they are cared for emotionally, physically, and socially by the care networks that surround them.

Rather than coaching practices being based around the aim of winning, the coach should consider their commitment levels to caring for an athlete and understand how an athlete wants to enhance their growth and self-development (Dohsten et al., 2020; Lyle, 2016). To meet an athlete's needs, it is suggested that coaches should engage in ethical principles such as listening and showing empathy towards an athlete, but also create environments that are comfortable for any individual, not only allowing them to develop their athletic performances but also develop as a person (Jones, 2009; Purdy et al., 2016). Fisher et al. (2017) conducted research that consisted of asking 18 female and male coaches how they define and implement

care. By conducting semi-structured interviews, the authors found that the coaches believed every athlete deserved the opportunity to be cared for and develop within a sporting environment, and enabled athletes to have this opportunity by responding to their needs. This research highlights that the coaches in the study are acknowledging the need to help athletes both on and off the field. The important aspect of this research is to understand whether coaches are engaging in caring practices because of their own values and beliefs, or whether they are engaging in these practices because it is expected from others within the club environment (Cronin & Armour, 2018; Cushion & Pattington, 2016). In addition, researchers have drawn upon the work of Goffman (1959) to question whether coaches put on a ‘front’ by pretending to exhibit caring behaviours merely for the benefit of an audience, meaning their practices may change depending on whether there are other club officials present or just the athletes (see Jones et al., 2011). It is understandable that coaching practices need to adapt their practices depending on the level and ability of athletes, but coaches should consider putting the care for athlete first regardless of the scenario or audience. Although there is evidence to suggest that coaches are beginning to acknowledge the importance of care, we need to consider who else athletes might turn to for support.

2.8 Player support within sporting environments

Elite athletes are surrounded by numerous practitioners that aim to support their physical, technical, and emotional development within sporting environments. These roles include coaching, fitness, nutrition, and sport psychology (Lewis et al., 2018). In reality, it is difficult to chart the sheer range and extent of developmental support received by athletes within elite sporting environments. Nevertheless, it is important to tease out and identify the existing support systems put in place to facilitate athlete holistic development and wellbeing (Lewis et al., 2018). With this in mind, this section aims to detail and elucidate the existing roles of sports psychologists, chaplaincy, and player welfare managers within sport through the use of existing research.

2.9 Sport psychology

Sport psychology is a rapidly growing profession that aims to address issues that affect an athlete’s sporting performance both positively and negatively (Andersen et al., 2001; McCormack et al., 2015). Typically, sports psychologists are employed to help athletes

improve their performance, making the role primarily focused on performance enhancement. Brady and Maynard (2010) expressed that as a sport psychologist, there is always the interest in helping athletes develop from a wellbeing perspective, but the aspect of helping athletes achieve performance excellence should be prioritised over holistic support.

Unfortunately, performance enhancement interventions, have typically been prioritised over the welfare and wellbeing of athletes (McCormack et al., 2015). Research from Andersen and Speed (2012), for example, suggests that sport psychologists should focus more on the welfare of athletes, by recognising that athletes have other non-sport related concerns that may affect their performance. Regardless, sport psychologists are still expected to build a rapport with athletes therefore, in recent practices sport psychologists have increased the importance of athletes completing depression and anxiety questionnaires to encourage help-seeking (Haberl & Peterson, 2006). With this in mind, it is important to recognise that sport psychologists have expectations to deliver in both formal (training) and informal (outside of training) settings, therefore face large amounts of pressure to meet the expectations of athletes receiving performance based advice and personal advice within a variety of settings (McCann, 2008). This raises the challenge of time management and the restriction of the being able to fulfil the responsibilities of player care alongside the primary role of enhancing athlete performance.

Even though sport psychologists may have a clearly delineated role within a sporting environment, athlete perceptions can influence whether the support of a psychologist is utilised (Bell et al., 2020). Bell et al. (2020), showed that youth athletes who had a negative perception about sport psychology lacked education about the practice and also felt uncomfortable discussing informal concerns (outside of training) with a sport psychologist, feeling they had to keep topics focused purely on performance (Bell et al., 2020). This raises the question of whether elite sport clubs should keep sport psychology performance related and consider designating another job role to individuals that want to focus on mental health and wellbeing. This would relieve sport psychologists of extra pressure and allow them to focus on performance-based practices (McCann, 2008). This does not mean sport psychologists should be eliminated from supporting athletes on and off the field, but rather work hand in hand with other job roles to enable individuals to speak up when they feel comfortable and direct them towards help-seeking.

Further research from Trottier et al (2018) and Martin (2005) established that age and gender also influences athlete perception on seeking help from psychologists. Martin (2005) revealed that young male athletes that are partaking in contact sports, are increasingly likely to have negative perceptions on athletes seeking support from sport psychologists. These findings raise concerns due to male athletes potentially suffering from mental health disorder in silence due to feeling shame and conforming to stigmas surrounding masculinity (Eichstadt et al, 2020; Griffiths et al., 2015). In addition, within team sports that are contact based such as rugby, it is common for athletes to share similar perceptions fearing their peers may isolate them if they seek help or fear they will be viewed as ‘weak’ if the psychologist speaks to the coach about concerns (Biggin et al., 2017). It is also common for psychologist to use younger athletes in academies as a ‘steppingstone’ to achieve their long-term goal of working with adults in elite sport, leaving younger athletes exposed to negative perceptions (Knight et al., 2017). Psychologists are obliged to support athletes regardless of age, gender, or ability (Knight et al., 2017). This strengthens the idea of incorporating different job roles into a sporting environment that primarily focus on performance or player care. This will encourage athletes to distinguish the difference between performance stress and excessive stress, encouraging them to seek help from the most beneficial individual (Boyd et al., 2007). Nevertheless, sport psychology aims to support individuals on and off the field with good intentions of offering help. With these intentions, there is often scope for athletes to avail of psychological help, regardless of whether it is in a formal or informal setting. Furthermore, research is limited surrounding the relationships and rapport between job roles within a sporting environment, therefore further research in this area may highlight how different job roles work together to support the wellbeing of players as a whole rather than individually.

2.10 Sport Chaplaincy

Sport Chaplaincy plays an important role in a sporting environment, providing holistic pastoral and spiritual care to all individuals (Oliver & Parker, 2019; Parker et al., 2016). The spiritual nature of a chaplain’s work enables them to value each individual, regardless of how they are perceived by others surrounding them (Gamble et al., 2013). Chaplains are not typically employed by a club but rather volunteer their support, therefore do not have to report on concerns such as welfare unless it is necessary (Gamble et al., 2013; Roe & Parker, 2016). This increases the likelihood of athletes approaching them due to confidentiality (Roe

& Parker, 2016). Specifically, in team sports such as professional football, athletes can be reluctant to speak to individuals who have decision-making responsibilities, such as coaching staff or managers, due to the fear of impacting team selection or career progression (Nesti & Sulley, 2014; Oliver & Parker, 2019). With the added security of player confidentiality and chaplain's prioritizing player personal needs over team performance, athletes become increasingly comfortable sharing their concerns surrounding performance and personal issues (Comfort, 2006; Baker, 2006).

With an increase in pressure placed on athletes, concerns on issues such as deselection, injury and career transitions can have negative consequences for athlete wellbeing, resulting in issues such as anxiety, depression, and substance abuse to arise (King et al., 2020). This outlines the importance of a chaplain's role within a sporting environment, indicating that they should be valued across a range of playing levels (Jones et al., 2020). Within these environments, athletes can find security in the support of a chaplain by approaching them with topics that could affect their wellbeing (Heskins & Baker, 2006; Ryan, 2015; Threlfall-Holmes, 2011; Waller, 2016). Some subjects can be sensitive and consists of aspects such as bereavement and addiction and athletes can try to find some peace regardless of whether they are religious or not (Heskins & Baker, 2006; Ryan, 2015; Threlfall-Holmes, 2011; Waller, 2016). Their main aim is to provide a caring presence and listen to individuals, not necessarily provide faith-related advice (Hemming, Watson & Parker, 2019). These interactions often take place in an informal setting and on a one-to-one basis (Hemming, Watson & Parker, 2019). In addition, it is important to acknowledge that a club can also place demands on other members of staff working within the environment. A chaplain acknowledges that stress can overcome any individual at any time, therefore their role also consists of offering extra support to coaching staff, support staff and other member that form a team (Hemming, Watson & Parker, 2019).

It is evident that both roles of sport psychology and chaplaincy have the aim of listening to an athlete and placing an emphasis on wellbeing, but further research highlights that it is also very important for both roles to have a mutually respected relationship within the workplace (Hemming, Watson & Parker, 2019). Gamble, Hill, and Parker (2013) investigated the interactions between sport psychologists and chaplaincy within professional football. This research highlighted that there was little evidence of both parties intentionally working together. These findings highlight that an athlete may prefer to speak to an individual that is

neutral and does not have the intention of focusing on performance or changing a club environment. This also strengthens the perspective of having separate roles that focus on mental health and wellbeing of athletes allowing members of the club to guide individuals towards the correct support system if they are approached.

2.11 Safeguarding Officers

The presence of academy and scholarship teams means that many clubs have a designated safeguarding officer, also known as a ‘Child Protection Officer’, that focuses on ensuring that the practices and the environment around children is safe (Hartill & Prescott, 2007; Hartill & Lang, 2014). The role may involve monitoring and evaluating coaches and staff to ensure safe practices, criminal history checks, providing training on safeguarding to create a safe environment and assessing as well as managing cases of reported abuse (Hartill & Lang, 2014). Whilst there is a designated role for safeguarding, it is important to recognise that safeguarding is also a responsibility of everyone at the club therefore should be taken seriously (Barton & Welbourne, 2005). For this reason, it is not unusual for Safeguarding Officers to work closely with Player Welfare Officers. For example, an athlete from an under eighteens team may approach a Welfare Officer about a coaches harmful practices therefore this would become a safeguarding issue as well as a welfare issue because of the athlete’s age and vulnerability. The Safeguarding Officer may focus on correcting the practices by educating the coach on how to create a safe environment for younger athletes and the Player Welfare Officer may focus on the wellbeing of the athlete to provide them with emotional support while the investigation is ongoing.

Following on from the above, the Rugby Football League (RFL) have introduced numerous safeguarding and child protection policies to ensure the safety of young athletes who participate in rugby league (Hartill & Lang, 2014). The RFL safeguarding policy states that all children should have the opportunity to take part in an enjoyable and safe environment that is created by a responsible adult, all children should be protected from emotional, physical, and sexual abuse and bullying regardless of age, gender, culture or disability and children’s welfare should be made priority over winning (RFL, 2021). The RFL also stated that they wanted to upskill other individuals within a club environment such as coaches, players, match officials and Player Welfare officers on safeguarding and child protection policies to identify poor practices, report poor practices and achieve a greater level of

awareness surrounding the safety of children within rugby league (RFL, 2021).

Similarly, The FA have ensured that each club has a designated safeguarding officer who is responsible for providing a safe environment for every member of the club. Their main priority is to also protect children and vulnerable adults from any physical, emotional, and sexual harm regardless of age, gender, or disability (The FA, 2022). In addition, the designated safeguarding officer is responsible for ensuring safe recruitment by reviewing identification documents, following up references and ensuring DBS checks are up to date. If a harmful situation arises, it would be expected of any individual who witnessed the harm or knows of the harm to report to the safeguarding officer as soon as possible (The FA, 2022). For this reason, it is important for all clubs to provide staff, athletes, and parents with contact details to report any misconduct (The FA, 2022).

As outlined above, it is clear that safeguarding officers focus on policies put in place to protect children and vulnerable adults within a sporting environment (RFL, 2021; The FA, 2022). They are also expected to ensure that all current and newly recruited staff are providing a safe sporting environment and do not uphold any previous misconduct on their DBS certificates (The FA, 2022). The primary role of a safeguarding officer is to provide a safe environment as well as address any concerns of misconduct that are reported. Even though player welfare officers may be made aware of misconduct, if the misconduct is in line with the child protection policies, they will report this to the safeguarding officer. It is common for both roles to work hand in hand and communicate to one another about athlete wellbeing and how an environment may have influenced it. Even though they are two separate job titles, the roles often become combined to create a player care department to ensure all athletes are safe and cared for. Overall, a safeguarding officers main responsibility is to focus on child protection policies and ensure the staff are treating athletes fairly but a player welfare officers main responsibility is to offer emotional and educational support to athletes about their day to day concerns.

2.12 Player welfare officers

Even though the above systems are in place in a range of sporting environments, recent years have seen governing bodies of sport place an increased emphasis on the mental health and wellbeing of athletes and the need to focus on athlete care in sport (Agnew et al., 2018; Grey-

Thompson, 2017; Lewis et al., 2018). With the acknowledgment of mental health concerns rising, job roles have been created that primarily focus on athlete welfare. One such role is that of a player welfare officer (PWO) and a range of elite sports clubs have introduced PWO's into their sporting environments. These welfare roles are responsible for player care both inside and outside of a professional sporting environment regardless of age, gender and playing ability (Lewis et al., 2018; Rugby Football League, 2021). With the above in mind, the Rugby Football League (RFL) introduced new guidelines in 2010, stating that it is now compulsory for full time clubs to employ a PWO that focuses on player care (Rugby Football League, 2021). A main responsibility of a PWO is to ensure the duty of care among athletes, coaches, and other member of staff (Grey-Thompson, 2017). The aim of the duty of care policy within rugby league is to A) ensure that athletes can play to the best of their ability and their ability is unaffected by off field concerns B) That athletes are good role models C) For athletes to understand the responsibilities of a professional athletes life D) Athletes should develop mental resilience and understand mental health E) Athletes should invest into personal development and plan their careers for life post sport to aid a smooth transition and F) individuals are able to manage change (Grey-Thompson, 2017; Lewis et al, 2018). This policy guides the practices of a PWO and enables them to consider mental health provisions and extra support to aid athlete wellbeing.

Furthermore, there are programmes that are influenced by the duty of care policy such as the player welfare strategy and PWO's have the responsibility to implement these strategies within sporting environments (Lewis et al., 2018). The player welfare strategy encourages athletes to address concerns that are affecting their performance, enabling them to A) gain an understanding of what professional sport entails both physically and mentally B) addresses mental health and support that can be offered to athletes (such as counselling) and C) allow athletes to have access to further education that encourages them to plan their careers and future transitions (Lewis et al., 2018; Rugby Football League, 2021). In support of latter strategy, for example, research by Jennings (2015) found that players who had access to education and could better equip themselves for life after sport, were able to successfully cope with the emotional effects of playing sport before and during retirement. This research highlights the importance of providing athletes with access to education within sporting systems, enabling them to understand the stress and demand of athletic careers before taking the career on-board (Jennings, 2015). The aspect that remains unclear is the detail surrounding how PWO's implement these policies given the intense workloads faced by

practitioners within elite sport, and the fact that working conditions are politically charged and characterised by a sense of precarity (see Cronin et al., 2019).

This topic seems particularly relevant given the introduction of the Elite Player Performance Plan (EPPP) in 2012, which aims to enable player development by providing opportunities through coaching, education, and games programmes (Premier League, 2021). The programme provides athletes with access to topics surrounding physical and welfare development and offers elite coaching plans (ECP) to enable a wider understanding of high-quality coaching. This opens pathways into elite sport for the youth and academy teams (Premier League, 2021). There is some existing research that supports the use of these programmes and encourages younger athletes to start planning their careers as early as possible to prepare for careers outside of sport. One example is the research of Browning et al. (2012) which investigated the psychological impact of aspects such as retirement among elite football players. It was found that the athletes believed they should have been encouraged to pre-plan careers from an early age and plan for work post football. It is important for younger athletes to understand that their athletic careers may potentially come to an end due to unforeseeable circumstances, therefore should be prepared to make changes. By introducing these educational programmes, it is possible for PWO to encourage young athletes to educate themselves on support and career progression, to prepare them for life after professional sport (Kola-Palmer et al., 2020). Agnew et al. (2017) highlights that one in five athletes have problems transitioning and therefore should be encouraged to plan dual careers to aid smooth transitions. Without PWO's assisting and encouraging athletes to engage in these programmes, athletes may struggle to develop an identity outside of sport (Park, Lavellee, and Tod, 2013). The consequences of only having an athletic identity may lead to an individual neglecting other aspects of life, such as developing life skills or finding new interests for future job prospects (Park, Lavellee, & Tod, 2013). There still remains a lack of research surrounding the training and preparations that PWO's undergo to be competent in delivering advice on extra programmes and mental health and wellbeing, therefore it is somewhat difficult to understand the qualifications that would help prepare them to educate athletes about career options. In addition, there is a lack of consistent definitions of the job role, therefore the role may be perceived differently within different environments. For example, PWO have a range of titles such as Head of Player Care or Head of Welfare and Education. This may affect the perception of the role and make the role unclear from an external perspective, due to the assumption that a different title has a

different job role and therefore needs different training/qualifications.

Another responsibility of a PWO is to acknowledge signs of declining mental health and direct athletes to external agencies that can further help them outside of a club environment (Kola-Palmer et al., 2019). This raises the question of what qualifications a PWO is required to have to ensure they are prepared and equipped to notice signs of mental health disorders and guide individuals towards additional support. From recent job descriptions, it is highlighted that a PWO should undergo CPD courses to gain additional qualification that focus on welfare, safeguarding and mental health such as mental health first aid (Bristol Bears Rugby, 2021; The FA, 2022). These additional courses can be completed through governing bodies such as the FA or charities such as St John Ambulance and Mind (St John Ambulance, 2021; Mind, 2022). Within these courses, a PWO will learn how to identify safeguarding concerns, such as poor practice across a range of ages, and learn how to identify and respond to the needs of individuals who are experiencing difficulties with their mental health (The Boot room, The FA, 2021). Another aspect that remains unclear is the requirement for other staff within a sporting environment to gain these qualifications. Within sporting environments, it is likely that athletes will gain a strong rapport with other staff members such as coaches and the medical team (Jowett, 2007), therefore it may be essential for other staff members to acquire further qualifications too. At the moment, little is understood about whether individuals are encouraged to identify areas of concerns and direct or report them to a PWO.

If these signs are acknowledged, a PWO may direct an athlete to numerous charities, even some that can relate to their sport. One charity that can offer additional support to rugby league players is Rugby League Cares (RLC). This charity offers additional support both during rugby careers and post retirement, by providing training and education on how athletes can plan their careers (Rugby League Cares, 2021). Additionally, the charity also offers a further player welfare programme for professional and semi-professional players, in which higher trained and experienced PWM can provide medical and legal advice as well as counselling and family support (Rugby League Cares, 2021). If an athlete is experiencing mental health disorders such as depression or concerns arise about their home life, a PWO can also direct an athlete towards Mind. Mind is a charity that offers information about crisis support and teaches coping mechanisms to support individuals in day-to-day life (Mind, 2022). Furthermore, the charity offers a helpline for individuals to speak to people

anonymously about their concerns without disclosing personal information (Mind, 2022). Another popular charity that is recommended to athletes is Sporting Chance. Sporting chance aims to manage the treatment of mental health provisions within professional sport (Sporting chance, 2022). The treatments that are offered by the charity involve talking therapy, treatment plans for addiction and consultations to help discuss treatment plans with athletes (Sporting chance, 2022). In addition to mental health provisions, the charity also conducts workshops and seminars to educate athletes on emotional wellbeing, gambling, substance misuse, and balancing mental health around performance (Sporting chance, 2022). These charities can provide extra security to athletes about external concerns in which they may feel intimidated speaking about within a club environment, as well as come into a club environment and educate athletes on the noticing signs of these concerns to receive the help they may require.

As the above outlines the responsibilities and impact of a PWO, it is also important to explore how PWO's are perceived by athletes to understand whether they utilise care and support and the extent to which they value the role. Without athletes perceiving the role in a positive manner, it is questionable whether they utilise mental health support and engage in these educational programmes. A study conducted by Lewis et al.'s (2018) study highlights the factors that enhance welfare support such as gaining the support of player welfare by the club and coaches, enhances the culture of accepting help-seeking increasing access to PWO's and referrals to external agencies such as Rugby League Cares and Sporting Chance. Gaining the approval of staff that are influential to athletes, such as the head coaches, might increase the likelihood of utilising player support (Lewis et al., 2018). In addition, when there are positive perceptions of player care, it is possible for the club to acknowledge the need for welfare support and encourage athletes to seek support for welfare issues such as gambling and anxiety. By encouraging the support, the possibility of preventing issues from escalating are increased, preventing negative consequences to athlete wellbeing from occurring (Lewis et al., 2018). On the other hand, the research also highlighted the areas that need to be improved upon, including more time to do the job, increased financial support, destigmatising help-seeking, and the destigmatising the negative perceptions of player care. Furthermore, as there is a lack of research around the workload, funding, and barriers that PWO's face within their role, it is hoped that the research can expand on the above and highlight the importance of the PWO role within elite sport and how they aid the wellbeing of elite athletes. It is also hoped that the research can further support the above by expanding on the barriers that PWO's face

on a regular basis and how they think the system could be further improved upon in the future.

By welcoming a PWO to a club environment, it may be possible to take the pressure away from psychologists that require them to focus on athlete performance and wellbeing (McCann, 2008). Indeed, Gamble, Hill, and Parker's (2013) research showed that athletes prefer to approach chaplains for wellbeing support and psychologists for performance interventions. Similarly, the presence of PWO's may increase help seeking by athletes given that a PWO does not share information or intervene without consent and aims to refer athletes to further external support if needed. What remains less well understood, however is how PWO's operate as part of a multi-disciplinary team to enact care and improve wellbeing. It is hoped that the current research can shed light on the nature of their practice including how their job roles restrict or facilitate the provision of care, and how they work with other practitioners to meet the complex psychological and emotional needs of young athletes.

2.13 Theoretical Framework

Noddings (1988) work on care seems particularly relevant to the work of welfare officers given their responsibility to attend to the wellbeing of athletes. Noddings 'ethics of care' positions caring relationships (which are nurturing, maternal, and dialogic; see Cronin et al., 2020) at the heart of pedagogical activity (Cronin, 2020; Noddings, 1988). Noddings' work drew on feminist theory to position caring as a universal human attribute, which serves as a foundation for morality. Noddings care theory lays out a number of key concepts including engrossment (seeking to understand another person's needs), motivational displacement (actively engaging in support from an individual who intends to care for others), and recognition (the individual recognising the caring actions and responding to the care) to understand how care might be enacted in pedagogical contexts (Noddings, 1988, 2003, 2005). This theory of care places particular emphasis on how individuals might seek to understand the needs and interests of others and to encourage others to engage in support from those charged with caring responsibilities (Cronin et al., 2019; Gano-Overway, 2021).

Additionally, the work of Noddings also focuses on the concept of empathy (attempting to understand and share the feelings of another) in relation to engrossment and understanding what others are feeling/going through (Noddings, 2010). Although the research of Noddings

is often used to underpin the research of traditional caring and nurturing roles such as nursing (Gilligan, 1982), more recently, researchers focusing on the investigation of caring practices within sport have used Noddings work to inform and guide their work. For example, Cronin's work (2020) on care in coaching has drawn heavily on Noddings ideas to show that caring in an elite football context is relational 'as it requires athletes to receive care and others to collaborate' (p. 141). In another study, Cronin et al. (2019) showed how netball coaches demonstrate care by engaging in authentic reciprocal dialogue so that athletes can receive and acknowledge care. Lastly, Knust and Fisher (2015) utilised the research of Noddings to explore coaching practices within high performance settings. Knust and Fisher used the experiences of twelve national collegiate athletic association (NCAA) female head coaches to better understand holistic care, developing oneself as a coach and the importance of teams being a "family". Together, these findings have led researchers to suggest that care should be a fundamental component of youth performance coaching.

Attempts to enact care in elite sport, however, are likely to be compromised by the highly competitive, masculine, authoritarian, and volatile nature of the day-to-day environment in football (see Cushion & Jones 2006; Potrac et al., 2012). Researchers such as Potrac et al. (2012) have gone so far as to suggest that practice in elite adult football can be 'at times uncaring' (p. 79). These environments have also been characterised as highly political in nature where practitioners operate under the understanding that their positions are precarious and that high staff turnover rates are a dominant feature of this setting (Cronin, 2020; Gibson & Groom, 2019). Indeed, practices within elite sport settings are characterised by vulnerability, in which practitioners may feel the need to prove the effectiveness of their actions to enhance their job security (Huggan et al., 2015). The precarious nature of positions and contracts increases competition as practitioners jostle with each other in seeking to maintain and advance their own professional interests. The 'volatile' nature of this setting, as Cronin et al. (2020) describes it, creates a paradox in that caring relationships are considered important in performance sport, 'yet case studies allude to a harsh, competitive, and micro-political world' (p. 124). Given the highly volatile and politically charged nature of practice in high performance sport, this study will draw on Kelchtermans and Ballet's (2002) notion of 'micro-politics' and the work of researchers such as Potrac and colleagues to explore how attempts to care for athletes might be shaped or influenced by various socio-political factors such as professional self-interests. More specifically, micro-political theory will be used to investigate the professional understanding of player welfare officers, the challenges they face

within their environment and the strategies they may attempt to implement to improve their working conditions in the face of political vulnerabilities.

The work of Kelchtermans focuses predominantly on the political learning that teachers experience throughout the early stages of their careers and the vulnerability they experience as they learn to grapple with the demands of the job (Kelchtermans, 2009; Kelchtermans, 2002). In particular, the work of Kelchtermans and Ballet (2002) focuses on some of the following concepts: *self-interests* (issues of professional identity and social recognition), *material interests* (availability and access to teaching materials, funds, infrastructure and structural time facilitates), *organisational interests* (issues concerning roles, positions or formal tasks in an organisation), *cultural ideological interests* (normative values and ideals about ‘good’ teaching) and *social professional interests* (issues on the quality of personal relations within an organisation) that influence an educators’ ability to fulfil their duties.

Furthermore, Kelchtermans (2005; 2009) also introduced the concept of professional self-understanding which refers to the way in which one perceives themselves within their professional role. Professional self-understanding can be influenced by various factors including an individual’s perception of their own qualities and capacities, as well as how an individual believes the others around them perceive their performance within their role (Huggan et al., 2015; Kelchtermans, 2005, 2009). As an individual’s professional self-understanding can be influenced by the perceptions of others, one might aim to develop their micropolitical literacy (ability to effectively ‘read’ and ‘write’ themselves into the political landscape) and engage in micropolitical action with the aim of improving their working conditions (Huggan et al., 2015).

The work of Kelchtermans and Ballet has recently been drawn upon to understand how coaches and analysts negotiate the complexity of working conditions in high-level sport. To illustrate, Huggan et al. (2015) investigated the early career experiences of a performance analyst and the vulnerability they felt when they were trying to secure and advance their position within an elite football club. Huggan’s et al. (2015) research revealed that practitioners develop certain professional self-interests in order to fulfil their role. In doing so, they change and adapt their practice to gain the trust of athletes and practitioners. For example, in a football environment, a player welfare officer may make themselves increasingly visible by standing on the touchline with the athletes and coaches. This

adaptation may show the athletes and the coaches that the player welfare officer shares similar interests in football and increase the opportunity for the player welfare officer to be seen as part of the team. Adapting practices with the intention of better fulfilling a role, increases the opportunity for social recognition and engagement in micropolitical action. For example, a practitioner may develop their micropolitical literacy and engage in micropolitical actions with the intention of creating 'links' with stakeholders who may have the potential to help them achieve their aims (see the research of Huggan's et al. (2015) in which they reveal how a performance analyst adapted his practices to gain the trust of others. The analyst helped the sports scientists with fitness testing and this helped him become recognised by sports scientists and further accepted/valued by coaches). In addition, Potrac and Jones (2009) used the work of Kelchtermans and Ballet (2002) to investigate micropolitics within semi-professional football. Here, a coach was found to have used micro-political strategies (e.g., thanking the players for their contribution and providing them with extra diagram booklets to aid in their learning) to get athletes and practitioners to "buy into" a coaching program. Together, the work of Noddings and Kelchtermans and Ballet provides useful frameworks for the current study which intends to explore how player welfare officers enact care in high-level sport, and to identify some of the socio-political factors that might disrupt how they go about implementing care.

