

Participant 1

I: First of all, can you please just detail your experience with professional sports, so any notable teams or roles etc., that you might have had?

P: And so I've worked in a variety of different spots. I worked for a football team that I think they'd call themselves professionals. But they were in conference north at the time, but they'd been taken over by a multimillionaire who wanted psych. Well, he didn't want psych, he just wanted it to be them to be able to move up to the National League so, looking at what support that they could get. And it was my hometown. So I'm sure we'll talk about that in a bit. So worked in football, worked with professional skier, worked with swimming, lacrosse... Yes, I've worked with tennis players and athletics. Sorry, I've worked with a power athlete. She didn't actually make it to Rio, but she was sponsored as a 500 metre runner she partially sighted. So worked across quite a range of sports. And more recently, I've started working in dressage.

I: Have you ever found throughout that experience you've come across anyone who's willing to discuss mental health issues, so if you had to deal with them directly?

P: So recently, the dressage athlete – he'd just been on – so he's from a working class environment and dressage is an elite, really elitist sport. You need to have a lot of money to to be in that environment. So basically, he'd gone and work for four months down south in this town somewhere in this training camp. Just so he's working there, but just to get access to the coaching and the horses, and the horses are like 70 grand horses. Yeah, and he's like as northern as you can get. It's kind of a really nice story because he dropped out of school at like 14 and then got back into school through like, what's it called, like, he went to [confidential] college. So it's kind of is a really high level for where you can get to So anyways, going on this four month, kind of internship and he said, he didn't want to get back on a horse because the way he was spoken to, the way he was treated. He just felt – and his mum basically got in touch and said I think he's suffering from burnout. And he's had a really traumatising experience, and will you just have a chat with him. So that's kind of where that started. So he openly admitted that he was struggling with burnout. He didn't want to get back on the horse. And then so burnout, probably the most common thing of what I experienced with athletes. A skier I was working with, she was in a stage where she couldn't get out of bed in the morning. So she was English, but to be a skier, they have to live in Austria and travel around the world to different parts where there's snow. It was costing 25 grand a year just for her to maintain her ski career. She had a sponsor, but her parents paid a lot of that money. So she was like, I don't even know if I'm gonna make it. And people are investing a lot of money in me. So she'd come and go and I worked with her like, three or four years. So she'd only just get in touch with me when she wanted someone to speak to. And when she was listing all these characteristics, it was just like, you know, borderline depressive, depression, and all these burnout symptoms. And so they're more like, the probably most common kind of mental health related things that I've experienced. Within football, not really...

I: Why do you think that is?

P: I worked with one lad had come back from injury. So it's not mental health specific. But he struggled with anxiety coming back because he was worried about reinjury and that was affecting his performance. But link into something from earlier, I remember the manager saying, we're just going to get rid of them soon, because it's just wasting our money. We can just replace them with somebody else. And I think that's the exact reason why it's not really talked about in football, because they're disposable and that's the way I see it. And it was really interesting, because I stopped working at that club, because the owner was like, well, why hasn't she sorted him out? I only worked mostly with the manager, and only a couple players. And he was one of the players I worked with. And I remember I only had a couple of meetings with him. And then the Christmas period, they play a lot of matches over Christmas. So I didn't get chance to work with the team or the individuals for about three weeks. So I haven't actually done anything with them. They lost a few games. And he hadn't played well and came back to me Well, what is she doing to improve? I don't know if they want to make an example and use me as the scapegoat. I kind of unofficially got fired because they didn't say I was having any value.

I: It's interesting that he was expecting something like that from something so subjective.

P: Me and the manager had a really good relationship. And I remember, he said to me, like I feel like I'm divorcing my wife, it was so uncomfortable, and I could feel it coming like I could sense that was what he was gonna say. And he was so twitchy and awkward and I had a really good relationship with him and he was devastated. I helped him probably the most. I worked with him the most, but because he would ring me every week and literally just tell me his thoughts about the team about why he's playing certain players and ask my opinion on stuff. But then he wouldn't admit that. I know, he would never admit that to the owner. Because he would look weak then. The manager speaking to, at the time, I was 27, like a younger woman. So I don't think he stood up for me and said, no, no, she is doing a good job, because he didn't want to jeopardise his own job. So that was interesting. But he moved on to another club and then got in touch with me. But again, it was more helping him or I did a lot of observations when he moved around his feeding back information to him about different players.

I: So in your opinion, have you found the current or previous mental health provision in professional sports to be useful or successful in any way? Something in place that is ready made to support athletes?

P: So, I'm not aware of anything in the sports that I've worked in. When I was doing some work for [confidential] they have a chaplain. Someone that people just go and