Chapter 3: Methodology

3.1 Brief introduction

The first part of this section briefly introduces some of the aims and principles of qualitative research. This is followed by a section that introduces the philosophical orientation underpinning the study. More specifically, it positions the research as interpretivist and explains how this shaped how data was collected, analysed and subsequently represented. Next, the sampling process will be described as well as the rationale for using qualitative interviews and the interview process will be explained in some detail. The final section explains how data was analysed and I provide the reader with a series of criteria with which to judge the quality of the study.

3.2 Qualitative research

A key goal of qualitative research is to develop a detailed understanding of peoples' experience of a specific situation, topic, practice or phenomenon (Silverman, 2020). The term 'qualitative research' encompasses a broad range of paradigms and methods including interviews, focus groups, and a variety of other approaches. This approach to research eschews the use of numerical data by employing an open-ended style of questioning or observation (Smiths & Sparkes, 2016). In particular, qualitative methods are typically used to explore the ways in which people make sense and extract meaning from experiences (Jones et al., 2012). In addition, qualitative research is often used to capture non-numerical qualities such as thoughts, feelings, and experiences that are difficult to explore using rigid experimental methods that characterise some quantitative approaches. Qualitative research is far from a straightforward and linear process, however, as it is often iterative in nature involving strategies that are open-ended and flexible allowing participants to articulate what is meaningful and important to them (Jones et al., 2012). This iterative approach to data collection might mean that a researcher adjusts participant sampling in response to emergent data and smaller sample sizes are used when compared to quantitative projects. The goal here is to collect rich and evocative data by providing participants with an opportunity to describe their experience in detail.

Whilst quantitative researchers seek to identify an objective or singular reality (Denzin, 2011) qualitative researchers believe in the existence of multiple realities and so are committed to collecting data in a manner which encourages dialogue and the sharing of experience. Crucially, an important characteristic that defines and distinguishes qualitative research as a field is its focus on meaning (Sparkes & Smith, 2014). Humans actively ascribe meaning to events, situations, interactions, behaviours, and so on, and “meaning becomes so in the process of co-action, that is, collaborative action in which people act together, including through talk” (Smith & Sparkes, 2020, p.1003). In summary, qualitative research was considered best suited to addressing the research question because it facilitates the collection of rich, vivid, and detailed data relating to peoples’ experiences of a specific event, practice or phenomenon and this approach can shed light on the meaning people subscribe to their roles as a player welfare officer working within an elite sporting environment to provide player care.

3.3 Philosophical Orientation

Guba and Lincoln (1994) recommend that qualitative researchers should explicate their paradigmatic positioning before undertaking a research study. This requires researchers to make clear their ‘worldview’ that defines for the researcher ‘the nature of the “world”, the individual’s place in it, and the range of possible relationships to that world and its parts’ (Guba & Lincoln, 1994, p. 107). Identifying and articulating the theoretical assumptions informing one’s work is also considered a cornerstone of reflexivity in qualitative research (see Braun & Clarke, 2019). More specifically, my aim in the following section is to detail how methodological reflexivity (understanding the boundaries that paradigms impose upon research; Olmos-Vega et al., 2023) was an essential process throughout the thesis. One of my aims here is to increase transparency about how methodological decisions have been made. In addition, clarifying one’s worldview explains to the reader what the researcher thinks knowledge is and how it might be constructed. With this in mind, the current study was grounded by Interpretivism (Gratton & Jones, 2014; Nelson, Potrac and Jones, 2014) and underpinned by a relativist ontology and subjectivist epistemology. Relativist ontology is the idea that each individual has their own perception of reality, whilst a subjectivist epistemology means that one believes that knowledge is subjective and socially constructed (Sparkes, 1992). Positioning the work as interpretivist also means that the researcher employs an ideographic methodology would be adopted which consists of focusing on an individual

case (Sparkes, 1992). By adopting this position, it is assumed that there is no objective reality and reality is constructed by an individual's subjective beliefs about the world. Ontologically, this position rejects the view that the social world can consist of "hard, tangible, and immutable facts" that can be observed and "known for what they are" (Sparkes, 1992, p.20).

Adopting an interpretivist approach has a number of implications for the way data is collected, interpreted, and represented. One can only come to understand how people make sense of their everyday experiences by engaging them in subjective interaction. This has implications for the current study as a better understanding of the player care process cannot be objectively determined but is instead socially constructed between the participants and the researcher. Interpretivist approaches are well suited in this regard as they aim to give a voice to interviewees to express the emotions that characterise their experiences and the challenges they face within such demanding environments. Furthermore, as very little is known about the responsibilities of the player care role, it is important to acknowledge that each sporting environment is unique and shaped by contextual and localised factors, therefore interpretivists approaches can encourage participants to share their personal perspective on the social, political, and cultural factors that could affect their role. Interpretivism rejects the beliefs that the social world can be quantified and understood through assumptions and methodologies that are used to analyse the physical world (Nelson, Groom & Potrac, 2014). This perspective is founded on the beliefs that the social world is complex, and individuals define their own meanings within social, political, and cultural settings (Nelson, Groom & Potrac, 2014; Jones & Wallace, 2005; Markula & Silk, 2011). Rather than predicting future actions and human behaviours with structured theory, which is associated with a positivist approach, an interpretative approach focuses on understanding human behaviour through examining how individuals make sense of their own actions and experiences (Bryman, 2012; Coe, 2012). This perspective rejects the view of the social world being justified by tangible facts that can be observed and measured, but rather supports the view of individuals shaping the social world through interests, emotions, actions, and values (Sparkes, 1992).

As mentioned previously, perceptions of reality can be influenced by social, political, and cultural factors; Social reality is an outcome of how individuals make sense or interpret the social world (Nelson, Groom & Potrac, 2014; Markula & Silk, 2011; Smith, 1989). The process of individuals interpretation is not seen as stable because perceptions can differ

depending on experiences (Sparkes, 1992). The implications of this for the current study are that the knowledge I develop about participants experiences as welfare officers cannot be objectively determined but instead is socially constructed during the interview process with these participants and the analysis process thereafter. I should briefly explain at this point how I engaged in reflexivity to account for how subjectivity shaped the inquiry. For example, throughout the data collection, analysis and representation process, I remained reflexively aware of how my experience volunteering with an elite club had provided me with an insight into the nature of the role and how this experience would inevitably impact the questions I asked during interviews and the way I analysed the data. This is an example of what's referred to as contextual reflexivity – where researchers articulate how they've come to know their research context and what their relationship is to that context (Olmos-Vega et al., 2023). For example, in my time shadowing a care officer, I'd witnessed the workload challenges faced by these practitioners and the wide range of problems they were expected to deal with. This understanding influenced some of the questions I designed for the interview schedule and the way I subsequently coded interview transcripts. Interviews might therefore be seen as a process in which the researcher and participant co-construct knowledge and produce data that is rich, evocative, and meaningful to the participants' experiences. Any meanings ascribed to their experiences should be seen and understood as temporally and contextually bound and the aim of the research process is to uncover these constructed truths (Silverman, 2020). We should also recognise that these shared understandings are shaped by the political, social, and cultural factors that colour our perceptions of reality. An important strength of interpretivism is that it can enable a wider understanding into knowledge and social complexities within sporting environments, allowing individuals, such as coaches, to understand how they can better respond and reflect on their actions within specific sporting settings (for example, consider whether they respond differently to an athlete within a competitive and non-competitive environment) (Jones & Wallace, 2005; Potrac & Jones, 2009; Purdy & Jones, 2011; Kelchtermans, 2005).

Although this research was positioned from an interpretivist perspective, it may be useful to compare and contrast this approach to other research paradigms. The literature exploring the mental health of athletes has typically utilised empirical investigations grounded in positivism (Longstaff & Foskett, 2018). The aim of positivist research is to find a single reality or truth, which is objective and external to the singular person's mind (Sparkes, 1992). The truth, or reality, consists of objects or events that are stable and exist independently from

people's interpretations of them (Denzin & Lincoln, 1995). From a methodological perspective, positivist researchers implement controlled data collection, the testing of deductive hypotheses and the use of statistical analysis in order to identify a singular truth – whilst seeking to remain objective by distancing themselves from the subject matter (Sparkes, 1992). Positivist researchers also aim to establish direction and causality between variables (Sparkes, 1992). By contrast, an interpretivist position conceives of social reality as multiple and mind-dependent as knowledge is 'socially constructed, fallible, and subjective' in nature (Smith & Sparkes, 2008, p. 3). As outlined earlier in the section, by adopting an Interpretivist approach, it is assumed that there is no objective reality and reality is constructed by an individual's subjective beliefs about the world. Ontologically, this position rejects the view that the social world can consist of "hard, tangible, and immutable facts" that can be observed and "known for what they are" (Sparkes, 1992, p.20). Interpretivist approaches are well suited in this regard as they aim to give a voice to interviewees to express the emotions that characterise their experiences and the challenges they face within such demanding environments.

3.4 Participants and sampling approach

The aim of the study was to investigate the lived experiences of welfare officers within elite sporting environments and gain an insight into the responsibilities, demands and barriers that welfare officers face on a regular basis. In addition, the study also aimed to investigate the importance of a welfare role within elite sport and understand how this role contributes to the caring of athletes. To gain this understanding, six participants were recruited, five being male and one female (see Table 1). The inclusion criteria required the participants to be in a full-time role as a player welfare officer within a professional football and rugby league environment or have previous experience in the role and required the participants to be over the age of eighteen due to the potentially sensitive nature of the interview process. As seen below in Table 1, all participants were over the age of eighteen and obtained a full-time role as a PWO in a football or rugby league environment. The participants had a variety of experience and varied in sporting backgrounds. Charlotte had previously been a semi-professional footballer and experienced a career ending injury. Thomas had played semi-professional rugby league. Both Charlotte and Thomas had experienced a form of transitioning, whether that be a career ending injury or the decision not to continue playing. The remaining four participants had a variety of backgrounds but none had experience as

competitive athletes. James and William had psychology backgrounds, Mark had previous experience as a youth worker and Robert's background was as an experienced Mental Health Nurse. Please see Table 1 below for further demographic information on the participants.

Table 1: Demographic Information

Participant (Pseudonym)	Age	Sex	Sport	Job title	Years in role	Qualifications
James	38	Male	Football	Head of Player Care and Personal Development	2	MSc Applied positive psychology. Talented Athlete Lifestyle Support Mental Health First Aid
Mark	40	Male	Rugby League	Player Welfare Manager	10	Post Graduate Certificate in Education BSc (Hons) Sport & Exercise Science Cert IV Elite Athlete Wellbeing Management BACP Counselling Concepts Level 3 Mental Health First Aid
Charlotte	27	Female	Football	Player Care and Welfare Officer	3	BA (Hons) Sport Exercise and Physical Activity Talented Athlete (TALS) Level 3 Understanding Athlete Transitions Level 3 FA Welfare Officer Counselling Skills Level 2 Mental health First Aid

Robert	67	Male	Rugby League	Player Welfare Manager	4	Registered MH Nurse BSc Nursing/Social Sciences Higher education Diploma in Nursing specialising in mental health Level 6 Cognitive Behavioural Therapy UKAD clean sport advisor
Thomas	43	Male	Rugby League	Performance, Welfare and Education Manager	15	Mental Health First Aid No specific qualifications to take on the role but does have a Masters in a sport related subject
William	62	Male	Football	Academy Psychologist, Player Care and Lead Designated Safeguarding Officer	5	MSc Applied Positive Psychology

To identify these participants a combination of purposive sampling and snowball sampling was used. Initially, participants who met the inclusion criteria (i.e., be over the age of eighteen and be in a full-time role as a player welfare officer within a professional football and rugby league environment) and/or who were personally known to the research team, were emailed and invited to participate in the study. Having taken part in an interview, some participants suggested other PWO's who might be interested in participating. Snowball sampling was therefore used to assist with the recruitment of further participants. Purposive sampling was used as the primary sampling technique with the aim of identifying specific participants who had experience of working as player welfare officers within elite sport

(Mason, 2002; Palinkas et al, 2015; Robinson, 2014). In addition, snowball sampling was also used during the study (Gratton & Jones, 2014). At the end of each interview, the participants were asked if they could recommend any welfare officers who might be willing to take part in the research. This gave the opportunity to access further participants through email communication (Gratton & Jones, 2014; Skinner, Edwards & Smith, 2020; Sparkes & Smith, 2013). This approach enabled connections to be formed between a range of participants that were in a similar job role (Skinner, Edwards & Smith, 2020) and also enabled a further rapport to be built with participants due to the need to engage in email correspondence that explained the nature of the research (Gratton & Jones, 2014).

Before the recruitment process could begin, ethics documents were submitted to gain ethical approval. Ethical approval was obtained from the University of Hull's ethics committee (Reference Number: FHS403, see Appendix A). Once ethics was approved, the participants were identified through club websites and contacted through email. Through email, the participants were sent a letter of invitation that explained the reasons for them being selected and the aims of the study as well as what they would be asked to do if they chose to participate. If the participant wished to receive more information about the research, they were also sent the participant information sheet that explained the study in more depth. Once the participant had confirmed that they were willing to take part, they were sent a demographic information sheet and informed consent form to complete before the interview date. These documents were communicated through email and kept on a password protected USB device which was subsequently stored in a secure location.

3.5 Qualitative Interviews – a rationale

An interview is a social activity in which two or more people actively seek to construct knowledge about their own experience and the social worlds through which they navigate (Sparkes & Smith, 2013; Smith & Sparkes, 2016). The purpose of an interview is to collect qualitative data through a discussion that invites participants to share personal accounts, emotions/behaviours, and experiences (Smiths & Sparkes, 2016). The discussions are shaped by numerous factors, including motivations, memories, emotions, age, gender and many more (Randall & Phoenix, 2009). These discussions can take place using a variety of interview styles. Firstly, structured interviews involve a series of pre-planned questions (Smith & Sparkes, 2016). A strength of this approach is that it enables researchers to ask pre-

determined questions in a specific and linear order. However, the highly structured nature of these interviews also serves as a potential weakness as interviewers are unable to explore issues which may be of interest to the interviewee but are not within the scope of the interview schedule. A second approach involves individual unstructured interviews which involves some pre-planned open-ended questions to be used as prompts, but the participant takes more control over the interview (Smith & Sparkes, 2016). Thirdly, semi-structured interviews involve participants being asked a series of pre-planned open-ended questions (Smith & Sparkes, 2016). The use of a semi-structured approach offers a degree of structure that is missing from unstructured approaches whilst permitting flexibility to explore a wide range of topics. Interviewers using this approach adapt the order and phrasing of questions according to the flow of the interview. Finally, focus group interviews may follow any of the structures detailed above but rather than interviewing an individual, a group of participants are interviewed at the same time (Smith & Sparkes, 2016). Focus group interviews are often chosen when research is complex and requires numerous individuals of interest to be interviewed (Hennink, 2014; Stewart & Shamdasani, 2014). Furthermore, Brinkmann (2013) highlights the importance of knowing the difference between types of interviews as they can influence the design, reporting and analysis of qualitative data. Brinkmann (2013) also states that it is not uncommon for interviews to start in a semi-structured format and move back and forth between semi-structured and unstructured formats as discussion continues.

As this research predominantly relies on the lived experiences of player welfare officers, it was decided that interviews would be the most appropriate method. Interviews enable flexibility to ask participants planned and unplanned questions about their feelings and experiences (Smith & Sparkes, 2016). These discussions allow a deeper insight into personal perspectives, enabling the opportunity for researchers to explore avenues they did not consider before data collection (Smith & Sparkes, 2016). To prompt discussion, an interview guide that consisted of some open-ended questions was available as guidance, this enabled a semi-structured approach giving the participants the opportunity to discuss topics away from the guide. While the interviews followed a semi-structured approach early on, they became increasingly unstructured as participants discussed topics that were personally meaningful. The interviews were undertaken on a one-to-one basis and participants were offered the opportunity to participate over the internet. By offering an online interview, it was possible to geographically widen the participant sample and contact clubs further afield (Salmons, 2015). This option also gave participants the opportunity to feel safer if they did not feel comfortable

meeting face-to-face to discuss sensitive subjects (Salmons, 2015). Furthermore, by using a one-on-one approach it is possible to undertake an in-depth exploration of the participants experience. By taking this approach it was hoped that participants would open-up about experiences and contribute towards enlightening people about the socio-cultural aspects of human lives that can shape how we think and behave (Smith & Sparkes, 2016).

3.6 Interview Process

Kvale and Brinkmann (2009) outline that conducting interviews is a craft that requires training and extensive practice. To enable a successful interview, there are various factors that a researcher should take into consideration before, during and after conducting them (Smith & Sparkes, 2016). With the understanding of the research above, before any interviews were conducted it was important to acknowledge that an interpretive approach allows interviewers to learn about the journey of a participant and construct knowledge together (Kvale & Brinkmann, 2009). Within this research, the adoption of an interpretive approach meant that the interviews involved a co-construction of knowledge between the interviewer and interviewees, giving the participant the opportunity to voice their feelings and experiences in detail (Gratton & Jones, 2014; Kvale & Brinkmann, 2009). The use of a semi-structured approach helped to privilege the participants voice by encouraging them to discuss feelings and experiences that were personally meaningful to them (Dearnley, 2005; Gratton & Jones, 2014; Smiths & Sparkes, 2016).

The first step in the interview process involved constructing an interview guide. Following Smith and Sparkes (2016) recommendations, an extensive literature review identified pertinent questions relating to the role of care in sport. The questions were shared with my supervisors during meetings and we decided a section of the interview schedule should be informed by Noddings care theory (1998, 2003, 2005). The goal here was to use this theory to explore how player welfare officers seek to meet athlete needs. On the basis of the findings from studies such as Lewis et al (2022), it was also decided that some questions would focus on the care networks that form a climate of care for athletes (Cronin, 2019; Gibson & Groom, 2018). Given the distinctly micro-political nature of practice within elite football and rugby league, it was also decided to draw upon Kelchtermans and Ballet's (2002) work to explore how attempts to care for athletes might be shaped or influenced by various socio-political factors such as professional self-interests. Meetings with my supervisors were also used to

consider the quantity of questions that would be asked and the types of prompts or follow-up questions that might be used to elicit more detail during the interview. We also discussed how I might provide participants with the opportunity to explore unanticipated issues that were not covered in the interview guide (Smith & Sparkes, 2016). We sought to construct questions that were open-ended to avoid simple “yes” or “no” answers and to encourage the participants to give descriptive answers about their experiences. Furthermore, while structuring the interview guide, the order of the questions was considered and arranged in a manner that kept the interview flowing and questions that may have been difficult to understand were rephrased following discussions with my supervisors. This included developing “pocket questions” to give direction to the interview (Josselson, 2013) and involved creating icebreakers and final closing questions at the beginning and the end of the interview. When the interview guide was complete (see Appendix B), practice interviews were undertaken with friends, both face-to-face and online to practice recording, to revise the structure of the interview guide and reflect on tone of phrasing as well as appearance. Lastly, to be courteous the participants were contacted a few days before the interview to ensure they were still willing to take part and to check that the date, time, and location did not need to be changed.

Additionally, when participants were contacted, they were notified that the interviews were to be conducted online through the platform Microsoft Teams. The decision to conduct over the internet allowed the player welfare officers increased flexibility within their busy schedules and enabled the sample to be geographically widened to increase recruitment opportunities (Salmons, 2015). Due to the nature of the study and the interview guide featuring sensitive questions, I felt that online interviews were appropriate as they would provide participants with a ‘safe place’ to comfortably discuss sensitive topics (Salmons, 2015). Furthermore, I also took into consideration that player welfare officers may be responsible for conducting meetings and attending conferences, therefore may have had previous experience working with software such as Microsoft Teams throughout the COVID-19 pandemic (Olliffe et al., 2021). However, there are still some limitations associated with online interviews. As noted by King et al. (2018), although online interviews are often used to increase the range of participants a researcher might be able to access, some participants may prefer face-to-face interactions or may not be confident using software such as Microsoft Teams. Furthermore, there can be a number of potential drawbacks associated with online interviews. For example, sound quality might hamper the accuracy of a recording as this has a knock-on effect for the

researchers ability to make sense of or interpret the data (Hanna 2012; Weinmann et al., 2012; Weller, 2017).

After the preparation stage, the introductory stage of the interviews was vital to ensure that first impressions were positive. This involved dressing smartly, greeting participants with a smile, and not addressing the participant with their forename until invited to do so (Roller & Lavrakas, 2015; Smith & Sparkes, 2016). After the introduction, it was important to try and build rapport with the participant to encourage them to open-up about their experiences in detail. Email communication prior to the interviews may have also contributed to rapport building (James & Busher, 2012; Smiths & Sparkes, 2016). Before the interview, small talk was made with the participant to establish a comfortable environment and help them relax (Roller & Lavrakas, 2015). They were reassured that there were no right or wrong answers as the interviews focused on the importance of their role and the challenges they face. There was a brief discussion about the interview guide and the topics being addressed, to remind the participant of any distressing topics prior to the interview starting. They were also reminded that everything remained confidential and that they would be assigned a pseudonym when transcribing the interview and when presenting results. They were also reassured that they would receive a copy of the transcript after the interview and would be given an opportunity to comment upon the interview findings and the way that their experiences had been interpreted (Roller & Lavrakas, 2015). In addition, the participant was asked if they give consent for the interview to be recorded and the participant was reminded about the purpose of the research. They were then invited to ask any questions surrounding the research before continuing.

Once the participant was comfortable and had sought clarification about any aspect of the research, the interview began. To start, the Dictaphone was checked to ensure it was recording and was placed where both voices could be heard clearly. Once the interviews began, I employed a series of strategies to maintain rapport and to encourage participants to discuss their experiences in detail. For example, active listening was used to provide participants with time to think and elaborate on replies without being interrupted or feeling overwhelmed with questions (Smith & Sparkes, 2016). If silence arose, the participant was left to think about their experiences or was given a probe to encourage elaboration. Empathy was shown in response to some sensitive questions, this helped build further rapport. An empathetic response can be useful when used appropriately (Josselson, 2013). Responses,

such as a light-hearted smile, need to be used appropriately as they might prove problematic if interviewees interpret such responses as a lack of levity on the researchers behalf (Josselson, 2013). Researchers needs to understand there is a difference between them and the participant - the participant should always be an 'other' to the researcher (Smith & Sparkes, 2016). When referring to the participant as an 'other' this means that the researcher should be mindful not to overly identify themselves with the participant and 'put themselves in their shoes' (Smith & Sparkes, 2016). Respect between the interviewee and interviewer might be strengthened through the use of balanced empathetic understanding (Smith, 2013).

With the understanding that discussions can be contextual and co-constructed, it was important to consider that participants may respond in a desired way depending on the how they perceive their environment. It was taken into consideration that my empathetic responses needed to be carefully monitored and used appropriately to avoid participants succumbing to desirability bias (Josselson, 2013; Nelson, Groom & Potrac, 2014; Markula & Silk, 2011; Roberts, 2019). For the above reasons, it was important that I remained open-minded about discussions and allowed the participants the opportunity to explore new avenues that enabled them to find their own voice (Gratton & Jones, 2014). In addition, participants were asked to imagine that their life and experiences were like an unfinished book encouraging the participants to use all of their chapters of life to answer the questions (Smith & Sparkes, 2016). Before the interview drew to a close, the participants were asked if they had anything further to add to the interview and were given the opportunity to discuss topics that were not covered within the interview. Before saying goodbye, the participants were thanked for sharing their thoughts, feelings, and experiences.

Once the interview was complete, the participant was further contacted to thank them for their participation in the interview. Field notes were developed after the interview finished to identify important interview details such as the relationship built with participants, participants reactions to questions, thoughts and feelings towards stories and detailed descriptions of main events (Smith & Sparkes, 2016). This encouraged me to reflect on each interview and to decide how I might refine my approach to subsequent interviews (Haynes, 2012). After making field notes, the interviews were transcribed using headphones to enable the discussions to be heard clearly, increasing the quality of the transcripts ready for analysis. 'Member reflections' (Cavallerio et al., 2020) were used as a means of generating additional insight. Participants were sent transcripts of their interviews and asked to comment on the

principal researcher's initial interpretations of the experiences they had recounted. They were offered the opportunity to re-interpret or offer an alternative perspective. Five participants indicated that they were happy with how their experiences had been portrayed whilst a sixth participant requested that some material was adjusted to maintain staff and player confidentiality. The sixth transcript was adjusted and used with the participants confirmed they were happy to progress.

3.7 Data analysis and judging quality

Following on, it is important to outline the chosen process of data analysis and judging quality. Firstly, the chosen process of data analysis was thematic analysis. As the qualitative data was produced through interviews with the participants, it seemed appropriate to use thematic analysis to analyse the interview transcripts. Thematic analysis is a popular method used to identify, analyse, and report themes found within data (Braun & Clarke, 2006). Thematic analysis was chosen as it is a theoretically flexible approach to data analysis that seeks to facilitate the identification of patterns across a dataset (Braun & Clarke, 2014). This approach to analysis acknowledges that themes are actively identified by researchers whose reading and understanding of the world is shaped by their individual experience. The analysis process followed the six phases of reflexive thematic analysis as outlined by Braun and Clarke (2019). Phase one required familiarization with the data via repeated reading of the transcripts before coding began. Although this is a time-consuming process, this phase is important as it provides the foundation of the analysis. Even as though the transcription of the interviews were time-consuming and frustrating, this process also helped with the familiarization phase.

Phase two consisted of generating initial codes and identifying information that appeared pertinent to the research question. A code is a succinct label that captures the content and its analytical relevance (Braun & Clarke, 2019). Coding involves highlighting key words and phrases that may have relevant meaning to the research question and assigning them a 'code' to organise them into meaningful groups (Braun & Clarke, 2019). During the process of coding, the data of relevance to the research question was organised into meaningful groups that may develop into themes later through the process (Tuckett, 2005). For example, "This is because as you can probably appreciate coaching staff in particular and performance staff,

they carry so much weight’’ was assigned a code of support networks and “My closest allies within the club were always the medical staff in particular and the physiotherapists’’ was also assigned the code support networks as they both relate to support of staff. Another example is “things that weren’t immediate and that certainly weren’t an emergency. What I did is... I declined in actually replying to those at that time and that was how I set personal boundaries’’ which was assigned a different code that related to the challenges of the role. Sematic coding was used to identify the surface meaning of data – an approach that typically does not go beyond the participants responses (Bryne, 2022). An example of sematic coding was “They’re not ones for like booking appointments and coming to see you in the office, they would rather do it in that kind of like informal sort of a thing’’. This sematic coding was drawn from transcript four and was identified with Noddings care theory (1988, 2002, 2005) in mind. From the coding there is no further meaning beyond the words, it was clear that Robert intended to adapt his practices to increase care. Latent coding was used to identify extracts that may have underlying meanings and allowed a more creative approach to coding (Bryne, 2022). An example of latent coding was “ I think the hardest thing has been the release process, it’s quite often the conversations with parents that are the most difficult... it’s often a very strongly worded conversation that essentially kind of blames me but actually it’s nothing to do with me’’. Using micro-political theory, the quote by Charlotte was interpreted as having underlying meaning. It was interpreted that Charlotte may have been negatively perceived by those that surround her (specifically parents) due to her visibility being increased during the retain and release process. Even as though these theories were considered when coding, each transcript was given equal attention highlighting any sematic and latent codes that seemed interesting. The coding of each transcript was repeated numerous times to ensure as many themes as possible were identified. Although coding is known to be a subjective process, researchers are unable to achieve theory-free knowledge (See Smith & McGannon, 2018) and so must remain reflexive about how their theoretical positioning influences the coding of data. The use of reflexivity in the current study requires acknowledgement of the role played by my supervisors as ‘critical friends’. Coding data and the identification of themes was a collaborative and reflexive process. My supervisors drew on their own disciplinary knowledge to challenge my interpretation of the data and generation of the themes (Braun & Clarke, 2014; 2019). For example, my supervisors’ knowledge of the micro-political actions that often dominate practice within elite sport was drawn upon when identifying the sub-theme The micro-politics of care (i.e., Rapport building and ‘getting to know’ athletes as ‘human beings’ and spreading the ‘responsibility’ of care). My previous

experience shadowing a PWO working with a professional rugby league club gave me a certain amount of ‘insider knowledge’ and this was also brought to bear on the data.

Phase three consisted of ‘searching’ for themes. This was done by analysing the previous codes and placing them into sub-themes. Codes with similar meanings were grouped together to create a sub-theme. In order to identify sub themes, a table was created to group similar codes. By using thematic maps, it is possible to identify which codes may interlink between one another and it is possible to visually identify which themes may be branch off from an overarching theme. By establishing the relevance of themes, it was possible to discard codes that may not be considered important or create a theme called ‘miscellaneous’ to place codes that did not fit into main themes but which may still have held some explanatory value. To finish the phase, a collection of themes and sub-themes were created and a sense of which themes had significance was established but no themes were discarded as they were reviewed within the next phase to establish if they needed changing. In addition, it is important to note that the coding process was a collaborative and reflexive process, aiming to explore multiple interpretations and richer interpretations of meanings within the data. It is also important to note that qualitative analysis does not contend to provide a single and ‘correct’ answer, but rather intends to remain open to interpretation through a reflexive approach (Braun & Clarke, 2013; 2019; 2020).

Next, phase four consisted of reviewing the themes that were established within phase three. During this phase, it was possible to identify and discard themes that did have relevant meaning towards the dataset or did not share similar coding to the others identified. Within this phase, the coding extracts from each theme were reviewed to consider whether patterns had emerged between each theme. It was also important to consider whether the themes had clear distinctions and relevance towards the research question (Braun & Clarke, 2006; 2014). In relation to the research question, it was important to consider the validity of each theme within the data set to ensure it gave an accurate representation of the interviewee and the research. By reviewing the themes, it was possible to condense themes and make them more concise to help in phase five.

Phase five consisted of defining and naming themes. Defining and refining the themes enabled certain themes to be chosen for the analysis and further understand what the

‘essence’ each theme. By understanding the themes in further detail, it was possible to understand ‘story’ of the theme and understand why they have significant interest to the research question. This process enabled a detailed analysis to be written about each theme to outline how the findings of each transcript could be triangulated as well as how they connect with the research question. This phase also required further refinement considering whether there were other sub-themes that were not relevant to the dataset. It was important to consider sub-themes as they can give structure to a large and complex theme rather than creating a large number of main themes. This helped identify a hierarchy between themes and establish their importance within the research. The final aspect of this phase consisted of describing each theme in a sentence to ensure it was refined appropriately and consisted of giving each of them concise names. By the end of this step, you should be able to clearly define your themes and understand how they relate to the research question.

Lastly, phase six consisted of producing the report. By this phase, a full set of themes had been established and used to tell a concise, logical, and coherent story about the data with the aim of increasing the validity of the analysis to the reader. Within the analysis of the data, extracts from the themes were used that captured the points that were being demonstrated but also had the supporting analytical narrative to provide an argument that related to the research question. It was important to choose extracts that were not overly complex but vivid to aid in going beyond the description of the data in the analytical narrative.

Although I have outlined the six phases in order, the phases were not always followed in a linear manner. As stated by Braun and Clarke (2020) the six phases can provide guidance but do not have to be rigidly followed. I followed the six phases in order during the coding of my first transcript but upon reflection I began to realise that a reflexive approach should be adopted. Rather than following thematic analysis as a fixed, rigid, step by step approach, analysis was an iterative approach which involved working back-and-forth between the various steps (Braun and Clarke, 2020). By completing thematic analysis, I was able to confidently identify themes and extracts to relate to the theories I had chosen to use. The first theme identified related to Noddings (1988, 2002, 2005) ethics of care and the second theme, role ambiguity. The final theme related to micro-politics within working environments focusing on care networks (Cronin, 2019; Gibson & Groom, 2018; Thompson, Potrac & Jones, 2015). These themes and supporting extracts are further discussed within the next section.

Furthermore, to aid in the development of a researcher, judging the quality of a research paper is important because learning how to read a paper and identify valuable information can help to inform your own projects (Toner & Moran, 2014). Developing skills that can help you to identify reliable information, could help with avoiding mistakes that may decrease the trust the readers may develop in the findings of a project (Toner & Moran, 2014). As this research is qualitative based, there are certain criteria's that will be used to judge the data. As suggested by Smith et al. (2014), qualitative researchers seek to judge their work based on a list of criteria's including *Substantive Contribution* (does the research help us understand social life?), *impact* (does the research emotionally and intellectually affect the reader and make them want to take action?), *worthy topic* (does the topic of the research address a significant issue and is it interesting to readers?), *rich rigour* (has there been a significant amount of time spent in the field to collect detailed data?), and *Credibility* (has there been a significant amount of time spent with the participants in relation to dialogue and discussions and is the data detailed enough for analysis?). These criteria's are not merely used as a list that needs to be 'ticked-off' to ensure validity, but instead provide flexibility and can be drawn upon depending on the research one is conducting and judging (Smith et al., 2014). For this reason, within this research project the following criteria's have been considered and drawn upon including *substantive contribution*, *impact*, and *worthy topic*. *Substantive contribution* was considered as it is hoped that the finding will help to add to the existing understanding of the micro-political interaction within elite sporting environments. *Impact* was considered as an important criteria, as it is hoped that the findings will encourage the readers to take action and research further into the support networks that athletes have made accessible to them within other elite environments. Lastly, the criteria of *worthy topic* seemed applicable as the findings address the societal stigma surrounding a lack of help seeking among elite athletes. The criteria's outlined above have been selected based on making them specific to this study.

Chapter 4: Findings

The first main theme identified was Mental Health Support and Life Skill Preparation which included the sub-themes “Managing common stress related concerns”, “Taking an athlete-centred approach to care and support” and “Preparing athletes for a life beyond sport”. The second main theme related to the challenges to care in sport with the sub-themes including the “An ambiguous role”, “Fighting indifference and overcoming the stigma of help seeking” and “Work life balance and establishing boundaries”. The third theme identified and sought to capture the strategies that welfare officers use to enact care and to encourage help-seeking being named “The micro-politics of care”. This theme consisted of sub-themes relating to “Increasing visibility and gaining buy-in”, “Rapport building and ‘getting to know’ athletes as human beings” and “Spreading the ‘responsibility’ of care”.

4.1 Theme One: Mental Health Support and Life Skills Preparation

The role of a Player Welfare Officers varies from day-to-day. This theme details their primary responsibilities and captures their multifarious duties.

4.1.1 Sub-theme One: Managing Common Stress Related Concerns

Elite sport places considerable demands on the wellbeing and mental health of athletes (Kola-Palmer et al., 2019). A number of participants drew attention to the mental health and wellbeing challenges faced by athletes such as injury and psychological distress. It quickly became apparent that injuries were commonplace and PWO’s wanted to provide injured athletes with extra support to help them through what is often a very complex and emotionally demanding process (Souter et al., 2018; Rice et al., 2019; Walker et al., 2011). For example, Mark revealed that it is common for athletes with long-term injuries to develop feelings of anxiety and depression:

So, as you can probably appreciate rugby league and injury sort of go hand in hand and if an athlete got to the end of their career and they didn’t sustain an injury which will keep them out for a number of weeks they are doing really well. I spend a lot of time around the rehabilitation group, the long-term injured group and again if we talk about anxiety and depression a lot of the time those athletes are training on their own,

they are away from the squad who were training or preparing for games. They very much feel sort of on the outside of things. So, it is really important that I spend time with them because they wouldn't be in the greatest frame of mind a lot of the time.

In addition, William revealed that injury can be problematic because players may feel a sense of loss, social isolation, and have more time to dwell on their future:

I mean one of the biggest sources of difficulty with players is actually getting injured. So, in terms of mental health difficulties that is a big one because of course they're not taking part in the activity that they love and not being part of the group that they would be training and playing with. So, there's an element of social support that's kind of lost and of course they've got more time on their hands to dwell over what might happen in the future because of their injury. So, I've dealt with players right the way through from a young age to lads that might be on the cusp of a professional career but whose careers actually might be ended before they've even got going really.

Similarly, Robert outlined that injured athletes require a great deal of support and that this can provide opportunities to converse with athletes about feelings of failure and loss of play as well as motivate them to complete rehabilitation. Robert noted:

If they've got a long-term injury it affects how they are because they want to play, so they come and have a chat about that. It doesn't always have to be kind of like clinical and probing, it's just sometimes somebody wants to have a chat with you, you know. So, like injured players when you're on touchline, they're all stood there depending on the injury. You also see them getting back into rehabilitation and it makes you feel proud that your part of that as somebody who has said to them if you need anything just give me a shout and we can have a chat.

Mark and William explained that it is common for injured athletes to develop anxiety and depression through feelings of loneliness and exclusion, supporting the research of Rice et al. (2016) and Mellalieu et al. (2009). To help athletes deal with these challenges, we see

examples of PWO's engaging in what Noddings (1988, 2003, 2005) referred to as "engrossment" with the intention of showing the athlete that they understand their needs and interests. In these cases, engrossment involved the practitioners showing that they understood what an injury means to these athletes and that the process can separate athletes from their friends and teammates and that this can be a lonely and isolating experience. Engrossment (or 'attention' as Noddings referred to it in her later work) involves being 'open to the other, vulnerable to what he or she is feeling' (Noddings, 2010, p9). This involves listening or observing receptively in order to identify the athlete's feelings and to understand what they are going through. Mark revealed that listening is an important part of the role and more often than not, athletes want to be listened to in a non-judgemental way. This was evident within discussions with Mark:

Nine times out of ten when someone presents something to you, all they want you to do is actually listen to them non-judgemental and show them empathy, just giving them a positive regard and actually setting out for them. Not actually giving them a lecture or giving them advice sometime, just if you just listen to them.

This level of empathy and engagement is central to the act of care and is also important given that research has revealed that athletes who experienced injuries have higher anxiety and depression scores than non-injured athletes and are therefore increasingly likely to develop mental health disorders through experiencing isolation and loneliness (Souter et al., 2018).

Similar to Mark and William, Robert evidenced engrossment/attention and empathy, when helping injured players deal with their rehabilitation process (Noddings, 1988, 2003, 2005). Developing empathy with the players appears to involve motivational displacement on behalf of the practitioners. Motivational displacement helps PWO's care for athletes by setting aside their own interests and focusing on understanding another's (Dohsten et al., 2020). For example, Robert set aside his own interests to actively engage in a conversation with injured players about their feelings towards their injury. In some cases, athletes begin this process by approaching the Player Welfare officer on the touchline to have a chat. Robert actively encouraged athletes to approach or contact them at any time, showing that they understand the complex needs and personal challenges faced by these athletes. A personal challenge may include injury and rehabilitation or generalised anxiety (Gano-Overway, 2021; Noddings, 2003).

Helping athletes deal with the injury process is an important aspect of the Player Welfare officers role. However, findings revealed that they also play a substantial role in helping athletes deal with stress, anxiety, and depression, highlighting that athletes may experience difficulties balancing the demands of an elite sporting environment around their personal lives. This finding resonates with McKay et al.'s (2008) work exploring how sporting expectations and pressures can affect an athlete's mental health. Negative emotions and experiences such as fear of de-selection or release can be a contributing factor towards the development of mental health disorders (Larkin et al., 2017). This was echoed by Mark when he outlined how performance-related concerns can influence mental health:

There always seems to be a little bit of a performance undercurrent. So, in relation to mental ill health and if we were specific around things like depression or anxiety, a lot of that quite regularly was brought up on where it was performance related. So, an athlete may have had a dip in their performance and that may have had consequences in performance staff not selecting them for a game, and they may find themselves on the outside and that can happen really quickly. In relation to how many athletes are actually at the club and I guess the level of competition sometimes, so that will create issues around players being out of contract and not really knowing sort of past a November deadline of A. where they'd be playing B. where the next employment will be, whether it will be with the actual organisation or whether it would be somewhere else.

The stress experienced by younger athletes might be exacerbated by having to balance education with training. For example, the transition to secondary school can prove particularly challenging as noted by Charlotte who stated: "We're currently in talks with schools about a player that has gone to a private school and it's affecting his entire wellbeing in life". Similarly, Thomas mentioned that "Perhaps the younger lads that are still going through college and school, they would just be a little stressed. Actually, I'm not going to say stressed but they would just be full up with stuff and they need help with how they find time for themselves to relax". To help manage the stress of education and football, Thomas provided an example of "stress buckets" as a coping mechanism, "it's just a little bit of wellbeing support from the wellbeing manager to talk about stress buckets and stuff like

that''. This indicates that clubs may be taking a proactive approach to stress management before making referral pathways for further support plans.

These quotes show how the PWO's seek to engage in engrossment with athletes, by acknowledging that their needs can be affected by internal and external factors (Noddings, 1988, 2003, 2005). The athletes may have both internal goals (e.g., improving their strength and conditioning) to meet within the sporting environment and external goals (e.g., education) to meet away from their sporting environment. Seeking to engross athletes and acknowledging their need for support may facilitate motivational displacement. Once athlete's understand that their needs are being acknowledged and engages with the support offered to them, they may begin to understand that the PWO has their best interests at heart (Cronin et al., 2019; Gano-Overway, 2021; Noddings, 1988, 2003, 2005).

Lastly, when engrossment and motivational displacement are present, recognition may occur. Recognition refers to an individual recognising the caring actions of another and responding to the care (Gano-Overway, 2021; Noddings, 2003). In relation to a sporting environment, this means that an athlete may seek to constructively engage with the care being offered to them and accept support offered. This was outlined by Thomas when he revealed that in the past, athletes have engaged with PWO's and embraced the help that was offered to them:

Perhaps addiction... the three or four that I've dealt with in the last five six years, two of them are players that have already come to us and have already got issues and they were already seeking support for them issues. So, that was just the case of continuing that support and making sure that they were still accessing the support from Sporting chance or whatever they were going through. (Thomas)

In particular, Thomas outlined that the athletes who were already engaging in treatment continued to utilise and embrace support they were being offered within their new club environment. To encourage athletes to continue engaging in support, Thomas highlighted that they seek to understand and communicate the care they were accepting within their previous club environment. By doing so, the athlete may feel encouraged to continue with their existing support within their new environment as well as acknowledge that their new PWO intends to care for them, increasing the likelihood that they will communicate any wellbeing concerns.

Overall, the findings within this sub-theme highlight that the PWO's engage in engrossment with the intent to encourage athletes to seek support and aim to understand/sympathise with those who are encountering difficulties. The welfare officers in this study have worked with athletes who are prepared to avail of their support – many of whom appear not to fear the stigma of mental health disorders and help-seeking (Delenardo et al., 2014; Glick & Castaldelli-Maia, 2016; Markula & Pringle, 2007). The aspect that still remains unclear, however, are the factors or systems that prompt athletes to intentionally engage with a PWO and respond to their caring practices.

4.1.2 Sub-Theme Two: Taking an athlete-centred approach to care and support

As the main responsibility of a Player Welfare officer is to ensure a duty of care among athletes, coaches, and other staff members (Grey-Thompson, 2017), it is important to gain a more detailed understanding of the various support networks that PWO's can encourage players to avail of. The principal strategy used to encourage help-seeking is through an open-door policy, which intends to provide athletes with the opportunity to speak freely about their concerns on their own terms (Bennie & O'Connor, 2012; Jones et al., 2004). This was noted by Charlotte when she revealed that she uses this approach to allow the athletes to broach subjects on their own terms. Additionally, rather than making the athletes book appointments, she uses an online system to increase the accessibility of support and to ensure that the process remains entirely volitional:

So, players can come directly to me. So, there's an open-door policy, any player can come to me and book a schedule or if they need a literal, I need to chat now, no problem. So, it can be very much player led. We also do... I send out a monthly well-being screening, and I track that, and players have the option if they don't want to actually just come to me, they can click a button on there that says this scenario and I actually want to have a chat but I'm not coming to you in person. So, then I can go and find them and that gives them the opportunity to reach out for help if you don't want to actually interact anybody which this fine.

Similarly, Robert revealed that athletes may prefer a more relaxed and informal approach to support rather than making them book appointments:

They're not ones for like booking appointments and coming to see you in the office, they would rather do it in that kind of like informal sort of a thing. They're a bit standoffish really and quite different to the run of the mill society sort of thing that I'm used to. So, if I said to them that I'm booking them in for a session, they wouldn't turn up... it's not like can I book you in for a session because unless it's really needed, they wouldn't come you know.

An open-door policy may encourage an athlete-centred approach towards care by providing athletes the opportunity to seek support when they feel most comfortable. This approach might help athletes retain their dignity when wishing to express a degree of vulnerability as well as encouraging rapport building through the acknowledgement of an athletes need for support (David, 2005; Lindgren & Barker-Rutchi, 2017; Miller & Kerr, 2002; Preston, 2011). Furthermore, in relation to Noddings care theory (1988, 2003, 2005), Charlotte and Robert acknowledge the athletes need for support by athletes communicating their problems through other methods such as informal conversations and monthly screenings. In doing so, these practitioners demonstrate engrossment by ensuring athletes do not feel pressured to utilise support but rather have the freedom to access it when ready to do so. This approach might also facilitate motivational displacement by educating individuals on where to access support and who it is that is best placed to care for them. Athletes often avoid support because they do not know what forms of support are available to them. Therefore, by educating them on what they can access, it may be possible for them to actively engage in help from a PWO on their own terms (Abram et al., 2008; Gulliver et al., 2012). If an athlete is engaging in and recognising the care that is being offered to them as well responding to the support that is offered, recognition is created (Gano-Overway, 2021; Noddings, 2003). Recognition is present within the above quote by Charlotte, in which athletes recognise the caring actions of the PWO by responding to the monthly screening support that is offered and being honest about their concerns or need for help.

When a Player Welfare officer is approached by an athlete and made aware of their problems, they have a number of options in terms of the provision of support. They may find that they are well-placed to offer support themselves or they might decide that the athlete needs to be sign-posted towards alternative sources. All of the participants highlighted that athletes approach them for mental health and wellbeing support. In addition, it was also outlined

throughout the interviews that the PWO's were open and honest about their skill sets and told the athletes when they would need to signpost on for additional help. When signposting and acting as triage, the PWO's referred to external agencies for support. This was revealed by James: "Then we have the sign posting, the meeting I just come off was with our mental health working group to ensure we bring all the cases that we're responding to within the Academy to triage and signpost to the appropriate person... whether internal or external in terms of how we're going to respond to those individuals."'. In addition, Mark outlined that he signposts to other businesses who specialise in topic areas that he may not be qualified to deliver.

So, something like gambling for example, we would have the business partners and the supporters of the charity was a company called Epic. So, Epic will do a lot of work in the Premier League with footballers and it was one of the... gambling in my experience within the role was one of the fastest growing areas of concern and ultimately if someone was in need of support within that area, nine times out of ten it was due to a lack of awareness or lack of education. So, you know by putting them in touch with experts within that field, for example if you use epic as an example, they would work one to one with an athlete and probably educate them in an area. (Mark)

As shown in the above quotes by James and Mark, it is clear that they intend to care for the athletes and places their wellbeing as a priority. It is clear that James and Mark intend to engage in engrossment and motivational displacement because they prioritise responding to the athlete's needs in the most appropriate way (Dohsten, 2020). James and Mark respond to the athletes needs by ensuring that he knows where to signpost on to when an athlete needs additional support. By being honest to an athlete about their competencies and signposting, the trust between an athlete and Player Welfare officer may be strengthened, encouraging the utilisation of care networks in the future (Jones, 2009; Purdy, 2016; Tengland, 2007). The importance of trust and honesty was noted by Thomas when he suggested that honest discussions with athletes can encourage them to recognise the next level of care they may need to access. Thomas recognises that his role will largely consist of signposting athletes instead of tackling these concerns himself, therefore values gaining the trust of athletes with the intention of signposting to further support. Thomas values that he is the first person that athlete's approach for support, suggesting that the trust may already be apparent between himself and the athletes. This means that the athlete's may be increasingly likely to take on

board and value the advice provided by Thomas as well as trust the support he may signposted them towards.

To be honest the fact that they come to me means that initially it will be me... I will never just throw them straight to somebody else before I've actually sat down and spent some time with them. My intention is to get them to try and recognise what the next level is and what's needed. Whether that is a little bit of support or whether it's just a little bit of wellbeing support from the wellbeing manager. (Thomas)

Furthermore, when referring to external support, within rugby league, various participants mention Rugby League Cares and Sporting Chance in which athletes or staff member can receive counselling or further wellbeing support from the charities (Rugby League Cares, 2021; Sporting Chance, 2022). This became apparent when Mark and Robert noted that they refer to Rugby League Cares and Sporting Chance for counselling services.

Nine times out of ten people would just contact me directly, so my phone would always be on and in addition to that as well they had sporting chance if someone felt that they needed a professional support from a fully qualified trained counsellor. They will contact me in the first instance and then I would make that connection with sporting chance for them. This is how much of a brilliant service it was... so, at the moment after just coming out of a pandemic and I don't know how much you're aware of this but if you want to gain mental ill health support on the NHS, you're looking at a waiting list anywhere from 9 to 12 months. Whereas an elite athlete who may be wanting to see the one to one bespoke counselling support, they could have a counsellor the same day and that's how quick that could happen. (Mark)

And

If it's a mental health problem, I work with it myself and we've also got a registered mental health nurse who works for Rugby League Cares and we can pass on there. That then acts like a triage... so they probably do a bit and also refers onto like Sporting Chance which is a counselling service. (Robert)

The provision of additional support services such as Rugby League Cares and Sporting Chance is intended to show athletes that they value their mental health and wellbeing and understand that various internal and external factors can affect their performance. Offering this external support may encourage athletes to engage in interactions relating to mental health even when they feel they cannot trust internal support. Additionally, this also encourages the de-stigmatisation of help-seeking by encouraging athletes to engage in care regardless of their sporting environments, hopefully, this process will aid in the normalisation of help-seeking among masculine sports such as rugby, where it is common for athletes to assume they should be mentally and physically tough and impervious to the pressure and demands of competitive sport (Atkinson, 2019; Markula & Pringle, 2007; Rice et al., 2016). All the encouragement to utilise support emphasises to athletes that the governing bodies want every athlete to overcome barriers and reach their goals in their careers, representing another means by which these organisations can evidence engrossment (Noddings, 2003, 2005).

Furthermore, the prospect of retirement, and the uncertainty that it might bring, is likely to have an impact on an athlete's emotional wellbeing (Cosh et al., 2021; Stambulova, 2017). As well as counselling services, Rugby League Cares also provides transition managers that assist with the next phases of athlete careers (Rugby League Cares, 2021). This service aims to prepare athletes for this transition by equipping them with employment skills. For example, Robert and Thomas mentioned how they connect with local colleges and universities to create education opportunities for athletes.

Transitioning is something we're aware of and we have a transition manager as well that works with Rugby League Cares. They work with people from aged 28 but transitioning really now starts like when they come into the first team. From getting jobs, playing games, education, and work experience while they're doing that. So, they are more prepared than they used to be when they finish. I mean some of them struggle with loss and I think that's what you're alluding to really. (Robert)

And

What I have got is more time to try and find people to link with. So, I've now got more time to go to colleges, to go to universities, to try and find people that can help

the athletes. I can't spend more time with the players because there's no more hours in the day type of thing. So, there's plenty of time available for the players to do whatever they want to do even with commitments with families, there's plenty of time for the players to find a way to do something. (Thomas)

Even when athletes are transitioning out of sport, they are able to access a range of support through internal and external transition managers. The above quote from Robert highlights that the internal club transition manager works with the Rugby League Cares transition manager, offering support to each other as well as the athlete. From a rugby league club's perspective, Rugby League cares shows their intent to support any individual within a rugby league environment. Player welfare officers actively engage with athletes to offer them opportunities to develop post-transition. For example, athletes have access to personal training qualifications and are encouraged to enquire about post-sport careers. Thomas emphasises the need for increased access to educational opportunities by utilising networking with local institutions. Although transitioning has been briefly addressed, this will also be discussed in further detail and evidenced within the next sub-theme.

Overall, it is clear that athletes have access to different types of care within a rugby league environment and provided with freedom to access these support networks. However, there's evidence to suggest that despite the provisions of support, many athletes fail to utilise it and there's some uncertainty regarding whether all elite clubs are similarly committed to enhancing mental health and wellbeing support. It's possible that some athletes and organisations remain unclear as to the purpose and utility of PWO's. Further research is required to better understand the barriers to the uptake and implementation of support networks within elite sport.

4.1.3 Sub-theme Three: Preparing athletes for life beyond sport

As addressed within the previous sub theme, another aspect of a PWO's role is to encourage athletes to engage in education and career progressions with a view to assisting transition post sport (Kola-Palmer et al., 2020). Part of their responsibilities were to encourage athletes to consider gaining other qualifications to change professions after their sporting careers end. By offering educational support, it may be possible to better prepare athletes for post-sport transitioning by helping them upskill in areas of interest (Agnew et al., 2017; Browning et al.,

2012; Lewis., 2018). This became evident in the extract below, in which Mark discussed how they converse with athletes to understand their interests and support them with implementing a career action plan:

Everybody had bespoke needs and interests, so when I talk about transition and developing additional interests outside of the profession. Please don't get me wrong it wasn't a case of me pushing someone in to say, for example a short course just for the sake of it, it was actually a case of well let's really have some conversations around some interests that you do have and then I would in relation to that individual then offer bespoke support from that perspective. So, just to give you some examples there were some people who say for example wanted to start a short course in joinery, so that would be a case of me speaking to the local colleges and seeing what sort of short courses were available to them and if they would fit around their needs as a professional athlete. So, that would be me having a good relationship with local institutions. At the time, as well we had a bespoke careers coach, a lady who worked with all the clubs in the league. She did an absolutely fantastic job and it is just a case of me liaising with her. She used to come to our environment and speak with the player individually one to one and then she would create something called a career action plan. So, she would develop and devise some things that the player could work on independently, and then me as a player welfare manager would help support the making of those plans and help them come to life as such.

Similarly, Robert also revealed that they have conversations about career plans and contacts the national careers service to aid in implementing an action plan:

There will be contacting... so from a conversation, somebody might say I fancy being an electrician or something what does it entail? So, what I do then is I get onto the national careers service because we've got an allocated worker who interviews them and comes up with a career plan and all that sort of stuff.

Relating the above to Noddings (1988) ethics of care, it is clear that engrossment, motivational displacement, and recognition are present within some rugby league environments, especially when involving education. By conversing with athletes about their educational interests such as joinery and understanding how these interests can be tailored

around a professional athlete's needs, engrossment is created. In seeking to create a climate of care, Noddings (2012) argues that educators must help students discover what they might want to do and "help them explore areas of interest and to evaluate their own aptitude in an area of choice" (P.778). The PWO's created this climate by listening and seeking to understand what the athlete might be interested in pursuing once their careers had come to an end. Listening to what an athlete is going through and what their concerns might be is central to the establishment of a relation of care and trust. Once established, the player welfare officer may elicit the athlete's "cooperation in tackling the assumed needs". Or, together, they might agree that the athlete rejects "these needs and pursues another path in life" (Noddings, 2012, p.774). When an athlete acknowledges that a PWO's role is to support athletes and tailor care to the individual, recognition becomes apparent through athletes actively approaching the player welfare officer and engaging in advice on career options. As quoted above by Mark and Robert, they have regular contact with the careers service which liaises with athletes about creating a career plan. This outlines that athletes are engaging in meetings about education and responding to the care that is being offered to them, thereby displaying recognition.

In contrast, Thomas revealed that there are challenges when encouraging athletes to implement career plans. He highlighted difficulties encouraging athletes to undertake educational work alongside being a full-time athlete, outlining that they use an opt in and opt out approach to educational support.

So, we don't have any specific programmes, it's very much an opt in from the players, it's very much down to the players being in control and being in charge of whatever they do. They are full time employees, so they've got a full-time job. It's difficult to then say as well as a full-time job you need to go to college. If you were to like say to anybody in the workplace at the ages of 23 or 24, who's in full time employment, that they need to be going to college to prepare for their next job, it's difficult isn't it you know.

As referred to by Thomas, there are various challenges of offering athletes the option of engaging in educational support on their own terms such as finding a balance of not pressuring the athlete about their next steps and beginning the process of discussing their next steps. Similar to Sub-Theme Two that refers to mental health and wellbeing support, there are

risks of athletes not knowing what support is available to them, potentially reducing the likelihood that they will avail of support (Abram et al., 2008; Gulliver et al., 2012). From an athlete's perspective, they may feel as though their needs and interests are not being met because they are unsure how the PWO might help them prepare for career transition. Enacting an ethics of care first requires athlete's to know where to access support. When a caring environment is created and the athlete knows who intends to care for them, an athlete will then be able to take charge of when they need support and adjust this around their availability.

More often than not, the participants perceived the development of their players as people as well as athletes as a priority. Within the interviews situated in a football context, James and Charlotte revealed that they implement the Life skills programme and an Equality, Diversity, and Inclusion (EDI) programme. Within the Life skills programme, Charlotte outlined that the programme focuses on informal education addressing topics such as social media awareness, diet and nutrition, healthy lifestyles, hygiene, sex education and financial management.

Probably the biggest section without the one-to-ones is the life skills programme. So, that runs all the way from nines to twenty threes. So, that's a programme that covers basically informal education. So, looking at things like social media awareness and diet and nutrition, healthy lifestyles, hygiene, for the older boys like sex education and financial management. All the things that they probably wouldn't get in any other situation but they kind of need to know these things. So, that's a huge part of personal development. So, I wouldn't say this is necessarily a daily responsibility but it kind of factors into the life skills programme and everything that you're doing in the one-to-one spaces.

In addition, James highlighted that the EDI programme focuses on topics such as anti-racism, gender equality, sexuality and celebrating differences with the aim of aiding athlete's personal development.

Then you have the other side, which is about preparing people to be resilient, to be prepared for the life that they are about to live whether that's in football or outside of football. So, we run a programme across the Academy that looks different according

to different age groups so it's age appropriate, for example through February and March were running an EDI programme, equality, diversity, and inclusion programme across the Academy. So, we've got workshops around anti-racism, gender equality, sexuality and gender identity and just celebrating difference and what that looks like within the Academy.

The rise in concerns surrounding mental health and post-sport transition has encouraged organisations to take responsibility for preparing athletes for retirement (Chambers, 2019). Statistics highlight that around 80% of athletes struggle to adapt to normal life after their sporting careers due to lacking knowledge on career opportunities and self-interests (Stambulova & Wylleman., 2014; Torregrosa, Reguela, & Mateos, 2020). Programmes such as the life skills initiative help athletes develop new interests and aid in the development of hobbies and post-career opportunities. Embedding and normalising alternative interests may also encourage athletes to think about post-career opportunities from a younger age.

The Incorporation of the Life skills and EDI programmes into a sporting environment may show athletes that they are seen as ordinary people and their needs and interests as ordinary people are also valued. Valuing the needs, interests, and identity of an individual as a person and an athlete, is evidence of an ethics of care. As quoted by Charlotte, the Life Skills and EDI programmes aim to educate athletes on subjects that will help them in day-to-day life outside of sport as well as in a sporting environment such as hygiene and healthy lifestyles. These strategies have now been embedded in elite sport as part of holistic support structures designed to help athletes navigate the multiple transitions that they are likely to experience throughout their working lives (Chambers et al., 2019). These support structures serve a dual function insofar as they seek to meet the emotional needs of athletes whilst also equipping them with the technical know-how required to enhance their career opportunities. This may encourage athletes to accept support and utilising the support that is made accessible to them.

From this Sub-Theme, it is apparent that rugby league maintains the focus towards helping educate athletes in an area of their interest, with the intentions of aiding employment progression throughout the transitioning periods of sport. However, it seems that it is very much an opt in or opt out scenario within these environments, questioning athlete engagement in educational support throughout different club environments. It also remains unclear how practitioners make athletes aware of the support that is available to them. In contrast, it is apparent that football has greater focus than rugby league on developing an

individual as an athlete as well as a person focusing on the life skills programmes rather than upskilling athletes for post sport. These findings highlight the varying nature of education and support programmes that exist across different sports.

4.2 Theme Two: The Challenge to Care in Sport

As with any job role, there are various challenges that individuals face on a daily basis but within high-pressurised environments, these challenges may become increasingly difficult to manage. The previous theme revealed that PWO's have wide ranging roles and responsibilities which presents myriad challenges. This theme elucidates some of these challenges including role ambiguity, perceptions of Player Welfare by athletes and staff and time and boundary setting.

4.2.1 Sub-theme One: An Ambiguous Role

Athlete wellbeing has been increasingly prioritised over the last decade or so, with an increased amount of attention being devoted towards the importance of player care. As part of this process, the RFL introduced new guidelines in 2010 stating that full time Rugby League clubs/teams were required to have a designated PWO to focus on player care and to implement a duty of care (Grey-Thompson, 2017; Rugby Football League, 2021). Whilst this is a welcomed initiative, it remains unclear whether these officers are appropriately qualified to take on the demands of these roles. For example, the vague criteria that accompany job descriptions may create what is known as 'role ambiguity' (i.e., a lack of clear and consistent information regarding the actions required in a particular position; Eys, 2001; Kahn et al., 1964) among PWO's given the lack of clear and consistent information regarding the requirements of the role. A lack of information and clarity may be associated with decreased task perception and decreased task self-efficiency, therefore increasing the challenges associated with the role (Eys & Carron, 2001). With the above in mind, the findings within this sub-theme will aim to reveal PWO's thoughts on the lack of definition of their roles and identify the feelings that are evoked owing to this lack of clarity.

A number of participants mentioned that the qualifications they were expected to have created a degree of uncertainty around their role. For example, Robert revealed that it is a requirement to have a Level Three *Counselling Concept qualification* to be considered

prepared to work in a Super league club. Robert noted, “It didn’t used to be mandatory that you had to have Level 3 counselling in rugby league but now it is and you have to have like basic counselling skills”. The overall initiative to introduce a counselling qualification shows that mental health is valued within sporting environments and encourages PWO’s to be confident within their practices. By feeling more confident about being able to fulfil a job role, organisational interests are less likely to be affected because an individual will feel increased certainty about their professional competency when completing tasks (Gibson & Groom, 2018). Furthermore, although it is mandatory for a counselling concepts qualification to be acquired by Player Welfare officers working within rugby league and this shows positive intent, it is questionable whether this qualification is relevant to or appropriate for the role. Thomas, for example, outlined that he did not think a counselling qualification was appropriate given that certified psychologists or psychotherapists are typically available to focus on psychological issues that might arise. Thomas also revealed that he thought it was quite dangerous that PWO’s may be expected to use basic counselling skills on athletes, especially when they are not considered as certified counsellors until they complete the level four qualification in Counselling:

As things moved on over the years, it became mandatory that each person employed needed to have a Level 3 counselling qualification. I refused to do it as I said it’s not appropriate. Our particular setup that we had... we had a psychotherapist that was employed one day a week who’s also a sporting chance councillor. So, in the likelihood of any of our athletes ringing the Sporting Chance helpline at the time, it’s likely the psychotherapist that they would have got is the one that we employ one day a week as well. I thought it was quite dangerous and I made these feelings known, that you can’t actually council anybody as a Level 3 councillor yet we’re asking one person at, and some clubs just got one person as the welfare manager, to be a Level 3 councillor. I think it’s quite dangerous that you take on some counselling that you’re not really equipped to do.

The uncertainty of whether the role requires an aspect of counselling indicates a lack of clarity about the responsibilities and expectations of the role (Beauchamp et al., 2002). This may create a degree of socio-emotional ambiguity within practitioners if they feel that they are ill-equipped to fulfil some of their responsibilities (Eys et al., 2003). Kelchtermans and Ballet (2002) highlighted that the more uncertain an individual becomes about the actions

that are expected of them, the more their self-esteem can be threatened. If self-esteem is lowered an individual may question their professional competency and ability to fulfil their role and responsibilities (Kelchtermans & Ballet, 2002). Uncertainty can develop when an individual feels that their social recognition (acknowledgement of one's status and positive actions) and their self-affirmation (recognition of the existence and value of one's individual self) is threatened and they are not being noticed for the positive actions they implement within their role (Kelchtermans & Ballet, 2002). If uncertainty is increased, vulnerability is also increased creating the potential for feelings of worry and failure to arise as well as the questioning of professional competencies (Kelchtermans, 1996; Kelchtermans & Ballet, 2002). For example, at the beginning of Mark's career, if he did not know how to address a problem, he began to feel uncertain about his role, "I was probably more precious in the first instance and if I found that there was something that came across my desk that I maybe couldn't solve, that maybe made me feel a little bit sort of insecure in the first instance". A lack of social recognition can lead to lower self-esteem and fill an individual with doubt about whether they are deserving of their role (Kelchtermans & Ballet, 2002). In the case of Thomas, a lack of clarity about his role may affect his self-affirmation, particularly if athletes and practitioners (such as coaches and physios) are uncertain of his purpose position or unclear about the care he has to offer. The actions required to fulfil a role need to be understood by an individual themselves before others around them can give social recognition, therefore the responsibilities of a PWO role need to be clearer to minimise uncertainty.

In addition, Thomas was frustrated by his club's insistence that he complete the counselling qualification each year when he revealed: "I still gets pushed now for Level 3 counselling every single year and I have to refuse. So, that's a little bit frustrating". As previously mentioned, Thomas refused to complete the counselling qualification because he did not find it appropriate given that clubs typically have certified psychologists and psychotherapists in post to address wellbeing concerns. Thomas' refusal to complete Level Three Counselling Concepts may contribute towards a range of feelings and strain their working relationship with their organisation, owing to increased job dissatisfaction and feelings of frustration that he's being pushed to complete a qualification that he considers unnecessary.

In comparison to rugby league, advertisements for player welfare roles in football appear to have no clear expectations about the qualifications and responsibilities of a PWO. James

revealed that he was not aware of any qualifications that they needed to become a PWO within football. Instead, he drew heavily on his own personal qualifications and previous experience to help him in the role. James noted:

As far as I'm aware there's no qualification that you have to have to have a career in player care in football or whatever. I know there's a couple of player care courses that have been launched recently but you know I think that's just people trying to get ahead of the curve. I have a master's degree in positive psychology and coaching psychology as well as another master's being in an unrelated subject, and I did the what do you call it.... the talented athlete lifestyle support qualification with the English institutes no, UK sport that's the one, so I've done a couple of qualifications... that master's degree and those other qualifications that relate to the subject matter in the career path for me... I feel that I am confident at being able to respond to the needs of the young.

William thinks that there needs to be more clarity about the role and clubs need to consider who they place in these positions rather than being reliant on existing practitioners (such as psychologists) as a 'tick box' and expect them to fulfil both roles. For example, a Sport Psychologist that has an existing role within the club may be asked if they can take on the additional role of player care to ensure that athletes are receiving the appropriate support for audit requirements. William revealed:

I think something needs to be specified because I think there wants to be some sort of minimum level of education and experience... You're right about the job descriptions, they've kind of lifted stuff from the audit requirements but it becomes quite a long list. what it actually means in practice is the thing. Some of them emphasise administrative skills for instance, I'm thinking is that really what they want and might indicate that they actually want to go down the route where it's just a case of we've got to make sure we've got policies for this and policies for that... it maybe was actually just a case of making sure someone was in a post in order to get a tick when the auditors were in place.

Both James and William indicate that they lack clear understanding on what qualifications are required for their role as well as a set of clearly defined responsibilities for practitioners

across the sector. There is a danger here of practitioners experiencing feelings of confusion in relation to the actions required to fulfil their particular position (Eys, 2001; Kahn et al., 1964). Charlotte expressed similar sentiments when disclosing her concerns about the lack of qualifications for player care roles and the fact that the clubs may independently decide on the job requirements. This approach potentially leaves organisations vulnerable to appointing people who are not trained or prepared to deal with sensitive topics or cases.

Charlotte noted:

So, a lot of job descriptions are different, some of them I don't necessarily agree with, but this is just personal preference. I mean I do know that there was someone who came into a role that had previous experience as a scout and his full-time job was like a farmer or something. I was thinking I don't really know how that qualified you to do player care... It always depends on the job description but it is completely up to the club to decide what requirements are needed for player care. Actually, it's the only role currently that you technically don't need a qualification for. Whereas you physically cannot be a sports psych until you are accredited by BASES or something. So, it's just up to the club's discretion of what that looks like which is why you end up with a lot of people who probably shouldn't be in the role when you're dealing with things like mental health and very sensitive situations, who don't have the expertise or qualifications or experience of actually working in these kinds of conditions or dealing with these types of issues.

One concerning implication is that practitioners find themselves ill-equipped to meet their athlete's needs (Noddings, 1988, 2003, 2005; Tubre & Collins, 2000). This raises a number of ethical concerns and casts doubt on the notion that player welfare is genuinely valued by professional clubs.

In addition, the role often lacks a set of clearly defined responsibilities which is likely to make it increasingly difficult for practitioners to introduce a consistent standard of care. James outlined that every sporting environment is different and due to the lack of requirements each PWO's role is different depending on what care they choose to implement within their environment. James also expressed his worry towards the lack of definition of the role by explaining that it can be frustrating if a player welfare officer is not welcomed into a

club by others (Such as Coaches, Psychologists, medical staff etc) and expressed concern towards the variation in environments that PWO work within.

I think player care is not well defined and if you go from one club to the next, the person who is you know... whether it's head of player care, lead player care officer whatever title they will have got, I think you will find them working in very different ways. I think you will find the way that they are perceived and the work they are doing is very different. I think a lot of clubs don't understand what player care is and they have been told that they need to have someone who is player care, so they just stick someone in and see what happens. I think that's probably the approach that some clubs have to it, and I think my conversations with some people working in player care is that they're very frustrated and can't really find a place in the club.

Similarly, Charlotte agreed with James revealing that she found it difficult and frustrating when starting her role because there was no guidance about the actions and responsibilities required to fulfil the role, therefore felt that she was expected to develop the role herself. With no guidance, Charlotte seemed taken back by the criticisms that the Premier League presented within their audit. Receiving such criticism is likely to have a profound influence on what Kelchtermans (1993) referred to as a practitioners' 'professional self-understanding' (i.e., the knowledge and beliefs an individual uses to perform their job and how these sets of beliefs can develop and change over time depending on how an individual perceives their job situation). Professional self-understanding can be affected by self-image (how individuals see themselves and how others see them; Kelchtermans, 1993, 2005), self-esteem (evaluation of oneself as a worker e.g., how good am I at my job? Kelchtermans, 1993, 2005), job motivation (directional effort to select, stay in or leave a role; Gibson & Groom, 2018; Kelchtermans, 1993, 2005), task perception (the way in which an individual defines their job e.g., what actions are expected of me? Kelchtermans, 1993) and future prospects (one's expectations about their job in the future; Kelchtermans, 1993).

Even though Charlotte openly discussed how she was receptive to developmental opportunities, she revealed that she was uncertain on how she can develop without greater clarity regarding the expectations of the role.

I think from a whole, I don't think the Premier League or the EFL offer enough guidance or support. So, for example, when I came into the role in 2019, I literally walked in and someone said, 'yeah just create a player care department' and I was like 'alright okay, like is there any training on this' and they were like 'Oh no like here's nine literally nine subheadings which was induction, transitions, exit strategies, player and parent voice, Life skills programme, personal development and literally went okay create a programme. So, there's no guidance whatsoever, you have to be incredibly creative which is why if you go to each club, you'll find that player care looks a little bit different because we've never been guided on what it is and what it looks like. We have just recently had an audit by the Premier League, and you know I received some criticism in terms of you could do this, you could do that, this is actually what this is supposed to look like. Now that's fine, I've got no problem with trying to develop, but I found some of the criticism quite difficult when you've never given us any advice on how to do it... It's really difficult when you just basically you know you're sent out and you haven't even got any direction, you're just kind of clutching at straws.

The lack of definition outlined by James and Charlotte indicates that sports clubs are attempting to create formal roles but there still seems to be a lack of clarity and consistency on what player care roles entail (Eys & Carron, 2003). As mentioned by James, "I think a lot of clubs don't understand what player care is and they have been told that they need to have someone who is player care, so they just stick someone in and see what happens", the club may place any individual in the role and this may even be existing staff members such as a coach. This may happen as an informal role in which natural interactions between staff and athletes occur, creating rapport off the pitch (Eys & Carron, 2003). For example, a coach may have a natural conversation with an athlete about their exams. The perspective of an existing staff member having natural interactions with athletes may encourage clubs to place existing staff members in the role, even though they may not be as qualified to deal with such subject areas.

Overall, the findings of this sub-theme highlight that role ambiguity is present among PWO's with a football and rugby league environment. The findings also reveal that PWO roles lack definition and clarity in relation to the roles and responsibilities an individual would be expected to fulfil. It is clear that there is a lack of consistency across football and rugby

league in relation to the qualifications and experience an individual would be expected to have in order to be prepared for the role. This raises the question of how many sporting environments and their athletes are affected by this lack of consistency in definition and role ambiguity.

4.2.2 Sub-theme Two: Fighting indifference and overcoming the stigma of help seeking

Researchers are placing increased emphasis on the need for coaches to understand the importance of care and player welfare within sporting environments and this has led to calls for research that considers how various stakeholders (e.g., coaches) perceive the importance of a player care role within an elite environments (Armour, 2011; Cronin & Armour, 2018; Dohnsten et al., 2020; Lewis et al., 2022). As athletes spend a large amount of time with their coach, it is important that a coach values athlete wellbeing and encourages athletes to seek the support of PWO's. Athletes may not utilise the support around them if their coaches hold negative perceptions of care (Bennie & O'Connor, 2010, Lewis et al., 2018). Furthermore, social stigmas can also contribute to a lack of help-seeking, especially among smaller social communities such as football and rugby league teams. This may arise if athletes fear a lack of social acceptance unless they possess certain attributes seen as desirable in competitive settings (Abram et al., 2008; Bryne, 2000). For example, the desire to be seen as mentally tough may discourage athletes from help-seeking owing to a fear that they may be seen as 'weak' and not able to cope with the pressure of playing elite sport (Gulliver et al., 2012; Lewis et al., 2018). Help-seeking may also be affected by how athletes perceive the people around them who intend to care for them. Mark revealed that athletes may have negatively perceived his role because he had not previously been an elite athlete himself therefore may not be able to relate to their sporting concerns, 'I did feel that what the athletes saw of me when I started the role was 'this guy's not been an athlete himself''. Although James noted that 'It is improving and there is becoming more openness to seek help', the stigmas associated with being 'tough' still remain a clear barrier that may hinder the help-seeking of athletes (Gulliver et al., 2012; Lewis et al., 2018).

In addition, it is also important to consider the micro-political nature of coaching practice and how this can contribute towards the challenges that player welfare officers face when encouraging athletes to help-see. Coaching has been positioned as a political activity in which coaches operate in a manner that best serves their self-interests and with the goal of

‘looking better’ than the others around them (Potrac et al., 2012). Due to the precarious nature of roles within football (Roderick, 2006b), some coaches may prioritise their self-interests with a view to strengthening their position and improving their employability (Potrac et al., 2012). These vested interests might represent a barrier to the establishment of close working relationships between care officers and coaches. During discussions with Mark, it was revealed that he had encountered coaches who were indifferent about his role and who viewed his work as a distraction for the athletes.

There were people, in particular head coaches that saw me as maybe a little bit of a distraction, that would see me as maybe a go to person for players looking for a way out if that makes sense and maybe see me as someone who was again a little bit of a distraction towards what they were trying to achieve.

One potential consequence of coaches’ ambivalence towards player care is that they are unlikely to encourage athletes to engage in help-seeking. Robert revealed that some coaches don’t appreciate the significance of help-seeking even though the players utilise the support, “the coaches don’t understand the importance of our role in the club even though our feedback from players explains it all you know”. If there is a lack of understanding of the role, it is less likely that the players will be encouraged to help-seek. In addition, take, Thomas’ experience with a coach who had concerns that accessing educational opportunities might serve as a distraction to his players:

I remember one of the conversations with the head coach was this is a list of courses that our current players are doing, we’ve got these two players doing work experience every second Wednesday with one of our sponsors. One of the comments was so long as it doesn’t interfere in the rugby. So, I explained that these courses are balanced and they need to work around the players employment to help them upskill. Then they talk about you know how they need to make sure they rest at night and all that. My response to this particular head coach was I would rather the players be at college than sat on the Xbox all night or drinking and gambling. His comment back was fair play. That’s not our current head coach and I think there’s been some significant changes in the coaches approaches to it all in the club.

Here, Thomas reveals how a coach's social-professional interests can undermine the role of a Player Welfare officer owing to a lack of trust and understanding of what care involves and why it might be important (Gibson & Groom, 2018). Similar to Mark, it may be that the coach has a negative perception of Thomas as he may also be seen as a distraction from rugby. For example, the coach may think the more time athletes devote to their education the less they are focusing on the rugby. In addition, perceptions may be affected by the dominant views, beliefs and ideologies that exist within certain sporting sub-cultures. These are known as cultural-ideological interests (Gibson & Groom, 2018) and in rugby, for example, include the notion that athletes should be mentally and physically "tough" (Markula & Pringle, 2007). Even as society becomes better informed about mental health, help-seeking behaviours may not be encouraged in such settings. In particular, rugby is known as a physical sport characterised by aggression and toughness, embodying stereotypical masculine identities (Lewis et al., 2018). The expectation to adopt these characteristics as a rugby player might lower help-seeking behaviours, leaving players more likely to develop common mental health disorders (Lewis et al., 2018). Unfortunately, Robert revealed that the role was not valued by some coaches within a rugby league environment:

So, you asked me about perceptions and I'm lucky that my coaches are open and honest about welfare. Other welfare officers aren't so lucky you know. Like this demonstrates it well, so at a club we may be asked to explain our role to staff and all that kind of stuff. If other coaches and practitioners don't want to listen about mental health and wellbeing, that can be difficult because they don't engage in it you know and don't listen to what you're telling them. Sometimes other club members... you know the coaches don't understand the importance of our role in the club.

The above extract hints at the likelihood that some coaches do not understand the importance of a Player Welfare role within a sporting environment or do not prioritise the mental health and wellbeing of their athletes. These findings suggest that cultural-ideological interests still exist among coaches within rugby league environments, and these interests serve as a barrier to help-seeking (Gibson & Groom, 2018).

In addition, Robert also revealed that he asks the physiotherapists about athlete wellbeing because athletes might be more likely to disclose some of their problems or concerns to these practitioners given the amount of time they spend with them.

Robert noted:

I also say to physios and all that kind of thing... so if I see someone that doesn't look right, I will ask them because they're in constant contact with them and all that. So, it's not like can I book you in for a session because unless it's really needed, they wouldn't come you know. I don't think they want other people seeing them seeing me because if they've got a mental health issue, they might think people put two and two together. It's really about getting mental health on the agenda because it's seen as soft.

The reluctance of some athletes to engage in help-seeking requires care officers to build collaborative networks with colleagues who may help them fulfil their job Role (Thompson, Potrac & Jones, 2015). Robert recognises that he works with individuals that spend a wide range of time with athletes, such as Physiotherapists, and therefore uses their knowledge to identify athletes that may need support. The prospect of working with other practitioners may create a 'web of care' around athletes with the intentions of building a collaborative approach towards creating a 'climate of care' (Cronin, 2019; Lewis et al., 2022). The strategy of creating a 'web of care' will be further analysed within theme three to gain an understanding of how PWO's seek to build relationships that will assist them in their role.

Due to the competitive nature of elite sport, athlete wellbeing can be affected by difficult decisions such as retain and release. Mark revealed that he tries to disassociate player care from difficult decisions such as deselection, by retaining a certain distance from the pitch (Larkin et al., 2017). This highlights the challenge of trying to gain acceptance from athletes whilst simultaneously ensuring that players are aware that the welfare officer is not involved in making decisions about the players future.

Mark noted:

So, it can be a challenge at times in terms of how you position yourselves to supports in that area but that's where I think player care is really important to sit separate too ... so you know it's about where you position yourselves but I sit quite clearly away from the pitch so I can watch a match once in a while, but I don't venture onto the pitch in any sense and don't want them to... don't want to be associated with anything

around decisions on retain and release, on contracts, on selection and I'm not. So that's something that's really important.

As noted by Mark, limiting interactions with coaches, and keeping their distance from pitch side, may encourage athletes to disassociate performance related decisions from player care. However, creating this distance may not be possible within every club environment given that some PWO's may be expected to be present during the retain and release process. When discussing this matter, Charlotte revealed: "I think the hardest thing has been the retain and release process, it's not a nice process... It's heart-breaking to them that they're not going to carry on their journey with the academy". One concern here is that their presence during the release process might amplify negative perceptions of the role.

Lastly, within a sporting environment there are practitioners that may perceive player care and sport psychology as serving similar functions. The Sport Psychologist is thought to have more performance-oriented role rather than a pastoral or caring role (i.e., one that's focused on athlete wellbeing; McCormack, 2015). If a psychologist becomes increasingly focused on athlete wellbeing and working alongside a PWO, it is important that the psychologist is also perceived in a positive light to avoid the negative perceptions of both roles. Evidence suggests that athletes can have negative perceptions of Sport Psychologists because they do not fully understand what their role involves, and there is a danger that player care might be similarly mischaracterised (Bell, 2020; Trottier, 2018; Martin, 2005). For example, some coaches may perceive player care and psychology as the same role, sending athletes to either of the practitioners to get support. However, if an athlete is experiencing performance anxiety, they may speak to a sport psychologist and if they are worried about education, they may speak to a Player Welfare officer who specialises in that area. Charlotte noted that the psychologist at the club focuses on upskilling coaches so that they can initially try and solve problems before referring to player care. Charlotte also noted that it has taken time to change the perceptions of both Player Welfare officers and Psychologists being the roles that 'fix' athletes but rather specialise in different areas of wellbeing. By utilising a 'web of care', it is possible to take a collaborative approach to care and upskill others (Cronin, 2019). For example, as noted above, a psychologist may upskill the coaches on how to appropriately respond to an athlete who reacts negatively to feedback. Although an athlete may be angry, they may not necessarily need referring to player care. The athlete may need a moment to recollect and reflect on their feelings.

Our psychologist is actually less player facing she works with coaches... We have kind of up skilled coaches so that if small problems do come, instead of the coach just going 'go and see player welfare or the sports psych' they can actually deal with those. That wasn't the case when I first came in, that's been a gradual progression how we've got there, bringing the right people in the environment, upskilling coaches, upskilling staff to be able to have those initial conversations with players. We're coming away from 'if you go and see player care or psych there's something wrong with you.

Of course, not all sport psychologists will work with coaches to upskill them on welfare and wellbeing. These findings indicate that a Sport psychologist and Player Welfare officer should be clear on their job roles to athletes so they know who to approach for support. If the sporting environment intends to merge the roles together perceiving them as general support, this should be made clear to athletes and staff so they know who to refer or signpost onto. If they intend to remain separate, this should be communicated to athletes so that they can distinguish who to approach depending on the concern. However, this may remain a frustrating challenge for PWO's if coaches and other practitioners are reluctant to accept the difference between the roles and choose to merge them together regardless of the distinguished differences. Some Player Welfare officers may perceive the merging of roles negatively, affecting their identity. As they have developed self-interest in the subject areas that relates to their primary role, the merging of these can make an individual question their self-competencies to fulfil that role lowering their self-esteem, organisational interest and negatively affecting their professional self-understanding (Gibson & Groom, 2018; Kelchtermans, 1993, 2005).

Overall, this sub-theme has highlighted how the perceptions of PWO's can affect the standard in which they can fulfil their main responsibilities. It is clear that perceptions of player care can vary depending on environment and the acceptance of mental health support differs among coaches. The aspect that still remains unclear is how PWO's overcome negative perceptions to increase help-seeking among athletes.

4.2.3 Sub-theme Three: Work life balance and establishing boundaries

It quickly became evident within the findings that the job roles did not come with a set of clearly delineated responsibilities and that welfare officers were required to work on a flexibly. James revealed that he does not have a specific routine as he is required to be available first thing in the morning and last thing at night in case he is contacted for support:

So, there's no real routine if you like, I think you know the phone can ring first thing in the morning and last thing at night. Even in the middle of the night, so you have to be very flexible in that sense in terms of responding to needs and the programmes that we run. It's very difficult sometimes to put my work phone away because there might be someone who you know... in my experience, it hasn't been a regular occurrence, but it could be that night that someone calls me because they're experiencing suicidal thoughts you know. So, it is a challenge about where your boundaries are, where your professional boundaries lie you know. I have a young family and its anti-social hours as well so it can involve weekends and can involve evenings.

A player welfare officer may feel as though they should go 'above and beyond' to support athletes and prove to other practitioners (such as managers and coaches) that their role has value and meaning (Gibson & Groom, 2018; Jones & Wallace, 2005). The need to work long hours is accompanied by highly demanding work situations. For example, player welfare officers know that an athlete may be in distress and reach out during unsociable hours, therefore detaching themselves from work proves difficult for PWO's. Difficulties detaching from work are prevalent in a number of other professions including nursing and teaching in which 41.5% of teachers reveal that they find it difficult to detach from work due to the emotional demands and deadlines (Varol et al., 2021). Usually, most employees would be expected to not think about work during their evenings or "switch off" to get a mental break and be refreshed for the next day. However, the distinction between work-life and home-life can be blurred for PWO's (Bowen et al, 2018) as James revealed how working unsociable hours as well as dealing with sensitive subjects can make spending time with his family and 'switching off' from work a challenge (Sonnetag & Niessen, 2020).

Additionally, Robert admitted that he found it hard to detach from his phone in case he received a crisis call: "It is difficult with the phone because you're always looking on it. With

me specially working in mental health, I kind of like overreact a little bit because it would probably be a GP or something that would tell me I'm working with someone who's suicidal''. Etzion et al. (1998) suggested that detachment from work is the individuals sense of being away from the working situation, but if the individual can be contacted by phone at any hour, it is questionable whether they are ever truly 'off' work. The expectation to respond immediately may hinder wellbeing if the individual cannot psychologically detach from working situations and disconnect from the workplace (Derks et al., 2014; Sonnentag & Fritz, 2007; Sonnentag et al., 2008). Mark shared similar concerns and admitted that he had to think about setting professional boundaries. Professional boundaries are a set of guidelines, expectations and rules that set the ethical standards in a caring environment. Boundaries set limits for safe, acceptable, and effective behaviour by individuals (Cooper, 2012). This might include, for example, understanding the limits of your knowledge and being honest with an individual about signposting. Boundary setting is important because it helps create a stable and open relationship with individuals due to them knowing what support is offered and what is beyond an individual's competencies (Cooper, 2012).

Mark noted:

As much as I did have a couple of crisis calls and I felt that was part of my role, I did also have professional boundaries, I had to set them fairly quickly. So, I guess to give you an example of that, when I first started the role there was a couple of athletes who would contact me I guess as late as 8:30 to 10:00 PM about certain things that weren't immediate and that certainly weren't an emergency. What I did is... I declined in actually replying to those at that time and that was how I set personal boundaries. What I'd do the next day is make sure that they were the first on the list to reply to and have a conversation with them. I would be clear if I had a conversation with someone that I'm not working at that time from that perspective. For my own wellbeing, I learnt pretty quickly I had to take care of myself first and foremost. Priority was always me because if I didn't take care of myself there'd be no way I'll be able to get take care of anybody else.

The latter part of this quote highlights Mark's acknowledgment that his own wellbeing is as important as the people he is caring for and his understanding that professional boundaries were required to make a clear distinction between work-life and home-life (Bowen et al., 2018). Stress levels may be increased and wellbeing may be negatively affected in the long-

term if practitioners are unable to make the latter distinction (Sonnentag et al., 2008). Furthermore, it is not unusual to hear of boundary setting strategies being implemented within caring professions that involve long working hours, one example being within the emergency services, and social care professions (Turnbull & Wass, 2015). Health and social care workers use boundary setting strategies to build safe, open, and honest relationships with clients as well as help clients understand what care is available to them (Cooper, 2012). Boundary setting strategies help to underpin the ethical practices of social care workers as they make their clients feel safe and in control of their care (Cooper, 2012). This means that clients are less likely to overstep and demand care which is beyond a workers competencies. From this example, it is important to acknowledge that a variety of caring roles (such as player welfare officers) should utilise boundary setting strategies to enhance relationship building as well as create the opportunity to detach from work.

In Thomas's case, his phone had become a significant burden as it made him readily accessible: "There was a point when I was getting really wound up with my phone because it was just constantly beeping and constantly being alerted". When away from the training ground, the athletes can quickly gain contact by phone if there is an emergency and Player Welfare officers may feel compelled to respond quickly. These responses can be during workhours, evenings, weekends or even holidays (Derks et al., 2014). Here, we see technology acting as an "electronic leash" that decreases our ability to detach from work-related situations, especially since Player Welfare officers feel obliged to keep their phones close by (Boswell & Olson-Buchanan, 2007; Olson-Buchanan & Boswell, 2004; Mellner, 2016). In addition, Mark also noted that he attempts to make himself available 24/7 and can be contacted at any time, "So, they all have my personal number. My policy was 24/7 it was always on and anybody that needed me could ring me, could text me, could drop me an email if they needed".

The sense of job insecurity within elite sport might compel these practitioners to work longer hours to justify and prove the importance of their work (Gilmore et al., 2018; Jokinen, 2016). The work-life imbalance might result in practitioners postponing landmarks such as parenthood or reducing family-time because work is intruding on private life (Gilmore et al., 2018). In order to achieve a better work-life balance, strategies and boundaries may need to be implemented. For example, to encourage detachment from work, Thomas revealed that he set limits to when he would respond to concerns, only checking his messages when he felt it

was most appropriate and leaving his phone at home when going out, for example. This approach helps practitioners prioritise their own wellbeing as well as others and ensures work doesn't intrude on their private lives (Gilmore et al., 2018). While availability and flexibility will still remain a challenge for player care, the findings help us understand the demands placed on PWO's and the difficulties they face in prioritising their own self-care – a topic I return to in the next theme.

Due to a lack of funding, many clubs only employ one PWO to support a large number of athletes. The shortage of funding leads to under-resourcing, leaving staff with a demanding workload (Agnew & Pill, 2021) and compromising their ability to ensure all athletes receive a high standard of care. Charlotte revealed that in order to interact with all of the teams within the grounds, she would have to work a thirteen-hour day. Charlotte also stated that she accepts that she does not have the time to give equal support and she finds this frustrating.

Most of the time that I speak to the lads, it isn't necessarily about issues or any problems, it's just having you know getting to know them. The younger ones... yeah definitely very difficult. Foundation Phase I would say I'm really good with that, I probably know 80-90% of them. Youth Development Phase I'd probably say 50% because they train later. So, if I'm in really early in the morning with Professional Development Phase, it's really hard for me to want to stay until half ten at night you know doing a 13-hour day it's just not realistic most days. Also, they're in that age group where it's not cool to speak to staff so I kind of take that on board as well. Yeah, I would say from a personal perspective it's quite it's very hard to know all the players. I think we've got 150 something players in all and maybe even more, like I said there's only me you know there is genuinely only so much you can do.

Similarly, Robert revealed that he is only required to be in the club three days a week and this does not give him enough time to effectively complete his job. Operating under such time constraints means that Robert is unable to offer meaningful support to the women's team and the juniors team, which leaves him with little choice but to source help from other staff.

I can't actually do it effectively over three days at the club and that kind of thing. I don't go to like the juniors but what we're looking at now is... like I do ask people working with those teams for feedback and the boy who I ask for the juniors has

recently set up an office for the team to go and talk to him. If he feels out of his depth he will come and talk to me or speak to psychologists or somebody else but that's just being established now. The women's team is a bit up and down and they seem to like just to shove them in without having any structure there first and the RFL wasn't supporting them because of funding issues. They've just employed a manager now to manage the women's team and what I'm going to do eventually is link them, but I can't be at all of them. I'll try and get the manager to disseminate information coming from Rugby League Cares and I'll try to provide like supervision and any help they need. That's probably as good as it can get. Not to try to... but you can't be everywhere you know.

Due to the time restrictions placed on the PWO's and the challenge of often working alone, there becomes a point where they have to accept that they cannot fulfil all of their responsibilities. Charlotte noted that she often experiences feelings of guilt because she cannot always be available to help every player but understood that there becomes a point where personal wellbeing needs to be prioritised.

Sometimes you do feel guilty, you think the lads are missing out on something because of that or if I don't travel to the away day today you know, do they feel like I'm not there to support them. You just have to let go of those things which can be hard, but you just have to think 'listen you can't pour from an empty cup, if I don't keep up with my self-care practices, obviously I'm going to be absolutely no good to them'.

The workload demands facing these practitioners have obvious implications for their wellbeing (Sonnetag et al., 2008) and their ability to provide high levels of care for all of the athletes under their charge. Gul et al. (2021) highlights that workload and a lack of time management skills (such as planning the day) can contribute to ill-health, therefore the prioritising time for self-care around workload should be encouraged. Along with workload challenges, under-resourcing within elite environments (Agnew & Pill, 2021) means that player welfare officers find it increasingly difficult to find the time to make themselves known to all athletes (Cosh et al., 2021; Jennings et al, 2015). The need to be visible and to build a rapport is central to 'getting to know' athletes away from the performance setting. These approaches are also important if player care is to allow athletes to flourish as human

beings both inside and outside of sporting environments (Kjær et al., 2022). For example, an athlete may experience a bereavement and may not be emotionally ready to play. The athlete should feel comfortable enough to engage in wellbeing support that is offered by the club and be made aware of the care web that surrounds them if they need access to further support (Bloom, 1996; Cronin, 2019). Building trust can enhance the two-way communication between an athlete and a PWO, further encouraging athletes to speak openly about the day-to-day concerns that may affect their performance (Bennie & O'Connor, 2012). Forging close relationships increases the likelihood that athletes feel that their basic needs are being met (basic needs being accepted a human being not just be seen as an athlete) (Noddings, 1988, 2003, 2005). Rapport allows care officers to understand the athlete's basic needs and how they might act to support these needs (David, 2005; Lindgren & Barker-Rutchi, 2017; Miller & Kerr, 2002; Preston, 2011).

Unfortunately, due to the lack of player care roles, there is not enough time for PWO's to establish a strong rapport with every athlete and this has potential negative consequences for the quality of care received by athletes. An increase in player care roles would go some way to managing the workload pressures that are place on PWO's within elite football and rugby league environments. Until this is addressed, the challenge of time, rapport building and consistency of care will continue to remain a barrier for PWO's.

4.3 Theme Three: The Micro-politics of Care

As outlined in the preceding theme, there are various challenges that hinder Player Welfare officers (PWO) attempts to provide wellbeing and educational support. The third theme considers some of the micro-political strategies used by PWO's to deal with these challenges to enhance or sustain their own position as well as the structures they put in place to encourage athletes to avail of care. These strategies include increasing 'visibility', 'building rapport' and the establishment of a 'network of care' which helps them share caring responsibilities across their organisation (e.g., support from other practitioners).

4.3.1 Sub-theme One: Increasing visibility and gaining buy-in

As revealed in the previous theme, player care can often be negatively perceived by other practitioners (such as the coach). This sub-theme outlines how participants implemented a

micro-political strategy of increasing their visibility within the club in an attempt to strengthen their position and to be able to enact care. Increasing visibility involves making oneself 'seen' more frequently or in a wider range of contexts (e.g., on the training ground, in the canteen). One particularly predominant example of this practice was revealed by James when he explained how he made sure that he got out of the office and circulated amongst the players: "When I'm at the training ground I spend a little bit of time in my office and the rest of the time walking the building".

Similarly, Robert revealed that he increased his visibility by being present during training sessions and standing on the touchline as a way of showing athletes that he was there for them should they require support.

Robert noted:

So, it's taken a while to get to know them but what I do is I go out to the touchline when they're out there training because it consists of going into rooms looking at last game and all that, I don't get involved in that. What I do is I go out and stand on the touchline and often people and players will come to me and say to me 'can I have a word after?' and they tell me what the problem is and all that sort of stuff.

Research by Abram et al. (2008) and Gulliver et al. (2012) highlights that athletes may fail to seek help due to their lack of knowledge on mental health and wellbeing as well as not knowing who or where to access support. James and Robert's behaviour indicates that increasing visibility is crucial if athletes are to understand who they can approach for help. This strategy shows evidence of the pursuit of professional self-interests as practitioners try and increase the recognition of their role within the club (Kelchtermans, 2005). These actions might be understood in terms of a 'politics of identity' (Kelchtermans & Ballet, 2002, p. 776) whereby developing a socially recognised identity as an important element of multi-disciplinary team is a valued working condition for care officers. Making themselves 'known' by traversing the building and by becoming an increasingly familiar presence during training may increase the likelihood that athletes understand who is available to offer help.

Furthermore, Thomas outlined that being more visible to the athletes enables an opportunity to interact and show athletes that they are cared for. Thomas, James, and Robert all adjust their approaches to have greater involvement in football with the aim of gaining a greater

understanding of athlete needs on the pitch. As highlighted by Thomas, being around the athletes gives opportunities to ‘get to know’ the athletes as people and develop a rapport, therefore opening-up the opportunity to seek-help in a natural environment.

Thomas noted:

I think that just comes through your visibility around the place, through the conversations that you have. I think players... like 10 years ago when I first started, they would be very wary of coming to you. So, one of my first mistakes was having this idea that the doors are always open to come and see me, I’m always here and it doesn’t get shut. The office door was never shut on a training day and whatever it was they could just come and see me. Nobody came through the door. So, instead I changed it round and I have to be there to them. So, I have to be in and around gym sessions, I have to be in and around the injured players group or if it’s not myself it’s our wellbeing officer, just being around players lunchtime and not to go and specifically have meetings with them but just to be there. That gives the opportunity to... then that kind of targets conversations from when you see things going on.

In addition, Mark ensures that he is physically present but also accessible via his phone: “Nine times out of ten it would be at any point through the day someone would come and have a conversation so I make sure I keep myself available. I’d always be around, I’d be visible around the environment, my phone would never be off either”. A degree of motivational displacement is evident here whereby Mark often prioritises athlete wellbeing over his own needs (Cronin et al., 2019; Gano-Overway, 2021). Mark’s strategy of being available and ensuring that he is always visible to athletes may also increase the awareness of where to access support, encouraging athletes to normalise the culture of help-seeking (Abram et al., 2008; Gulliver et al., 2012; Lewis et al., 2018).

With this in mind, Charlotte outlines that she attends every multi-disciplinary meeting involving discussions between all practitioners about athlete development. Increasing their presence within these meetings, helps the PWO’s to normalise athlete help-seeking among coaches and other practitioners and this might help destigmatise care within elite environments (Delenardo et al., 2014; Fisher et al., 2017; Lewis et al., 2018). It also may

serve to offer a web of care whereby practitioners share information and ensure that multidisciplinary teams work together to provide athlete support.

Charlotte noted:

I sit in every multidisciplinary meeting, so I sit in the foundation phase, I sit in the youth development phase, and I sit in the professional development phase, that's weekly. So, everyone in that meeting who's there and involved in that phase... you've got coaches, physios, medical staff, strength and conditioning, nutritionists, psychologists, they all sit in that meeting. So, if anyone needs to report anything they'll report it to me in that meeting, then I will either approach the player or liaise with the coach to say do you want to send so and so to me.

This sub-theme has shown how PWO's make a conscious and deliberate effort to increase the extent to which they are seen by athletes and other stakeholders and the important role this plays in gaining an acceptance not only of their role, but of care also. These practitioners might be said to 'work in a fishbowl' where they are surrounded by individuals who evaluate and judge their practices (Blasé, 1991). Practitioners in this setting are acutely aware of the extent to which they are judged. In response, they develop a series of strategies to strengthen their position and increase the likelihood that they are accepted by staff and players. Such strategies are also evident within the research of Thompson et al. (2015) and Gibson and Groom (2019) whose work found that a variety of practitioner such as coaches, use micropolitical strategies to improve their working conditions and further their own professional self-interests. Within these research papers, it was found that relationships among practitioner within a football environment can be precarious, therefore micropolitical strategies (such as visibility) are implemented to gain the 'buy-in' of others around them.

4.3.2 Sub-theme Two: Rapport building and 'getting to know' athletes as 'human beings'

Previous themes have discussed the challenges PWO's face in increasing help-seeking behaviours or in encouraging athletes to accept care. A number of participants placed considerable emphasis on the role 'rapport building' plays in addressing the latter challenge. Establishing rapport is thought to be central to the formation of close and trusting

relationships where care can be given and received. For example, Jones (2015) work reveals how caring actions can build rapport and enhance two-way communication in coach-athlete relationships. Bennie & O'Connor (2012) argued that enhanced two-way communication may encourage athletes to feel increasingly comfortable utilising support such as open-door policies. This may be because athletes have the freedom to access the support at their leisure and thus may not feel pressurised or obliged to avail of care. Charlotte revealed the importance of giving athletes a variety of help-seeking options and outlined that she attempts to make the athletes feel comfortable within the environment by adapting her approaches.

Charlotte noted:

So, it can be that a player comes and kind of schedules an appointment with me or we will do it as a case by case and say okay we know that some players you know really don't like one to ones, it's literally their worst nightmare. They feel like something's wrong with them and like they don't like having just a one-to-one conversation. No problem, do they feel better to have that chat in their environment when they're out on the pitch? Do we just pull them off the side and have that conversation very informally? Do we have that conversation if a player you know wants to have the coach present because that's the person that they trust? Again, happens with younger kids, they know their coach, they see them all the time. Do they want a parent present? No problem. Do we think in situations actually that we don't want anyone present because I'll get the most out of the player? Yeah. So, it kind of completely depends but we do offer both those options.

Similarly, William also revealed that he attempts to meet athlete needs through a variety of approaches. In particular, William revealed that he tries to create a natural environment by giving information to a whole group instead of focusing on individuals and separating them from their teammates. William insinuates that this approach can enhance rapport building and encourage athletes to feel less embarrassed about help-seeking as well as keep interactions with athlete's positive overall.

William noted:

If an individual in the squad had a particular need, I would do it as a group thing in order to avoid... I'd be thinking well I know this player has got particular needs but I'd attach it in a group way and direct it towards meeting his needs... So, my

engagement with players tends to be positive on the whole, that's not to say I wouldn't tell them if they were being sloppy or whatever but I might appeal to their better nature.

In addition, by allowing athletes access to ethical and natural care, they are increasingly likely to flourish as athletes and as human beings (Kjær et al., 2022). Both Charlotte and William engage in ethical care, which involves a conscious choice to offer care by showing athletes that they value their wellbeing and want them to flourish by receiving the appropriate support. It might be argued that the aim here is for ethical care to eventually restore or give way to natural care (e.g., where a carer might act spontaneously out of affection; see Noddings, 2002). Importantly, Charlotte and William honour the athlete's privacy by attempting to keep their concerns anonymous until the athlete approaches for help. William achieves this by addressing a group rather than an individual so that others cannot identify who raised a concern. By implementing this strategy, athletes may have increased confidence in confiding in PWO's because they see how these practitioners are keen to offer care whilst understanding that certain players may not be ready to avail of care (Delenardo et al., 2014).

Furthermore, building rapport may be achieved by having conversations with athletes about their day-to-day life outside of sport. Conversations with players about family, interests, and passions, shows an element of engrossment through seeking to understand athletes interests outside of the sporting environment (Nodding, 1988, 2003, 2005). Take, for example, how Robert treats his athletes as human beings, with interests and experiences that extend beyond their sport:

Robert noted:

So, what I do is I treat them as human's beings and ask how it's going and chat about their families. Just show an interest in them and getting them to talk to me because some of them are really shy. I think some of them are more emotionally behind than others because they've not had that much responsibility in life you know. As a professional rugby player, what's been taken away from them. So, it's about like making friends with them really and having a laugh with them but you know you've got to be careful with that as well. You want them to feel they can come to you, you know.

Engaging in this form of dialogue is a key component of how care officers might show concern for their athlete's wellbeing (see Annerstedt & Lindgren, 2014 for similar example). Similarly, James highlighted that he sits and eats lunch with the athletes making conversation about their interests outside of sport. In particular, James outlined that building a rapport can build a culture of openness among the practitioners and athletes.

James noted:

We spent about half an hour while they were eating just having conversation, there was nothing relating to their feelings, how they're doing, we did have a topical discussion about sexuality actually, but it was about just spending time having a good conversation... Building culture, building a culture of openness so that people feel comfortable to again respond and share how their feeling and then actually responding and actually putting the right support in place for individuals.

Engaging in these conversations shows athletes that their physical and emotional wellbeing is a valued part of their development (Gibson & Groom, 2018). Additionally, Mark also agreed with James and Charlotte, outlining that general day-to-day conversations can enhance rapport building and encourage athletes to help-seeking due to feeling increasingly comfortable within their surrounded care network (Bloom, 1996; Cronin, 2019). Part of this process involved conversations about family and connecting on a humanistic level to show athletes that their needs outside of sport are valued.

Mark noted:

Just to have 5 minutes to speak to them about how they are doing, how their lives are at nursery, what kind of things they have been doing outside of sport with them, how they are getting on, and by having that conversation you find that in future if they needed anything at all you have that rapport with them on a humanistic level where they'd just offer you it and feel comfortable enough to feel like they that trust in you to share anything.

These rapport building strategies lead to the development of close relationships and help care officers to create desired working conditions (Kelchtermans, 1993, 2005).

Whilst player welfare roles are becoming increasingly prevalent across sport, many clubs can only afford to employ one PWO who might be charged with the management of multiple teams, limiting their ability to meet the needs of all the athletes (Lewis et al., 2018). James accepts that he cannot always do his job to the desired standard. To deal with the challenge, he has encouraged the upskilling of other staff to try and distribute the responsibilities of player care.

James:

At the Academy, there's probably about taken from you know the under nines through to the under twenty threes, we're probably talking a hundred and fifty to a hundred and sixty members. I can't have a relationship with all of those members, we have around sixty members of staff so it's about I think around half or trying to increase that number half of our staff are mental health first aiders that trained in mental health first aid. So is very much the approach that it's not the responsibility of player care to do all of the player care.

Charlotte revealed that it can be difficult to build a rapport with every athlete because some are introverts and avoid making conversation:

Charlotte:

The eighteen to twenty-threes, I know every single person in that and have a really good relationship because they're in all the time. I wouldn't be a very good player care officer if I didn't know them all. I mean again, I said you know before four or five of those are very quiet invert and don't really have one on one conversations but I would still be able to have quite a natural conversation with them.

Charlotte acknowledges the challenges associated with trying to engage some athletes in conversations about their day-to-day life. As such, she accepts that each athlete may need to communicate in a different way and that she might need to provide a variety of help-seeking opportunities to cater for different athletes. In doing so, Charlotte prioritises the athlete's interests with the intention of encouraging all athletes to have equal access to support.

Similarly, Robert revealed that he cannot build a rapport with every athlete as some athletes are not open to receiving support from a Player Welfare officer:

There's some that don't come to me and won't no matter what you do because you can't get on with everybody even though you try. What would I do is if I say I'm going to do something I make sure I do it and say I will look at this or look at that.

The challenge of building rapport with athletes may be affected by various factors such as visibility, social-professional interests and cultural-ideological interests (Gibson & Groom, 2018; Kelchtermans and Ballet, 2002). In addition, some athletes may avoid accessing support given the stigma associated with help-seeking, such as being seen as 'weak' for accessing support, they may avoid contact with the PWO limiting the opportunity to build a rapport (Gulliver et al., 2012; Markula & Pringle, 2007). Thomas provided an example of an athlete avoiding engagement in educational support and highlighted the frustration he felt during this experience. This example provides an insight into the challenge of building a balanced rapport with athletes especially when the foundation of the relationship may be built on frustration.

Thomas noted:

I suppose in the early years it did frustrate me. In the early years, it frustrated me because you know that there will be problems later on and you know it'll be harder for them. If they start from 24 and 25, you've effectively got ten years really to steadily build some momentum and build some experiences, build a CV, work to develop skills. So, you know that if they don't do it, they only want to come at 33 you know and it will be harder for them. So, I did get frustrated initially but I suppose the longer you're in it, the longer you realised it's all up to them. Plus, if they were to do something when they're not ready and they are not ready to allocate the necessary time, they just won't complete it anyway or they just won't go through the process. They will just give you the answers that they think you want to hear. I've got a... he's just now moved into the 28 plus bracket and for three or four years I've been nudging him to have a chat but he's always got something. I can't do anything now because I've got a baby on the way, I can't do it now because we're moving to a new house, I can't do it now because we've got a World Cup at the end of the year, there's always something. He's now kicking into that 28 plus bracket. Ultimately, they've got to want to do it, so I don't get so frustrated anymore.

The release process also presents another challenge in terms of establishing rapport and in ensuring that athletes have trust that PWO's have no involvement in the decisions about an athlete's future. For example, Charlotte revealed that she is responsible for liaising with athletes and parents after the release process. This may not be the case in every club, but for the Player Welfare officers that are expected to take this on board, it may be increasingly difficult for athletes to separate Player Welfare officers from performance related decisions making rapport building a challenge. Charlotte noted:

I think the hardest thing has been the release process, it's not a nice process and obviously we release players all the way from nine to twenty-three... The younger ones are much more difficult because obviously they're emotionally not quite as developed at those ages, so it's heart breaking to them that they're not going to continue their journey with the Academy. It's quite often the conversations with parents that are the most difficult because I only call to check on the child and their well-being. I often get a lot of I want to say abuse.... 99% of it is not abuse but a very strongly worded conversation that essentially kind of blames me but actually it's nothing to do with me. I didn't make the decision and those conversations are really difficult, I kind of dread May a little bit every year.

By Charlotte liaising with parents and athletes about the retain and release process, mistrust will contribute to the challenge of building rapport and athletes may assume that Charlotte makes performance related decisions with the coaches. Similar to sub-theme one, Charlotte may feel as though she is "working in a fishbowl" where she is tainted by association and judged for the difficult decisions that others make (Blasé, 1991).

Overall, it is clear that PWO's attempts to build rapport is a challenging process affected by visibility and the association of the role with negative decisions. In addition, it is also clear that PWO's acknowledge the challenges they are faced with and attempt to implement a variety of strategies to overcome them and to create desired working conditions. Creating a 'network of care' is one such strategy and the next section considers the work undertaken to build this climate.

4.3.3 Sub-theme Three: Spreading the ‘responsibility’ for care

As elucidated in the previous sub-theme, athletes have interactions with a wide range of practitioners (Gano-Overway, 2021). With this in mind, it is suggested that practitioners (medical staff etc) and coaches should work together to form a care web that can be accessed by athletes (Cronin, 2019). Building a “climate of care” may encourage athletes to seek help from an individual they feel most comfortable confiding in (Lewis et al., 2022). The importance of forming a care network within elite football and rugby league environments was expressed by James, Mark and Thomas. James noted that coaching staff and physiotherapists are a valued aspect of the support network because athletes often confide in them.

James noted:

Coaches are a lot. A lot get shared with physios because obviously injured players, they obviously experience a lot of well-being challenges because their identity is being taken away from them for that period in terms of the sporting identity. So, the physios pick up a lot, so we build a very close relationship with the medical department. We work closely together on how to respond to needs here.

Similarly, Mark revealed that his closest allies were the medical staff, “My closest allies within the club were always the medical staff in particular and the physiotherapists. I didn’t care which member of staff a player would confide in; I was never precious in that”. Mark’s sentiments here suggest that he is not concerned if players bypass him to confide in other practitioners. Instead, his goal is to create a “climate of care” which ensures that athletes are surrounded by a variety of practitioners who prioritise athlete wellbeing and who are well placed to support athletes (Lewis et al., 2022).

In addition, Thomas also revealed, “I have physios coming and saying can you have a word with such and such a body, I think he’s struggling a bit or he doesn’t seem like himself. I’ve had assistant coaches saying somebody else doesn’t look right or seem themselves today. I think the role is widely accepted now”. By Mark and Thomas adopting a collaborative approach to player care and creating a ‘web of care’, the culture of openness and the acceptance of mental health support among practitioners and athletes may be enhanced (Cronin, 2019; Lewis et al., 2022). A culture of openness may help to destigmatise sports

such as rugby and encourage the normalisation of athlete help-seeking by challenging stereotypical masculine identities such as being “tough” or resilient in the face of adversity (Gulliver et al., 2012; Lewis et al., 2018; Markula & Pringle, 2007). Creating a culture of openness may increase help-seeking behaviours by assuring athletes that there is a wide range of practitioners who they might confide in and approach for support (Abram et al., 2008; Gulliver et al., 2012).

Player Welfare officers accept that some athletes may be wary of help-seeking internally. Often, within rugby league, the Player Welfare officers implement a strategy of offering alternative support from external charities such as Sporting Chance. Robert outlined that he gives an alternative support option for the athletes who feel that they cannot seek help internally, “If I think it’s beyond my scope, I’d send it on to like Sporting Chance. I also make them aware as well that they can directly refer to Sporting Chance because some people don’t trust anybody at club you know and I’m employed by the club”. Here, Robert evidences that he respects their needs and engages in engrossment (Noddings, 1988, 2003, 2005).

It became evident that some clubs encourage a wide range staff (such as coaching staff and psychologists) to undertake Mental Health First Aid training to gain a greater understanding of how to identify, approach and signpost wellbeing concerns (Roberts et al., 2016; The FA, 2022; St John Ambulance, 2021; Mind, 2022). Mark noted that his club tries to encourage coaching staff and the medical team to upskill in mental health as they spend a large amount of time with athletes.

We also encourage people like coaching staff in particular and our medical team to actually be upskilled in the same areas. This is because as you can probably appreciate coaching staff in particular and performance staff, they carry so much weight and so much influence on elite level athletes and a lot of them will see them as their line manager. It’s only right that they should be trained to the level to actually spot signs of mental ill health.

Similarly, Charlotte revealed that her club has encouraged a number of individuals to upskill on mental health related topics including the safeguarding officer, psychologist, and coaches

and this ensures that there is always at least one practitioner present in case any concerns arise.

So, there are a few of us in the building that are mental health first aid trained and there would be a good team of us so that if something did happen, they'd be at least one of us onsite to deal with that situation. So, we've got myself, the safeguarding officer, the site psychologists and then actually yeah there's two coaches that are first mental health first aid trained.

Both Mark and Charlotte understand that a variety of practitioners (such as medical staff and coaches) can have a positive influence on athletes due to the time they spend with them and the close relationships they can often develop. As such, they consider it important that these practitioners are appropriately trained on how to identify signs of mental ill health and address these with athletes (Boyd et al., 2007). The acceptance of collaborating player care strategies and encouraging other staff to become trained on player care topics, indicates that care is a primary responsibility of all individuals that work around athletes (Barton & Welbourne, 2005). The willingness of coaches, medical staff, and psychologists to accept the culture of openness indicates that they want to create a "climate of care" and listen to athletes about their sporting and non-sporting concerns with the intention of helping them flourish on and off the pitch (Cronin, 2019; Jones, 2009; Lewis et al., 2022). In particular, the developing culture of openness among coaches may also indicate that coaches are becoming more accepting towards the approach of "taking care" of athletes as a whole person, emotionally, physically, and socially, giving every athlete the opportunity to be cared for (Dohsten et al., 2020; Fisher et al., 2017; Jones & Turner, 2006). By coaches being prepared to listen to athletes and showing sympathy towards their concerns, it may be possible to meet the athletes needs and encourage the development of mental health and wellbeing as well as athletic development (Dohsten et al., 2020; Lewis et al., 2022). Increased awareness may allow coaches to signpost athletes to the Player Welfare officer to get the support they need. If support is beyond the player welfare officer, then they can signpost onto a charity that can provide further support such as Rugby League Cares or Sporting Chance which have trained Psychologists that specialise in counselling (Rugby League Cares, 2021; Sporting Chance, 2022).

In order to gain the acceptance of a player care role, player welfare officers adopted their own strategies to encourage coaches to become an important component of the care web (Cronin, 2019; Lewis et al., 2022). The lack of acceptance by some coaches may be due to a lack of understanding on what a player welfare officers role entails. For this reason, James tried to ensure that the coaches were present when he was delivering workshops:

My approach was... it's about me gaining buying from the staff so that they can see the value that I add. So, I know when I got those first workshops or those first interactions with those first contact points with certain age groups, I made sure the coaches were there.

This finding is another example of how care officers go to considerable lengths to influence and define the conditions in which they work. In James' case, we see evidence of a micropolitical understanding that forging a relationship with coaches, and ensuring they understood the importance of are, was central to the pursuit of organisational (e.g., security and enhancement of their position at the club), cultural-ideological (e.g., the implementation of their beliefs about the need for care), and self-interests (e.g., recognition of their role within the club) (Kelchtermans, 2005). Similarly, Mark revealed that he made time to have designated discussions with coaches focusing on what his role did and did not entail and why it was important.

What I did as I got more confident within the role, I'd have those tough sorts of conversations and I would go to the head coach and say, 'well this is my role and this is not my role' and I've got a clear divide... As long as I was open and honest with the coaching staff about that, I thought I'd gain trust and respect from their perspective.

By having clear communication with staff members and distinguishing the responsibilities of a role, respect and trust may be built and social-professional relationships enhanced (Gibson & Groom, 2018). In relation to James' and Marks strategy, a social-professional relationship between them and a coach may be enhanced through the respect for one another's role and the coach may be increasingly willing to accept a caring approach. James further revealed

that he works closely with academy members to build a relationship with them and ensure information is circulated and responded to appropriately.

A lot of the day to day is spent working the people, working the Academy members, working the staff, get building those relationships so that we get all the information we need so that we're able to respond appropriately. Building culture, building a culture of openness so that people feel comfortable to again respond and share how their feeling and then actually responding and actually putting the right support in place for individuals.

Building relationships to create a caring environment may increase the possibility of athletes help-seeking because they are aware of the staff sharing the same intentions to meet their needs (Noddings, 1988, 2003, 2005). Adopting a collaborative approach to player care and ensuring an openness of culture, athletes and staff may feel increasingly comfortable discussing mental health and further gain knowledge on who they can approach for support. This is one step closer towards overcoming the barrier of reduced help-seeking among athletes due to a lack of knowledge on where to seek help (Abram et al, 2008; Gulliver et al, 2012).

Chapter 5: Discussion

Overall, previous research has established that player care and mental health support is being increasingly embedded within elite settings given the increase in concerns surrounding the emotional wellbeing of athletes (Bauman, 2015; Wolanin, 2015). In addition, previous research has addressed the taboo subjects of help-seeking for concerns such as depression, anxiety, injury (Rice et al., 2019; Souter et al., 2018, Taylor & Taylor 1997; Walker et al., 2011), addiction, eating disorders (Atkinson, 2019; McMahon & Dinan Thompson, 2012; Lang, 2015; Rosendahl et al., 2009) and transitioning (Bernes et al., 2009; Bruner et al., 2008; Wylleman et al., 2004) and the reasoning behind why athletes may avoid help-seeking (Kola-palmer et al., 2019; Glick & Castaldelli-Maia, 2016; Markula & Pringle, 2007; Rickwood et al., 2012). To date, however, limited research has been undertaken to investigate how athletes are cared for and provided with mental health support or the experiences of those who enact care. To address this, the current study aimed to investigate the lived experiences of player welfare officers within elite football and rugby league environments and better understand what their responsibilities entail in relation to providing athlete's with support throughout the different stages of their careers. The research also aimed to understand the challenges that carers face and the strategies that are implemented to improve their working conditions. The study has shed unique light on the wide-ranging nature of their role. Key findings show that PWO's assist athletes in gaining access to support for mental health concerns such as anxiety, bereavements, injury, addiction, and stress related concerns. The data would suggest that the player welfare officer role is highly valued especially within high-pressurised football and rugby league environments where mental ill health is apparent. All PWO's interviewed expressed that mental health support is hugely important in environments that have traditionally side-stepped the subject of care. The findings of this research indicate that PWO's aim to provide athletes with a variety of support ranging from mental health support to post-sport career transitioning support.

In order to provide a variety of support, mental health and emotional wellbeing support was offered through different methods in order to meet athlete needs (See Cronin 2019; Noddings, 1988, 2003, 2005). These methods include appointments, 'walking the building' and being visible to athletes (e.g., eating lunch with them and having an informal chat on the touchline) and signposting to external support such as Sporting Chance and Rugby League Cares. This

was consistent among both football and Rugby league in which all player welfare officers valued providing the athletes with various support options and felt as though it was important to understand the limits of their competencies and signpost externally (Sporting Chance and Rugby League Cares) if needed. In relation to educational support, it is evident that organisations are striving to implement an increase in educational opportunities for athletes throughout their during and after their careers. Even though there is still room for improvement (e.g., in terms of the level and consistency of support offered), it is clear that player welfare officers play an important role in providing athletes with access to these opportunities. The PWO's adopt an athlete-orientated approach and encourage athletes to develop as individuals on and off the pitch (Bloom, 1996; Dohsten et al., 2020; Jones, 2009; Lewis et al., 2022). Athletes are also encouraged to develop their personal development through life skills education such as nutrition, driving awareness, and financial education with the aim of preparing athletes for life outside of sport.

Furthermore, it is evident that organisations are becoming increasingly aware of concerns surrounding post-sport transitions where it is becoming common for athletes to struggle with transitioning and which exposes them to an increased risk of developing mental health disorders (Stambulova, 2016; Stambulova, 2017; Stambulova & Wylleman, 2014; Torregrosa, Reguela, & Mateos, 2020). For these reasons, it is clear that PWO's take a proactive approach to care and encourage athletes to enquire about educational opportunities. PWO's also attempt to broaden their knowledge on educational opportunities by contacting educational institutions and transition managers for advice/guidance. Although this is a welcomed development, the acknowledgement of mental health concerns and transitioning is widely expanding and the implementation of support for athletes continues to evolve.

Even though the acknowledgement of mental health support and help-seeking has increased and sports such as football and rugby league have access to player welfare officers, the current study has shed light on the challenging nature of caring roles. Nevertheless, the PWO's were honest about the challenges they face on a daily basis and admitted that the role was difficult to define and that they were often unclear of the job requirements, which compromised their ability to offer a consistent standard of care. In particular, all of the PWO's revealed an element of role ambiguity (Beauchamp et al., 2002; Eys et al., 2003). When comparing the PWO's from football and rugby league, it quickly became apparent that the qualifications and job descriptions differed. This would suggest that the role is likely to

differ within every club and the role may not be transferable between different sports. For example, rugby league required a counselling qualification but football did not have similar requirements. Due to the lack of qualifications required to fulfil a PWO role within a football environment, some of the PWO's in this setting felt as though they may have been recruited merely to fulfil audit requirements. This inevitability meant that some PWO's had job roles and responsibilities in addition to player care, thereby increasing their workload and further exacerbating role ambiguity. This raises questions about current standards of player care and strengthens the need for an increase in support for the role, to show athletes that their wellbeing is valued as well as prove to PWO's that they are a valued member of multi-disciplinary teams.

Another important finding was the way in which PWO's felt they were perceived by key stakeholders. With the intense and precarious nature of elite sport, it is inevitable that political factors may influence one's job satisfaction or ability to fulfil their roles. It was apparent that the micro-political nature of coaching practice was deemed a challenge for all the PWO's (See Potrac et al., 2012; Roderick 2006b). It was evident that the PWO's had mixed relationships with the coaches and their caring role may not have been seen as important when compared to other sporting roles. It quickly became apparent that the PWO's felt that they had to implement strategies to gain acceptance from coaches (e.g., be present during training sessions to show an interest in football or rugby). It was clear that acceptance among the coaches was seen necessary to fulfil the requirements of their role and PWO's felt as though they needed some social recognition from coaches to be satisfied in their role and to help them establish a web of care.

The challenge of normalising athletes help-seeking was another important finding. In particular, the PWO's within this study were based within the masculine environments of football and rugby, which are traditionally associated with negative stereotypes in relation to males and help-seeking (Gulliver et al., 2012; Lewis et al., 2018; Markula & Pringle, 2007). Although the findings indicate an increase in athletes confiding in practitioners that they trust (such as physiotherapists), there are still concerns surrounding the lack of help-seeking due to the way that athletes negatively perceive those who intend to care for them (Bennie & O'Connor, 2010; Lewis et al., 2018). It's clear that more research is required to explore how athletes might be encouraged to avail of and accept care. It was evident that some athletes still avoid help-seeking due to the fear of social stigmas and the fear of being disqualified

from social acceptance (Abram et al., 2008; Bryne, 2000). These findings support the research of Bennie & O'Connor (2010), Gulliver et al. (2012) and Lewis et al. (2018) who found that athletes who are less likely to help-seeking do so as they fear that they may not be selected for a game or may be perceived as 'weak' by others. If athletes fear help-seeking from the practitioners that surround them and notice that caring roles are not accepted by others, the PWO's ability to create a 'care web' is significantly compromised.

Moving forward, the acceptance of caring roles needs to be increased and other practitioners need to be more open to athlete care with the intent to encourage athletes to help-seeking from people they trust. Unfortunately, it is not possible to implement care solely from a PWO alone, the implementation and utilisation of a 'care web' is important as it takes a proactive approach to player care instead of a reactive approach, creating a 'climate of care' (Cronin, 2019; Lewis et al., 2022). Currently, the findings indicate that player welfare officers are attempting to implement the approach of working preventatively towards player care, educating athletes on how to prioritise their wellbeing and get support if needed. On the other hand, the practitioners that surround them seem to be working reactively towards player care, reporting a concern when a player is noticeably struggling. Although the reporting of athlete concerns among staff, such as physiotherapists is positive, these may be reported too late, or when the athlete has already suffered a great deal of distress. To strengthen the communication between athletes and practitioners, a collaborative approach to care could be implemented to identify areas of concern before they become an issue, encouraging the implementation of support at an earlier stage. For example, a coach could simply ask a player if they are okay or if anything is troubling them and they could communicate this with the player welfare officer and other practitioners to increase awareness of the player and do check-ins. We should acknowledge, however, that many players may be reluctant to share such concerns with an authority figure. Nevertheless, future research may wish to explore how coaches might be encouraged to identify mental ill-health and how they might relay their concerns to care officers. Without the acceptance of all practitioners taking some responsibility for the care of athletes and their wellbeing, it may remain difficult to normalise help-seeking within elite environments.

In addition, given limited funding and the wide-ranging nature of their role, it was clear that PWO's were finding it challenging to fulfil all of their roles and responsibilities. It was evident that all the PWO's went 'above and beyond' to care for all of the athletes at their club

(Gibson & Groom, 2018; Jones & Wallace, 2005). They made themselves available for long and unsociable hours and tried to be present around the athletes as much as possible, making detachment from work difficult (Bowen, et al., 2018; Varol et al., 2021). It was revealed that PWO's implemented their own strategies to manage their work-life balance including setting boundaries with athletes by not answering calls or messages at unreasonable times and developing management strategies to manage workload. It is clear that boundary setting is crucial within a PWO role due to the high demand and workload. Without setting boundaries, it would not be possible for a PWO to take time for their own wellbeing and self-care. Nevertheless, boundary setting is a strategy to help detach from work but the PWO's openly revealed that they found it difficult to psychologically detach from their role due to the scenarios they are faced with on a daily basis. The lack of PWO roles means that the workload is massively increased for these practitioners. The PWO's revealed that they found it difficult to build a rapport with every athlete because they do not have the time or capacity to be present around all athletes daily. In order to increase the standards of care as well as prioritise the wellbeing of player welfare officers, an increase in these roles should be considered. An increase in roles may also encourage the normalisation of help-seeking and encourage the creation of a 'climate of care' to aid in the implementation working proactively instead of reactively.

Overall, the findings revealed that with all of the above challenges, the PWO's have adopted their own approaches and implemented their own strategies in an attempt to improve their working conditions and increase athlete help-seeking. One of the many strategies that they adopted was the use of visibility and being present around staff and athletes as much as possible. It was evident that the PWO's acknowledged that their practices are evaluated by others around them, therefore they sought to increase their visibility and thereby achieve greater recognition (Kelchtermans and Ballet, 2002). By increasing visibility, it was hoped that they would become an 'accepted' member of the team and others would better understand the importance of their work (Gibson and Groom, 2019; Thompson et al., 2015). All of the PWO's made themselves visible by 'walking the building' and standing at the touchline during training to increase the opportunity of interaction.

Furthermore, the findings revealed that building a rapport with athletes is crucial to a caring role as it enhances communication and makes athletes feel increasingly comfortable when seeking support (Bennie & O'Connor, 2012; Jones, 2015). A proactive approach to building

rapport was evidence including regular conversations with athletes about their family and interests, eating lunch with them and understanding that they are normal people away from the sport. Rapport building strategies closely interlink with visibility as most of the strategies are implemented publicly when surrounded by the staff and athletes. However, building rapport building with every athlete was challenging due to time limitations and workload as well as the lack of acceptance of their role (Bowen, et al., 2018; Gibson & Groom, 2018; Kelchtermans and Ballet, 2002; Varol et al., 2021).

Importantly, this research has revealed that a player welfare officers are confronted by a number of challenges including long working hours, micro-political tensions, the failure to accept the importance of care among staff, and together this compromises job satisfaction among PWO's. Findings have also revealed that their responsibilities stretch beyond providing mental health and wellbeing support. The PWO's also acknowledged that player care can be influenced by a range of factors including transitioning through age groups, injury, playing time and retain and release support, therefore the role involves offering further support in these areas. Given the varied, ambiguous, and uncertain nature of this role, organisations such as the EFL have a responsibility to standardise qualifications, roles, and responsibilities to ensure consistency of care. Not only might this approach reduce role ambiguity, but this will also better equip player welfare officers with the training and knowledge required for this complex role.

In lieu of appropriate training, PWO's enact athlete care through the strategic implementation of practices. The precarious nature of practice within these settings means that the player welfare officers employ a variety of micro-political strategies to normalise player care and improve working conditions. This is a challenging endeavour given that help-seeking remains stigmatised and some athletes remain reluctant to engage in support. Albeit the support that surrounds athletes throughout their careers has increased massively in regard to transitioning, mental health and emotional wellbeing support, and education, but player care standards still need to be improved upon. Unfortunately, player care is underfunded, requires long hours of work, and is not widely accepted within elite environments, therefore it is evolving at a slow rate. In order to improve player care and support those within the existing roles, governing bodies may wish to offer further support and funding to clubs to increase staffing and resources. It is also important for those within the existing roles to be noticed and their efforts appreciated by those that surround them, because the job role requires a large amount of

independence, long hours, patience, and quick decision making. Needless to say, a player welfare officer role is not a normal day to day role and comes with multiple challenges, but the individuals within these roles are an important part of athletes lives. For these reasons, player care needs to be better supported and help-seeking needs to be encouraged in order to encourage athletes to develop as individuals on and off the pitch. To conclude, it is important to acknowledge that although the player welfare officers faced challenges and had to find ways to improve their working conditions, each player welfare officer expressed that they found their role rewarding and regardless of working conditions, they would always take an athlete-orientated approach to care and prioritise the development of their players as people as well as athletes.

5.1 Methodological strengths and implications

Whilst this research has added to our understanding of player care, it is important to acknowledge some of the methodological challenges encountered during the research journey. Data collection only involved a single interview that was relatively brief (given the demands placed on the PWO's time) and this might have influenced the extent to which rapport could be established. Email exchanges prior to the interviews might have gone some way to addressing this problem. The exchanging of emails involved informing prospective interviewees of my interest in the subject and this might have ensured participants that the interviews would be conducted sensitively (Gratton & Jones, 2014). Nevertheless, to increase rapport, researchers can conduct multiple interviews over the course of the season. Alternatively, participants could be asked to keep diaries and record their experiences within their role. Diaries could be recorded to show how the demands of care officers can vary across a season. Using diaries as a method of data collection may enhance the detail of data collected because participants have more flexibility to take as much time as they need to think about the information and record this (Alamri, 2019). Additionally, the data may become richer because the participant may not feel as judged by the data collector when describing/explaining their experiences, therefore, the participant is likely to explain experiences in detail (Alamri, 2019). Whilst collaborative reflexivity was central to the research process, researchers could consider additional approaches to the promotion of reflexivity. Discussions with my supervisors certainly prompted me to remain reflexive about how my theoretical and experiential understanding of care shaped the research process, but the use of 'team-reflexive' discussions might have prompted even greater levels of reflexivity. This latter process encourages members of a research team to engage in reflective writing to answer reflexive questions including the following: What experiences have I had with qualitative research? What results do I expect to come out of this project? Answers might then be shared with the team to develop an even better understanding of each researcher's position and how that could impact results (Olmos-Vega et al., 2023).

Future research should continue to focus upon the socio-political realities that characterize work in elite sports settings, and in particular, the work conducted by care officers as they negotiate practice. Researchers may wish to use phenomenological approaches which might shed light on the embodied nature of practice in this field. More research is required, for

example, to explore how caring practice is lived and felt or, in other words, the affective implications of work in this setting. Alternative philosophies of knowledge, including phenomenology, have the potential to shed light on the deeply affective nature of practice thereby providing us with a better understanding of the reality of working in elite sport and how practitioners feel about the strategies they use in order to maintain and enhance their position. Future research could utilise phenomenology to explore how emotional labour and management affects PWO's personal life (including relationships with friends and family). Autoethnographic research could also be used to focus, and hone in on, the interactions between care officers and athletes and other relevant stakeholders. Practitioners tasked with caring for others could document their experience by using autoethnographic vignettes (Humphreys, 2005). Autoethnographic vignettes offer a means of providing what Van Manen called "the ethnographer's own taken-for-granted understandings of the social world under scrutiny" (1979, p. 547). Researchers have argued that vignettes might serve as an alternative approach to representation and reflexivity in qualitative research (see Humphreys, 2005). Vignettes are intended to capture "vivid portrayals of the conduct of an event of everyday life" (Erickson, 1986, p. 149). PWO's could detail their experiences in a series of "performance vignettes" with a view to eliciting "emotional identification and understanding" (Denzin, 1989, p. 124). Vignettes can be derived from sources such as diaries, free-writing and introspection. In using them, PWO's would seek to portray how they seek to make sense and develop an understanding of the events happening around them. In summary, autoethnographies have the potential to shed considerable light on the social environment inhabited by care officers and the relationships that they create, manage and negotiate in fulfilling their duties.

Furthermore, the recruitment process of the research was challenging therefore the sample size is deemed smaller than expected. The sample size is smaller due to the job role being newly established and the workload of the job being highly demanding. Even after geographically widening my participant sample (Salmons, 2015), the participants found it difficult to find time within their busy schedules to undergo their interview. Understandably, this meant that some participants had to withdraw from the research. Nevertheless, a smaller sample size means that this research is increasingly difficult to generalise to the wider population (Mason, 2002). In order to increase the generalisability, it would be advised to either continue recruiting more participants or further conduct multiple interviews with the existing participants to gain detailed responses. Nevertheless, the interviews were very

detailed and the participants opened-up about their personal experiences, allowing in-depth examples to be provided throughout the findings.

5.2 Future recommendations

Although this research is one step closer towards understanding why player welfare officers have high significance within elite sporting environments, there are still numerous avenues that could further build upon this research. Future research could investigate the care and support that is put in place for the player welfare officers themselves. As the role requires emotional support and player welfare officers may often experience distressing scenarios such as loss and bereavements, we know little about the procedures that are put in place by sporting organisations to offer opportunities for player welfare officers to ‘‘offload’’ throughout their careers. Similar to other caring professions, providing ‘care for the carers’ is valued as important to manage job stress and mental health (Moll, 2014; Savage & Bailey, 2004). Further investigating the support made available to PWO’s may encourage sporting organisations to put support in place for staff to increase the openness of mental health as a whole, encouraging all individuals (players and staff) to help-seek as often as needed (Kola-Palmer et al., 2020; Lewis et al., 2016).

Additionally, it is evident that player care standards can vary across elite sport dependant on the governing body and their set standards. For this reason, a study purely focusing on one specific sport at a time rather than a comparison, may be beneficial. Previous research from Kola-Palmer et al. (2020), Lewis et al. (2016), Lewis et al. (2018), and Lewis et al. (2022), focuses on the welfare and care of rugby league athletes and it has become clear that there is a vast amount of research focusing on a variety of topics with elite football, but only a small amount addresses the welfare role and care of footballers. With the recent evolvement of the EFL (2022) stating that it is now mandatory for all clubs to employ a full-time PWO, some updated research focusing on a football environment would be highly beneficial.

Even though this research focuses specifically on player welfare officers and Lewis et al. (2018) focuses on the athletes perceptions of player welfare officers, to expand on both research areas, further research could do a comparison of care in which a mixture of athletes and player welfare officer could be interviewed. The questions could range from caring strategies that are already implemented to whether athletes think that the strategies are beneficial and work among the athletes. This study could also be a comparison between a variety of different sports and even focus on age-specific environments such as academies or

first teams. By broadening the research on player welfare officers and athletes, it may be possible to better understand the role in order to tailor care to athlete needs.

5.3 Final Reflections

As an individual with a keen interest in player care and the holistic development of athletes, throughout the process of completing this research I was offered the new challenge of becoming a Player Care Manager within an elite football environment. Upon reflection, this research has been highly beneficial from a personal perspective, enabling me to reflect on my own practices and consider how to apply new strategies to help me work efficiently as well as effectively within the environment.

Furthermore, an unknown aspect that is less ‘out in the open’ is the communication among the player care community and how networking among other player care officers is welcomed. Unlike other job roles in elite environments, there is no fear that sharing good practice will be detrimental to your role and own self-interests. Player care officers are not precious of their work and would rather share their good practices to aid in wider holistic development. This networking is essential as it helps to bridge the gap between the unknown responsibilities and knowledge needed to fulfil the expectations of the role. The communication between one another also helps to create a supportive community who can lean on one another for advice and support. I am thankful that this community has been welcoming as they have provided me with resources, advice, and guidance throughout the entirety of my first season within the role.

When reflecting back on my first season, my perspective on player care has evolved, valuing the importance of working proactively rather than reactively. I also value the importance of building rapport with staff and players and understand the importance of ‘sitting’ separately from football decisions to gain trust. The role most certainly has its challenges and there are barriers to overcome these, but the role is ever evolving and player care has the potential to become a valued member of a multi-disciplinary team. As player care evolves, it is hoped that it will become mandatory for all clubs to employ more than one PWO to help distribute workload across a number of people. As an individual who works independently, it is a must to be organised in order to manage workload. In agreement with the participants in this research, the job role can be challenging at times but nevertheless, the job is definitely rewarding once you begin to build trust and start to become an accepted member of the team.

Without a doubt, this research helps me develop my own player care role day by day and helps me self-reflect on my own practices.

Chapter 9: References

- Abram, K. M., Paskar, L. D., Washburn, J. J., & Teplin, L. A. (2008). Perceived barriers to mental health services among youths in detention. *Journal of the American Academy of Child & Adolescent Psychiatry*, 47(3), 301-308.
- Agnew, D., Marks, A., Henderson, P., & Woods, C. (2018). Deselection from elite Australian football as the catalyst for a return to sub-elite competitions: when elite players feel there is 'still more to give.'. *Qualitative Research in Sport, Exercise and Health*, 10(1), 117-136.
- Alamri, W. A. (2019). Effectiveness of qualitative research methods: Interviews and diaries. *International Journal of English and Cultural Studies*, 2(1), 65-70.
- Andersen, M. B., Van Raalte, J. L., & Brewer, B. W. (2001). Sport psychology service delivery: Staying ethical while keeping loose. *Professional Psychology: Research and Practice*, 32(1), 12.
- Anderson, A. G., Mahoney, C., Miles, A., & Robinson, P. (2002). Evaluating the effectiveness of applied sport psychology practice: Making the case for a case study approach. *The Sport Psychologist*, 16(4), 432-453.
- Andersen, M. B., & Speed, H. D. (2012). Chapter 1-Therapeutic relationships in applied sport psychology: Chapter taken from Routledge Handbook of Applied Sport Psychology. *Routledge Online Studies on the Olympic and Paralympic Games*, 1(44), 3-11.
- Annerstedt, C., & Lindgren, E. C. (2014). Caring as an important foundation in coaching for social sustainability: a case study of a successful Swedish coach in high-performance sport. *Reflective Practice*, 15(1), 27-39.
- Appaneal, R. N., Levine, B. R., Perna, F. M., & Roh, J. L. (2009). Measuring postinjury depression among male and female competitive athletes. *Journal of Sport and Exercise Psychology*, 31(1), 60-76.
- Armour, K. (2011). *Sport pedagogy*. Taylor & Francis.
- Armstrong, L. E., & Vanheest, J. L. (2002). The unknown mechanism of the overtraining syndrome. *Sports medicine*, 32(3), 185-209.
- Armstrong, N., & McManus, A. M. (2011). Physiology of elite young male athletes. *The elite young athlete*, 56, 1-22.
- Atkinson, M. (2019). *Sport, Mental Illness and Sociology, Vol. 11*. Bingley: Emerald Publishing.
- Baker, M. (2006). You only sing when you're winning. Footballing lives: As seen by chaplains of the beautiful game, 93-104.
- Bandura, A., & Walters, R. H. (1977). *Social learning theory (Vol. 1)*. Prentice Hall: Englewood cliffs.

- Bar, R. J., Cassin, S. E., & Dionne, M. M. (2016). Eating disorder prevention initiatives for athletes: A review. *European Journal of Sport Science*, 16(3), 325-335.
- Baron, D. A., Reardon, C. L., & Baron, S. H. (2013). Doping in sport. *Clinical sports psychiatry: An international perspective*, 21-32.
- Barton, A., & Welbourne, P. (2005). Context and its significance in identifying ‘what works’ in child protection. *Child Abuse Review: Journal of the British Association for the Study and Prevention of Child Abuse and Neglect*, 14(3), 177-194.
- Baum, A. (2006). Eating disorders in the male athlete. *Sports Med*, 36(1);1-6.
- Bauman, N. J. (2015). The stigma of mental health in athletes: are mental toughness and mental health seen as contradictory in elite sport? *Sports Med*. 50, 135–136.
- Beauchamp, M. R., Bray, S. R., Eys, M. A., & Carron, A. V. (2005). Leadership behaviors and multidimensional role ambiguity perceptions in team sports. *Small Group Research*, 36(1), 5-20.
- Bell, A. F., Knight, C. J., Lovett, V. E., & Shearer, C. (2020). Understanding elite youth athletes’ knowledge and perceptions of sport psychology. *Journal of Applied Sport Psychology*, 1-23.
- Bennie, A., & O'Connor, D. (2010). Coaching philosophies: Perceptions from professional cricket, rugby league and rugby union players and coaches in Australia. *International Journal of Sports Science & Coaching*, 5(2), 309-320.
- Bennie, A., & O'Connor, D. (2012). Coach-athlete relationships: A qualitative study of professional sport teams in Australia. *International Journal of Sport and Health Science*, 201208.
- Bernes, K. B., McKnight, K. M., Gunn, T., Chorney, D., Orr, D. T., & Bardick, A. D. (2009). Life after sport: Athletic career transition and transferable skills. *Journal of Excellence*.
- Biggin, I. J., Burns, J. H., & Uphill, M. (2017). An investigation of athletes’ and coaches’ perceptions of mental ill-health in elite athletes. *Journal of Clinical Sport Psychology*, 11(2), 126-147.
- Blasé, J. (1991). *The politics of life in schools: Power, conflict, and cooperation*. Corwin Press, Inc.
- Bloom, B. (1985). *Developing talent in young people*. Books on Demand.
- Bloom, G. A. (1996). Competition: Preparing for and operating in competition. *Great job coach*, 138-179.
- Boden, J. M., & Fergusson, D. M. (2011). The short-and long-term consequences of adolescent alcohol use. *Young people and alcohol: Impact, policy, prevention, treatment*, 32-44.

- Bosselut, G., Heuzé, J. P., Eys, M. A., Fontayne, P., & Sarrazin, P. (2012). Athletes' perceptions of role ambiguity and coaching competency in sport teams: A multilevel analysis. *Journal of Sport and Exercise Psychology*, 34(3), 345-364.
- Boswell, W. R., & Olson-Buchanan, J. B. (2007). The use of communication technologies after hours: The role of work attitudes and work-life conflict. *Journal of management*, 33(4), 592-610.
- Boyd, C., Francis, K., Aisbett, D., Newnham, K., Sewell, J., Dawes, G., & Nurse, S. (2007). Australian rural adolescents' experiences of accessing psychological help for a mental health problem. *Australian Journal of Rural Health*, 15(3), 196-200.
- Bowen, P., Govender, R., Edwards, P., & Cattell, K. (2018). Work-related contact, work-family conflict, psychological distress and sleep problems experienced by construction professionals: An integrated explanatory model. *Construction management and economics*, 36(3), 153-174.
- Brady, A., & Maynard, I. (2010). Debate: At an elite level the role of a sport psychologist is entirely about performance enhancement. *Sport & Exercise Psychology Review*, 6(1), 59-66.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Braun, V., & Clarke, V. (2014). What can “thematic analysis” offer health and wellbeing researchers?. *International journal of qualitative studies on health and well-being*, 9(1), 26152.
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative research in sport, exercise and health*, 11(4), 589-597.
- Braun, V., & Clarke, V. (2020). One size fits all? What counts as quality practice in (reflexive) thematic analysis?. *Qualitative research in psychology*, 18(3), 328-352.
- Brinkmann, S. (2013). *Qualitative interviewing*. Oxford university press.
- Bristol Bears Rugby. (2021). *Professional Development Manager*. Accessed January, 13, 2022. <https://www.bristolbearsrugby.com/news/vacancy-professional-development-manager/>
- Brownrigg, A., Burr, V., Locke, A., & Bridger, A. J. (2012). You don't know what's around the corner: A qualitative study of professional footballers in England facing career-transition. *Qualitative Methods in Psychology Bulletin*, (14).
- Bruner, M. W., Munroe-Chandler, K. J., & Spink, K. S. (2008). Entry into elite sport: A preliminary investigation into the transition experiences of rookie athletes. *Journal of applied sport psychology*, 20(2), 236-252.
- Bryman, A. (2012). *Social Research Methods (4th ed)*. Oxford: Oxford University Press.
- Byrne, P. (2000). Stigma of mental illness and ways of diminishing it. *Advances in Psychiatric treatment*, 6(1), 65-72.

Byrne, D. (2022). A worked example of Braun and Clarke's approach to reflexive thematic analysis. *Quality & quantity*, 56(3), 1391-1412.

Castaldelli-Maia, J. M., e Gallinaro, J. G. D. M., Falcão, R. S., Gouttebarga, V., Hitchcock, M. E., Hainline & Stull, T. (2019). Mental health symptoms and disorders in elite athletes: a systematic review on cultural influencers and barriers to athletes seeking treatment. *British Journal of Sports Medicine*, 53(11), 707-721.

Cavallerio, F., Wadey, R., & Wagstaff, C. R. (2020). Member reflections with elite coaches and gymnasts: Looking back to look forward. *Qualitative Research in Sport, Exercise and Health*, 12(1), 48-62.

Chambers, T. P., Harangozo, G., & Mallett, C. J. (2019). Supporting elite athletes in a new age: experiences of personal excellence advisers within Australia's high-performance sporting environment. *Qualitative Research in Sport, Exercise and Health*, 11(5), 650-670.

Coe, R. (2012). The nature of educational research-exploring the different understandings of educational research. *Research Methods & Methodologies in Education*. Los Angeles, London, New Dehli.

Comfort, A. (2006). *Shall we sing a song for you. Footballing Lives: As Seen by Chaplains in the Beautiful Game*, 39-49.

Cook, C., Crust, L., Littlewood, M., Nesti, M., & Allen-Collinson, J. (2014). 'What it takes': Perceptions of mental toughness and its development in an English Premier League Soccer Academy. *Qualitative research in sport, exercise, and health*, 6(3), 329-347.

Cooper, F. (2012). *Professional boundaries in social work and social care: a practical guide to understanding, maintaining, and managing your professional boundaries*. Jessica Kingsley Publishers.

Cosh, S., Tully, P. J., & Crabb, S. (2019). Discursive practices around the body of the female athlete: An analysis of sport psychology interactions in elite sport. *Psychology of Sport and Exercise*, 43, 90-104.

Cosh, S. M., McNeil, D. G., & Tully, P. J. (2021). Poor mental health outcomes in crisis transitions: An examination of retired athletes accounting of crisis transition experiences in a cultural context. *Qualitative Research in Sport, Exercise and Health*, 13(4), 604-623.

Cresswell, S. L., & Eklund, R. C. (2007). Athlete burnout: A longitudinal qualitative study. *The sport psychologist*, 21(1), 1-20.

Cronin, C., & Armour, K. (Eds.). (2018). *Care in sport coaching: Pedagogical cases*. Routledge.

Cronin, C., Walsh, B., Quayle, L., Whittaker, E., & Whitehead, A. (2019). Carefully supporting autonomy—learning coaching lessons and advancing theory from women's netball in England. *Sports Coaching Review*, 8(2), 149-171.

Cronin, C., Knowles, Z. R., & Enright, K. (2020). The challenge to care in a Premier League Football Club. *Sports Coaching Review*, 9(2), 123-146.

Cropley, B., Miles, A., & Nichols, T. (2015). Learning to learn: The coach as a reflective practitioner. In *Becoming a sports coach* (pp. 23-37). Routledge.

Cumming, J., & Williams, S. E. (2012). *The role of imagery in performance*.

Cushion, C., & Partington, M. (2016). A critical analysis of the conceptualisation of 'coaching philosophy'. *Sport, education, and society*, 21(6), 851-867.

Darko N. (2009). "Get up, shut up and stop being a fanny": Rugby union men and their suppression of body anxiety. *J Mens Health*. 6(4):331-7.

David, P. (2005). *Human rights in sport: A critical review of children's rights in competitive sports*. New York: Routledge.

Dearnley, C. (2005). A reflection on the use of semi-structured interviews. *Nurse researcher*, 13(1).

De Grace, L. A., Knight, C. J., Rodgers, W. M., & Clark, A. M. (2017). Exploring the role of sport in the development of substance addiction. *Psychology of Sport and Exercise*, 28, 46-57.

Delenardo, S., & Terrion, J. L. (2014). Suck it up: Opinions and attitudes about mental illness stigma and help-seeking behaviour of male varsity football players. *Canadian Journal of Community Mental Health*, 33(3), 43-56.

Denzin, N. K. (1989). *Interpretive interactionism*. Newbury Park, CA: Sage.

Denzin, N. K., & Lincoln, Y. S. (1995). Transforming qualitative research methods: Is it a revolution?. *Journal of Contemporary Ethnography*, 24(3), 349-358.

Denzin, N. K., & Lincoln, Y. S. (Eds.). (2011). *The Sage handbook of qualitative research*. Sage.

Derks, D., Van Mierlo, H., & Schmitz, E. B. (2014). A diary study on work-related smartphone use, psychological detachment and exhaustion: examining the role of the perceived segmentation norm. *Journal of occupational health psychology*, 19(1), 74.

Derks, D., ten Brummelhuis, L. L., Zecic, D., & Bakker, A. B. (2014). Switching on and off...: Does smartphone use obstruct the possibility to engage in recovery activities?. *European Journal of Work and Organizational Psychology*, 23(1), 80-90.

Dickson-Swift, V., James, E. L., & Liamputtong, P. (2008). *Undertaking sensitive research in the health and social sciences: Managing boundaries, emotions, and risks*. Cambridge University Press.

Doherty, S., Hannigan, B., & Campbell, M. J. (2016). The experience of depression during the careers of elite male athletes. *Frontiers in psychology*, 7, 1069.

Dohsten, J., Barker-Ruchti, N., & Lindgren, E. C. (2020). Caring as sustainable coaching in elite athletics: Benefits and challenges. *Sports Coaching Review*, 9(1), 48-70.

Duncan, M. C. (1994). The politics of women's body images and practices: Foucault, the panopticon, and Shape magazine. *Journal of sport and social issues*, 18(1), 48-65.

Dunn, M., Thomas, J. O., Swift, W., Burns, L., & Mattick, R. P. (2010). Drug testing in sport: The attitudes and experiences of elite athletes. *International journal of drug policy*, 21(4), 330-332.

Du Preez, E. J., Graham, K. S., Gan, T. Y., Moses, B., Ball, C., & Kuah, D. E. (2017). Depression, anxiety, and alcohol use in elite rugby league players over a competitive season. *Clinical Journal of Sport Medicine*, 27(6), 530-535.

English Football League (EFL). (2022). *Youth Development Handbook*. Accessed April, 19, 2023. <https://www.efl.com/siteassets/efl-documents/youth-development-academy-parents-carers-handbook-2022-23-e-book-version.pdf>

Eichstadt, M., Luzier, J., Cho, D., & Weisenmuller, C. (2020). Eating disorders in male athletes. *Sports health*, 12(4), 327-333.

Eime, R. M., Harvey, J. T., Charity, M. J., & Payne, W. R. (2016). Population levels of sport participation: implications for sport policy. *BMC public health*, 16(1), 1-8.

Erickson F (1986) Qualitative methods in research on teaching. In Wittrock MC (ed.) *Handbook of Research on Teaching*. New York: Macmillan, 119–161

Etzion, D., Eden, D., & Lapidot, Y. (1998). Relief from job stressors and burnout: reserve service as a respite. *Journal of Applied Psychology*, 83(4), 577.

Eys, M. A., & Carron, A. V. (2001). Role ambiguity, task cohesion, and task self-efficacy. *Small group research*, 32(3), 356-373.

Eys, M. A., Carron, A. V., Beauchamp, M. R., & Bray, S. R. (2003). Role ambiguity in sport teams. *Journal of sport and exercise psychology*, 25(4), 534-550.

Eys, M. A., Carron, A. V., Beauchamp, M. R., & Brays, S. R. (2005). Athletes' perceptions of the sources of role ambiguity. *Small Group Research*, 36(4), 383-403.

Faustin, M., Burton, M., Callender, S., Watkins, R., & Chang, C. (2022). Effect of media on the mental health of elite athletes. *British journal of sports medicine*, 56(3), 123-124

Fine, M. (2002). *Disruptive voices: The possibilities of feminist research*. University of Michigan Press.

Fisher, L. A., Bejar, M. P., Larsen, L. K., Fynes, J. M., & Gearity, B. T. (2017). Caring in US National Collegiate Athletic Association Division I sport: the perspectives of 18 female and male head coaches. *International Journal of Sports Science & Coaching*, 12(1), 75-91.

- Fortin-Guichard, D., Boudreault, V., Gagnon, S., & Trottier, C. (2018). Experience, effectiveness, and perceptions toward sport psychology consultants: A critical review of peer-reviewed articles. *Journal of Applied Sport Psychology*, 30(1), 3-22.
- Foskett, R. L., & Longstaff, F. (2018). The mental health of elite athletes in the United Kingdom. *Journal of science and medicine in sport*, 21(8), 765-770.
- Freeman, D., & Freeman, J. (2012). Anxiety: A very short introduction. *OUP Oxford*.
- Gallman, R. M. (2011). Enhancement or Recovery: The Scientific and Legal Paradox of Performance-Enhancing Substances. *SMU Sci. & Tech. L. Rev.*, 15, 495.
- Gamble, R., Hill, D. M., & Parker, A. (2013). Revs and psychos: Role, impact and interaction of sport chaplains and sport psychologists within English premiership soccer. *Journal of Applied Sport Psychology*, 25(2), 249-264.
- Gano-Overway, L. A. (2021). Athletes' narratives of caring coaches who made a difference. *Sports Coaching Review*, 1-21.
- Gardner, L. A., Vella, S. A., & Magee, C. A. (2015). The relationship between implicit beliefs, anxiety, and attributional style in high-level soccer players. *Journal of Applied Sport Psychology*, 27(4), 398-411.
- Gardner, A., Iverson, G. L., Levi, C. R., Schofield, P. W., Kay-Lambkin, F., Kohler, R. M., & Stanwell, P. (2015). A systematic review of concussion in rugby league. *British journal of sports medicine*, 49(8), 495-498.
- Gibson, L., & Groom, R. (2018). The micro-politics of organisational change in professional youth football: Towards an understanding of "actions, strategies and professional interests". *International Journal of Sports Science & Coaching*, 14(1), 3-14.
- Gibson, L., & Groom, R. (2019). The micro-politics of organizational change in professional youth football: towards an understanding of the "professional self". *Managing Sport and Leisure*, 23(1-2), 106-122.
- Gil, F., de Andrade, A. G., & Castaldelli-Maia, J. M. (2016). Discussing prevalence, impacts, and treatment of substance use disorders in athletes. *International Review of Psychiatry*, 28(6), 572-578.
- Gilbert, K. (2000). Introduction: why are we interested in emotions?. In *The emotional nature of qualitative research* (pp. 23-36). CRC Press.
- Gilligan, C. (1982). *In a different voice*. Boston, MA: Harvard.
- Gilmore, S., Wagstaff, C., & Smith, J. (2018). Sports psychology in the English Premier League: 'It feels precarious and is precarious'. *Work, Employment and Society*, 32(2), 426-435.

- Glazer, J. L. (2008). Eating disorders among male athletes. *Current sports medicine reports*, 7(6), 332-337.
- Glick, I. D., & Castaldelli-Maia, J. M. (2016). Sport psychiatry: brain, mind, and medical-psychiatric care. *International Review of Psychiatry*, 28(6), 545-546.
- Goffman, E. (1959) *The Presentation of Self in Everyday Life*. New York: Anchor Books.
- Goldberg. (1998). *Sports slump busting: 10 steps to mental toughness and peak performance*. Llumina Press.
- Gratton, C., & Jones, I. (2014). *Research methods for sports studies*. Routledge.
- Grey-Thompson, T. (2017). Duty of care in sport: Independent report to government. *Department for Culture, Media & Sport*.
- Griffiths, S., Murray, S. B., & Touyz, S. (2015). Extending the masculinity hypothesis: An investigation of gender role conformity, body dissatisfaction, and disordered eating in young heterosexual men. *Psychology of Men & Masculinity*, 16(1), 108.
- Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. *Handbook of qualitative research*, 2(163-194), 105.
- Gul, R., Talat, M., Mumtaz, M., & Shaheen, L. (2021b). Does Intelligence Matters in Teaching. *Exploring the Impact of Teachers Intelligence on*.
- Gulliver, A., Griffiths, K. M., & Christensen, H. (2012). Barriers and facilitators to mental health help-seeking for young elite athletes: a qualitative study. *BMC psychiatry*, 12(1), 1-14.
- Haberl, P., & Peterson, K. (2006). Olympic-size ethical dilemmas: Issues and challenges for sport psychology consultants on the road and at the Olympic Games. *Ethics & Behavior*, 16(1), 25-40.
- Hague, N., & Law, G. (2022). ‘I was really, really shocked’: A sociological exploration of the transition experiences of English Youth Academy male footballers from school to work. *International Review for the Sociology of Sport*, 57(2), 273-291.
- Haines, M. (2013). *The role of performance analysis within the coaching process*
- Hanna, P. (2012). Using internet technologies (such as Skype) as a research medium: A research note. *Qualitative research*, 12(2), 239-242.
- Hanin, Y. L. (2010). Coping with anxiety in sport. *Coping in sport: Theory, methods, and related constructs*, 159, 175.
- Hartill, M., & Lang, M. (2014). “I know people think I’m a complete pain in the neck”: An examination of the introduction of child protection and “safeguarding” in English sport from the perspective of national governing body safeguarding lead officers. *Social Sciences*, 3(4), 606-627.

- Hartill, M., Lang, M., & Ashley, N. (2014). *Safeguarding and child protection in Rugby League: A research evaluation*.
- Hartill, M., & Prescott, P. (2007). Serious business or 'any other business'? *Safeguarding and child protection policy in British rugby league*.
- Haynes, K. (2012). Reflexivity in qualitative research. *Qualitative organizational research: Core methods and current challenges*, 72-89.
- Heil, J. (1993). Sport psychology, the athlete at risk, and the sports medicine team. *Psychology of sport injury*, 1-13.
- Hemmings, B., Watson, N. J., & Parker, A. (Eds.). (2019). *Sport, psychology, and Christianity: Welfare, performance, and consultancy*. Routledge.
- Hennink, M. M. (2014). Introducing focus group discussion. *Understanding Focus Group Discussions*. Oxford University Press: Oxford, UK, 1-34.
- Heskins, Jeffrey, and Matt Baker. (Eds.). (2006). *Footballing Lives*. Norwich: Canterbury Press.
- Holland, M. J., Woodcock, C., Cumming, J., & Duda, J. L. (2010). Mental qualities and employed mental techniques of young elite team sport athletes. *Journal of clinical sport psychology*, 4(1), 19-38.
- Howell, K. E. (2012). *An introduction to the philosophy of methodology*. Sage.
- Huggan, R., Nelson, L., & Potrac, P. (2015). Developing micropolitical literacy in professional soccer: A performance analyst's tale. *Qualitative Research in Sport, Exercise and Health*, 7(4), 504-520.
- Humphreys, M. (2005). Getting personal: Reflexivity and autoethnographic vignettes. *Qualitative inquiry*, 11(6), 840-860.
- Jokinen, E. (2016). Precarious everyday agency. *European Journal of Cultural Studies*, 19(1), 85-99.
- James, N., & Busher, H. (2012). Internet interviewing. *The SAGE handbook of interview research: The complexity of the craft*, 177-192.
- Jarvis, M. (2006). *Sport psychology: A student's handbook*. Routledge.
- Jennings, S. (2015). Are educationally prepared rugby players better equipped to enter the transition process and into life after rugby? (*Doctoral dissertation, Dublin Business School*).
- Jones, G. (2002). What is this thing called mental toughness? An investigation of elite sport performers. *Journal of applied sport psychology*, 14(3), 205-218.
- Jones, R., Armour, K., & Potrac, P. (2004). *Sport coaching cultures: From practice to theory*. London: Routledge.

- Jones, R. L., & Wallace, M. (2005). Another bad day at the training ground: Coping with ambiguity in the coaching context. *Sport, education and society*, 10(1), 119-134.
- Jones, R. L., & Turner, P. (2006). Teaching coaches to coach holistically: Can problem-based learning (PBL) help?. *Physical Education and Sport Pedagogy*, 11(2), 181-202.
- Jones, R. L. (2009). Coaching as caring (the smiling gallery): Accessing hidden knowledge. *Physical education and sport pedagogy*, 14(4), 377-390.
- Jones, R. L., Potrac, P., Cushion, C., & Ronglan, L. T. (Eds.). (2011). *The sociology of sports coaching* (pp. 15-26). London: Routledge.
- Jones, I., Brown, L., & Holloway, I. (2012). *Qualitative research in sport and physical activity*. Sage.
- Jones, L., Parker, A., & Daniels, G. (2020). *Sports Chaplaincy, Theology and Social Theory Disrupting Performance-Based Identity in Elite Sporting Contexts*. *Religions*, 11(12), 660.
- Jones, R. L., & Wallace, M. (2005). Another bad day at the training ground: Coping with ambiguity in the coaching context. *Sport, education and society*, 10(1), 119-134
- Jones, R. L., Glintmeyer, N., & McKenzie, A. (2005). Slim bodies, eating disorders and the coach-athlete relationship: A tale of identity creation and disruption. *International review for the sociology of sport*, 40(3), 377-391.
- Josselson, R. (2013). *Interviewing for qualitative inquiry: A relational approach*. Guilford Press.
- Jowett, S., & Poczwardowski, A. (2007). *Understanding the coach-athlete relationship*.
- Joy, E., Kussman, A., & Nattiv, A. (2016). Update on eating disorders in athletes: A comprehensive narrative review with a focus on clinical assessment and management. *British journal of sports medicine*, 50(3), 154-162.
- Kahn, R. L., Wolfe, D. M., Quinn, R. P., Snoek, J. D., & Rosenthal, R. A. (1964). *Organizational stress: Studies in role conflict and ambiguity*.
- Kelchtermans, G. (1993). Getting the story, understanding the lives: From career stories to teachers' professional development. *Teaching and teacher education*, 9(5-6), 443-456.
- Kelchtermans, G. (1996). Teacher vulnerability: Understanding its moral and political roots. *Cambridge journal of education*, 26(3), 307-323.
- Kelchtermans, G., & Ballet, K. (2002). The micropolitics of teacher induction. A narrative-biographical study on teacher socialisation. *Teaching and teacher education*, 18(1), 105-120.
- Kelchtermans, G. (2005). Teachers' emotions in educational reforms: Self-understanding, vulnerable commitment and micropolitical literacy. *Teaching and teacher education*, 21(8), 995-1006.

- Kelchtermans, G. (2009). Career stories as gateway to understanding teacher development. *In Teachers' career trajectories and work lives* (pp. 29-47). Springer, Dordrecht.
- Kidman, L., & Lombardo, B. (2010). Athlete-centered coaching. *Developing decision makers* (2nd ed.). Worcester: Innovative Print Communications Ltd.
- King, N., Horrocks, C., & Brooks, J. (2018). *Interviews in qualitative research*. Sage.
- King, A., Parker, A., & Hemmings, B. (2020). *Sports Chaplaincy in Women's International Soccer Pastoral: Care, Emotional Wellbeing, and Holistic Support*.
- Kim, K. (2019). Role and Perspective of Sport Science in Health Promotion and Elite Sport. *The Asian Journal of Kinesiology*, 21(2), 31-39.
- Kjær, J. B., Bjärsholm, D., Fahlström, P. G., & Linnér, S. (2022). Breaking through? Exploring care in the early life of elite Swedish athletes. *Sports Coaching Review*, 1-19.
- Knust, S. K., & Fisher, L. A. (2015). NCAA Division I female head coaches' experiences of exemplary care within coaching. *International Sport Coaching Journal*, 2(2), 94-107.
- Kola-Palmer, S., Buckley, S., Kingston, G., Stephen, J., Rodriguez, A., Sherretts, N., & Lewis, K. (2019). "Someone to Talk to": Influence of Player Welfare Provision on Mental Health in Professional Rugby League Players. *Journal of Clinical Sport Psychology*, 13(3), 486-503.
- Kola-Palmer, S., Lewis, K., Rodriguez, A., & Kola-Palmer, D. (2020). Help-seeking for mental health issues in professional rugby league players. *Frontiers in psychology*, 11, 2500.
- Knight, C. J., Harwood, C. G., & Gould, D. (2017). An introduction to sport psychology for young athletes. *In Sport psychology for young athletes* (pp. 1-6). Routledge.
- Kristiansen, E., Roberts, G. C., & Sisjord, M. K. (2011). Coping with negative media content: The experiences of professional football goalkeepers. *International Journal of Sport and Exercise Psychology*, 9(4), 295-307.
- Kvale, S., & Brinkman, S. (2009). Interview quality. *Interviews: Learning the craft of qualitative research interviewing*, 161-175.
- Lang, M., & Hartill, M. (Eds.). (2014). *Safeguarding, child protection and abuse in sport: International perspectives in research, policy, and practice*. Routledge.
- Lang, M. (2015). "None of the Kids are Allowed to Eat Junk at the Pool": Discourses of "Optimal Nutrition" in Competitive Youth Swimming and the Impact on Athlete Welfare. *The International Journal of Sport and Society*, 5(1), 11-22.
- Larkin, D., Levy, A., Marchant, D., & Colin, M. (2017). When winners need help: Mental health in elite sport. *The Psychologist*, 30, 42-47.

- Lemyre, P. N., Roberts, G. C., & Stray-Gundersen, J. (2007). Motivation, overtraining, and burnout: Can self-determined motivation predict overtraining and burnout in elite athletes? *European Journal of Sport Science*, 7(2), 115-126.
- Lewis, K., Rodriguez, A., Sherretts, N., & Kola, S. (2016). *Super League Player Welfare Study: A Mixed Method Evaluation*.
- Lewis, K., Rodriguez, A., Kola-Palmer, S., & Sherretts, N. (2018). 'It's not mind blowing really.... it's about keeping people happy': the perceptions of player welfare managers in Rugby Super League. *Qualitative Research in Sport, Exercise and Health*, 10(5), 635-654.
- Lewis, C. J., Sawiuk, R., & Grimes, S. M. (2022). "It looks like he cares, but he doesn't.": athletes' experiences of "good" and "bad" care in women's football. *Sports Coaching Review*, 1-16
- Lindgren, E. C., & Barker-Ruchti, N. (2017). Balancing performance-based expectations with a holistic perspective on coaching: A qualitative study of Swedish women's national football team coaches' practice experiences. *International journal of qualitative studies on health and well-being*, 12, 1358580.
- Lloyd, R. S., & Oliver, J. L. (Eds.). (2019). *Strength and conditioning for young athletes: science and application*. Routledge.
- Lyle, J., & Cushion, C. (2016). *Sport coaching concepts: A framework for coaching practice*. Routledge.
- Manley, A., Palmer, C., & Roderick, M. (2012). Disciplinary power, the oligopticon and rhizomatic surveillance in elite sports academies. *Surveillance & society*, 10(3/4), 303-319.
- Markula-Denison, P., & Pringle, R. (2007). *Foucault, sport, and exercise: Power, knowledge and transforming the self*. Routledge.
- Markula, P., & Silk, M. L. (2011). *Qualitative research for physical culture* (p. 252). London: Palgrave Macmillan.
- Martin, S. B. (2005). High school and college athletes' attitudes toward sport psychology consulting. *Journal of Applied Sport Psychology*, 17(2), 127-139.
- Martin, S. J., & Anderson, T. (2019). Help-seeking for eating pathology among collegiate athletes: examining stigma and perfectionism as moderating and mediating mechanisms. *Journal of Clinical Sport Psychology*, 14(3), 234-250.
- Mason, J. (2017). *Qualitative researching*. sage.
- Masten, R., Stražar, K., Žilavec, I., Tušak, M., & Kandare, M. (2014). Psychological response of athletes to injury. *Kinesiology*, 46(1.), 127-134.
- McCann, S. (2008). At the Olympics, everything is a performance issue. *International Journal of Sport and exercise psychology*, 6(3), 267-276.

- McCormack, H. M., MacIntyre, T. E., O'Shea, D., Campbell, M. J., & Igou, E. R. (2015). Practicing what we preach: investigating the role of social support in sport psychologists' well-being. *Frontiers in psychology*, 6, 1854.
- McDuff, D., Stull, T., Castaldelli-Maia, J. M., Hitchcock, M. E., Hainline, B., & Reardon, C. L. (2019). Recreational and ergogenic substance use and substance use disorders in elite athletes: a narrative review. *British journal of sports medicine*, 53(12), 754-760.
- McKay, J., Niven, A. G., Lavallee, D., & White, A. (2008). Sources of strain among elite UK track athletes. *The Sport Psychologist*, 22(2), 143-163.
- McMahon, J., & Dinan Thompson, M. (2008). A malleable body: Revelations from an elite Australian swimmer. *ACHPER Australia healthy lifestyles journal*, 55(1), 23-28.
- McMahon, J., Penney, D., & Dinan-Thompson, M. (2012). Body practices—exposure and effect of a sporting culture? *Stories from three Australian swimmers. Sport, education, and society*, 17(2), 181-206.
- McMahon, J. (2020). Eating disorders and disordered eating in sport. *Routledge Handbook of Athlete Welfare*, 173.
- McManus, A. M., & Armstrong, N. (2011). Physiology of elite young female athletes. *The elite young athlete*, 56, 23-46.
- Mellalieu, S. D., Neil, R., Hanton, S., & Fletcher, D. (2009). Competition stress in sport performers: Stressors experienced in the competition environment. *Journal of sports sciences*, 27(7), 729-744.
- Mellner, C. (2016). After-hours availability expectations, work-related smartphone use during leisure, and psychological detachment: The moderating role of boundary control. *International Journal of Workplace Health Management*.
- Miller, P.S. & Kerr, G.A. (2002). Conceptualizing excellence: Past, present, and future. *Journal of Applied Sport Psychology*, 14, 140-153.
- Miller, T. A. (2012). *NSCA's Guide to Tests and Assessments*. Human Kinetics.
- Mind. (2022). *Mental health awareness training for sport and physical training*. Accessed January, 13, 2022. <https://www.mind.org.uk/about-us/our-policy-work/sport-physical-activity-and-mental-health/mental-health-awareness-training-for-sport/>
- Mind. (2022). *Information and Support*. Accessed January, 13, 2022. <https://www.mind.org.uk/information-support/>
- Moll, S. E. (2014). The web of silence: a qualitative case study of early intervention and support for healthcare workers with mental ill-health. *BMC public health*, 14(1), 1-13
- Monsma, E. V., & Malina, R. M. (2004). Correlates of eating disorders risk among female figure skates: a profile of adolescent competitors. *Psychology of Sport and Exercise*, 5(4), 447-460.

- Morse, E. D. (2013). Substance use in athletes. *Clinical sports psychiatry: An international perspective*, 1-12.
- Morton, J., and Roberts, C.-M. (2013). The hurt business: the harsh realities of high-performance sport. *Sport Exercise Science*. 38, 28–29.
- Mummery, K. (2005). Essay: Depression in sport. *The Lancet*, 366, S36-S37.
- Muscat, A. C., & Long, B. C. (2008). Critical comments about body shape and weight: Disordered eating of female athletes and sport participants. *Journal of applied sport psychology*, 20(1), 1-24.
- Neil, R., Wilson, K., Mellalieu, S. D., Hanton, S., & Taylor, J. (2012). Competitive anxiety intensity and interpretation: A two-study investigation into their relationship with performance. *International Journal of Sport and Exercise Psychology*, 10(2), 96-111.
- Nelson, L., Potrac, P., & Groom, R. (Eds.). (2014). *Research methods in sports coaching*. London: Routledge.
- Nesti, M., & Sulley, C. (2014). *Youth development in football: Lessons from the world's best academies*. Routledge.
- Newton, M., Fry, M., Watson, D., Gano-Overway, L., Kim, M. S., Magyar, M., & Guivernau, M. (2007). Psychometric properties of the caring climate scale in a physical activity setting. *Revista de Psicología del Deporte*, 16(1), 67-84.
- Nicholls, A. R., Holt, N. L., Polman, R. C., & Bloomfield, J. (2006). Stressors, coping, and coping effectiveness among professional rugby union players. *The Sport Psychologist*, 20(3), 314-329.
- Noddings, N. (1988). An Ethic of Caring and Its Implications for Instructional Arrangements. *American Journal of Education*, 96(2), 215-230. doi: 10.1086/443894
- Noddings, N. (2002). *Starting at home: Caring and social policy*. Univ of California Press.
- Noddings, N. (2003). *Caring: A feminine approach to ethics and moral education* (2nd ed.). University of California Press.
- Noddings, N. (2005). *The Challenge to care in schools: An Alternative Approach to Education* (2 ed.). New York: Teachers College Press.
- Noddings, N. (2010). *Complexity in caring and empathy*. Abstracta, Special Issue V, 6-12
- Noddings, N. (2012). The caring relation in teaching. *Oxford review of education*, 38(6), 771-781.
- O'Donoghue, P. (2009). *Research methods for sports performance analysis*. Routledge.

- Oliffe, J. L., Kelly, M. T., Gonzalez Montaner, G., & Yu Ko, W. F. (2021). Zoom interviews: benefits and concessions. *International Journal of Qualitative Methods*, 20, 16094069211053522
- Oliver, M., & Parker, A. (2019). Safeguarding, Chaplaincy and English Professional Football. *Religions*, 10(10), 543.
- Olmos-Vega, F.m., Stalmeijer, R. E., Varpio, L., & Kahlke, R. (2023). A practical guide to reflexivity in qualitative research: *AMEE Guide No. 149. Medical Teacher*, 45 (3), 241-251.
- Olson-Buchanan, J. B., & Boswell, W. R. (2004). Correlates and Consequences of Being Tied to an 'Electronic Leash'. *In meeting of the Society for Industrial and Organizational Psychology*.
- Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and policy in mental health and mental health services research*, 42(5), 533-544.
- Park, S., Lavalley, D., & Tod, D. (2013). Athletes' career transition out of sport: A systematic review. *International review of sport and exercise psychology*, 6(1), 22-53.
- Parker, Andrew, Nick J. Watson, and John B. White, eds. 2016. *Sports Chaplaincy: Trends, Issues and Debates*. London: Routledge.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods*. SAGE Publications, inc
- Peel, J., Cropley, B., Hanton, S., & Fleming, S. (2013). Learning through reflection: Values, conflicts, and role interactions of a youth sport coach. *Reflective practice*, 14(6), 729-742.
- Peluso, M. A. M., & Andrade, L. H. S. G. D. (2005). Physical activity and mental health: the association between exercise and mood. *Clinics*, 60, 61-70.
- Potrac, P., Jones, R., & Armour, K. (2002). 'It's All About Getting Respect': The Coaching Behaviors of an Expert English Soccer Coach. *Sport, education, and society*, 7(2), 183-202.
- Potrac, P., & Jones, R. L. (2009). Micropolitical workings in semi-professional football. *Sociology of sport journal*, 26(4), 557-577.
- Premier League. (2021). *Elite Player Performance Plan*. Accessed January 11, 2022. <https://www.premierleague.com/youth/EPPP>
- Preston, C., & Fraser-Thomas, J. (2011). Aggression, coach goal-orientation and success in minor hockey. *Unpublished manuscript*. York University.
- Preston, C. (2013). Elite athletes' experiences of athlete-centred coaching (*Doctoral dissertation*).
- Purdy, L. G., & Jones, R. L. (2011). Choppy waters: Elite rowers' perceptions of coaching. *Sociology of sport journal*, 28(3), 329-346.

- Purdy, L., & Jones, R. (2013). Changing personas and evolving identities: The contestation and renegotiation of researcher roles in fieldwork. *Sport, Education and Society*, 18(3), 292-310.
- Purdy, L. (2014). *Interviewing. Research methods in sports coaching*. London: Routledge.
- Purdy, L. G., & Potrac, P. (2016). Am I just not good enough? The creation, development and questioning of a high performance coaching identity. *Sport, Education and Society*, 21(5), 778-795.
- Randall, W. L., & Phoenix, C. (2009). The problem with truth in qualitative interviews: reflections from a narrative perspective. *Qualitative research in sport and exercise*, 1(2), 125-140.
- Rice, S. M., Purcell, R., De Silva, S., Mawren, D., McGorry, P. D., & Parker, A. G. (2016). The mental health of elite athletes: a narrative systematic review. *Sports medicine*, 46(9), 1333-1353.
- Rice, S. M., Gwyther, K., Santesteban-Echarri, O., Baron, D., Gorczynski, P., Gouttebauge, V., Purcell, R. (2019). Determinants of anxiety in elite athletes: a systematic review and meta-analysis. *British journal of sports medicine*, 53(11), 722-730.
- Rickwood, D., Thomas, K., & Bradford, S. (2012). Help-seeking measures in mental health: a rapid review. *Sax Inst*, 1, 35.
- Roberts, C. M., Faull, A. L., & Tod, D. (2016). Blurred lines: Performance enhancement, common mental disorders and referral in the UK athletic population. *Frontiers in psychology*, 7, 1067
- Roberts, B. (2019). *Micro social theory*. Bloomsbury Publishing.
- Robinson, O. C. (2014). Sampling in interview-based qualitative research: A theoretical and practical guide. *Qualitative research in psychology*, 11(1), 25-41.
- Roderick, M. (2006a). *The work of professional football*. Taylor & Francis.
- Roderick, M. (2006b). A very precarious profession: Uncertainty in the working lives of professional footballers. *Work, employment, and society*, 20(2), 245-265.
- Roderick, M. (2014). From identification to dis-identification: Case studies of job loss in professional football. *Qualitative research in sport, exercise and health*, 6(2), 143-160.
- Roe, C., & Parker, A. (2016). Sport, chaplaincy and holistic support: The elite player performance plan (EPPP) in English professional football. *Practical theology*, 9(3), 169-182.
- Roller, M. R., & Lavrakas, P. J. (2015). *Applied qualitative research design: A total quality framework approach*. Guilford Publications.
- Rosendahl J, Bormann B, Aschenbrenner K, et al. Dieting and disordered eating in German high school athletes and non- athletes. *Scand J Med Sci Sports*. 2009;19(5):731–9.

Rugby-League.com. (2021). *Player Welfare*. Accessed January 11, 2022. <https://www.rugby-league.com/governance/safeguarding/player-welfare>

Rugby League Cares. (2021). *Player Welfare Programme*. Accessed January, 13, 2022. <https://www.rugbyleaguecares.org/what-we-do/help-for-players/player-welfare-programme/>

Ryan, B. (2015). *A Very Modern Ministry*. London: Theos.

Salmons, J. (2015). *Qualitative online interviews*. London.

Savage, S., & Bailey, S. (2004). The impact of caring on caregivers' mental health: a review of the literature. *Australian health review*, 27(1).

Shield, A. J., & Bourne, M. N. (2018). Hamstring injury prevention practices in elite sport: evidence for eccentric strength vs. lumbo-pelvic training. *Sports medicine*, 48(3), 513-524.

Silverman, D. (Ed.). (2020). *Qualitative research*. Sage.

Slote, M. (2007). *The ethics of care and empathy*. Routledge

Smith, J. K. (1989). *The Nature of Social and Educational Inquiry Empiricism Versus Interpretation*.

Smith, B., & Sparkes, A. C. (2008). Contrasting perspectives on narrating selves and identities: An invitation to dialogue. *Qualitative research*, 8(1), 5-35.

Smith, B., & Sparkes, A. C. (2012). Narrative analysis in sport and physical culture. In *Qualitative research on sport and physical culture*. Emerald Group Publishing Limited.

Smith, B. (2013). Imagining being disabled through playing sport: The body and alterity as limits to imagining others' lives. In *Ethics, Disability and Sports* (pp. 64-79). Routledge.

Smith, B., & McGannon, K. R. (2018). Developing rigor in qualitative research: Problems and opportunities within sport and exercise psychology. *International review of sport and exercise psychology*, 11(1), 101-121.

Smith, B., & Sparkes, A. C. (2016). Interviews: Qualitative interviewing in the sport and exercise sciences. In *Routledge handbook of qualitative research in sport and exercise* (pp. 125-145). Routledge.

Smith, B., & Sparkes, A. C. (2020). Qualitative research. *Handbook of sport psychology*, 999-1019.

Skinner, J., Edwards, A., & Smith, A. C. (2020). *Qualitative research in sport management*. Routledge.

Smith, M. (2022). *Rooney (film)*. Lorton Production.

Sonnentag, S., & Fritz, C. (2007). The Recovery Experience Questionnaire: development and validation of a measure for assessing recuperation and unwinding from work. *Journal of occupational health psychology*, 12(3), 204.

Sonnentag, S., Mojza, E. J., Binnewies, C., & Scholl, A. (2008). Being engaged at work and detached at home: A week-level study on work engagement, psychological detachment, and affect. *Work & Stress*, 22(3), 257-276.

Sonnentag, S., & Niessen, C. (2020). To detach or not to detach? Two experimental studies on the affective consequences of detaching from work during non-work time. *Frontiers in Psychology*, 2502.

Souter, G., Lewis, R., & Serrant, L. (2018). Men, mental health, and elite sport: A narrative review. *Sports medicine-open*, 4(1), 1-8.

Sparkes, A. (Ed.). (1992). *Research in physical education and sport: Exploring alternative visions*. Psychology Press.

Sparkes, A. C., & Smith, B. (2013). Qualitative research methods in sport, exercise, and health: *From process to product*. Routledge.

Stambulova, N. B., and P. Wylleman. (2014). "Athletes' Career Development and Transitions." In *Routledge Companion to Sport and Exercise Psychology*, edited by A. Papaioannou and D. Hackfort, 605–620. UK: Routledge

Stambulova, N. B. (2016). Theoretical developments in career transition research: Contributions of European sport psychology. In *Sport and Exercise Psychology Research* (pp. 251-268). Academic Press.

Stambulova, N. B. (2017). Crisis-transitions in athletes: Current emphases on cognitive and contextual factors. *Current opinion in psychology*, 16, 62-66.

Stead, D. (2003). Sport and the Media. *Sport and society: A student introduction*, 184-200.

Stewart, D. W., & Shamdasani, P. N. (2014). *Focus groups: Theory and practice* (Vol. 20). Sage publications.

St John Ambulance. (2021). *Mental Health First Aid Training Courses*. Accessed January, 13, 2022. https://www.sja.org.uk/courses/workplace-mental-health-first-aid/?gclid=EAIaIQobChMIo8jXxr2u9QIVE-vtCh26tA9hEAAYAiAAEgL6QvD_BwE&gclsrc=aw.ds

Tanner, R., & Gore, C. (2012). *Physiological tests for elite athletes*. Human kinetics.

Taylor, J., & Taylor, S. (1997). *Psychological approaches to sports injury rehabilitation*. Lippincott Williams & Wilkins.

The Boot Room. The FA. (2021). *Welfare Officer Course*. Accessed January, 13, 2022. <https://thebootroom.thefa.com/learning/qualifications/welfare-officers-course>

The FA, Football Leadership Diversity Code. (2022). *Watford Academy Player Care and Welfare Officer*. Accessed January, 13, 2022.
https://www.fldccareers.com/vacancies/vacancy_academy_player_care_and_welfare_officer_439907_35.html

The FA. (2022). *Football's Safeguarding Framework*. Accessed August, 19, 2022.
<https://www.thefa.com/football-rules-governance/safeguarding/section-1-footballs-safeguarding-framework>

Thompson, A., Potrac, P., & Jones, R. (2015). 'I found out the hard way': Micro-political workings in professional football. *Sport, education, and society*, 20(8), 976-994.

Threlfall-Holmes, M. (2011). Exploring Models of Chaplaincy. *Being a Chaplain*. London: SPCK, 116-126.

Tinning, R. (2008). Pedagogy, sport pedagogy, and the field of kinesiology. *Quest*, 60(3), 405-424.

Thomas, D.R. (2003). *A general inductive approach for qualitative data analysis*.

Toner, J., & Moran, A. (2014). 14 Judging quantitative research. *Research Methods in Sports Coaching*, 147

Tronto J. (1993) *Moral Boundaries, a Political Argument for an Ethic of Care*. Routledge, New York.

Torregrossa, M., Regüela, S., & Mateos, M. (2020). Career assistance programs. *The Routledge international encyclopedia of sport and exercise psychology*. London: Routledge.

Tubre, T. C., & Collins, J. M. (2000). Jackson and Schuler (1985) revisited: A meta-analysis of the relationships between role ambiguity, role conflict, and job performance. *Journal of management*, 26(1), 155-169.

Tuckett, A. G. (2005). Applying thematic analysis theory to practice: A researcher's experience. *Contemporary nurse*, 19(1-2), 75-87.

Turnbull, P. J., & Wass, V. (2015). Normalizing extreme work in the Police Service? Austerity and the inspecting ranks. *Organization*, 22(4), 512-529

Varol, Y. Z., Weiher, G. M., Wendsche, J., & Lohmann-Haislah, A. (2021). Difficulties detaching psychologically from work among German teachers: prevalence, risk factors and health outcomes within a cross-sectional and national representative employee survey. *BMC Public Health*, 21(1), 1-15.

Wahto, R. S., Swift, J. K., & Whipple, J. L. (2016). The role of stigma and referral source in predicting college student-athletes' attitudes toward psychological help-seeking. *Journal of Clinical Sport Psychology*, 10(2), 85-98.

Walker, N., & Thatcher, J. (2011). The emotional response to athletic injury: Re-injury anxiety. In *Coping and emotion in sport* (pp. 236-260). Routledge.

Waller, S. N. (2016). Chaplain or Sports Chaplain First?: Why Identity Formation Should Matter to Sports Chaplains. *Practical Theology*, 9(3), 242-257.

Weinmann, T., Thomas, S., Brilmayer, S., Heinrich, S., & Radon, K. (2012). Testing Skype as an interview method in epidemiologic research: response and feasibility. *International journal of public health*, 57(6), 959-961.

Weller, S. (2017). Using internet video calls in qualitative (longitudinal) interviews: Some implications for rapport. *International Journal of Social Research Methodology*, 20(6), 613-625.

Williams, M. (2000). Interpretivism and generalisation. *Sociology*, 34(2), 209-224.

Wolanin, A., Gross, M., & Hong, E. (2015). Depression in athletes: prevalence and risk factors. *Current sports medicine reports*, 14(1), 56-60.

Wylleman, P., & Lavallee, D. (2004). A developmental perspective on transitions faced by athletes. *Developmental sport and exercise psychology: A lifespan perspective*, 507-527.

Wylleman, P., Alfermann, D., & Lavallee, D. (2004). Career transitions in sport: European perspectives. *Psychology of sport and exercise*, 5(1), 7-20.

Chapter 10: Appendices

Appendix A: Approval of Ethics



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PRIVATE AND CONFIDENTIAL

Caitlin Card
Faculty of Health Sciences
University of Hull
Via email

9th February 2022

Dear Caitlin

REF FHS403 - Exploring the lived experience of welfare officers within elite sport.

Thank you for submitting your ethics Form A to the Faculty of Health Sciences Research Ethics Committee.

Given the information you have provided I confirm approval by Chair's action.

Please refer to the [Research Ethics Committee](#) web page for reporting requirements in the event of any amendments to your study.

Should an Adverse Event need to be reported, please complete the [Adverse Event Form](#) and send it to the Research Ethics Committee FHS-ethicssubmissions@hull.ac.uk within 15 days of the Chief Investigator becoming aware of the event.

I wish you every success with your study.

Yours sincerely

Professor Liz Walker
Chair, FHS Research Ethics Committee



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Appendix B: Interview Guide

Interview Guide

Defining a player care and welfare officer

- 1. Please can you tell me about your defined job role within the club and what motivated you to take this role on board?**
 - Benefit of job role in a sporting environment, What job entails
- 2. Please tell me about the training/preparation you underwent for this job role.**
 - Qualifications/training exercises, Preparing independently (barriers)
 - Improvements to system (extra support for PWO)
- 3. Why do you think this job role is less acknowledged among different sporting environments?**
 - Playing levels, can it be improved?

Personal accounts

- 1. Please can you tell me about the most popular concerns that arise surrounding mental health within a sporting environment?**
 - Why these occur, transitioning, spot these early? how? Depression and anxiety etc
- 2. What support does your job role offer to athletes when these concerns arise and what procedures do you follow to help prevent escalation?**
 - Further help, educational programmes
- 3. From personal experiences, please tell me why you think some athletes are reluctant to seek help.**
 - Fear, raise awareness, relationship building psychologist/chaplaincy/coaches.

Opinions on mental health and caring in sport.

- 1. Why do you think there has been an increase in mental health disorders among athletes?**
 - Differ playing level, gender, pressure, triggers.
- 2. Please tell me about your opinions surrounding stigmas within sport and how you think these can affect an athlete (e.g., rugby 'men's sport', Football 'play like a girl' 'get up, you're not hurt')**
 - Athletes prepared to hear these. Popular at elite level? Affect seeking help?

- 3. Lastly, can you tell me about your perspective on gender and your job role in relation to whether you think athletes are increasingly likely to approach a female PWO and whether you think approachability is determined by an individual?**
- Caring nature maternal/adopted, feel intimidated by males in certain sports? Is caring seen as important or need a balance to not emotionally invest?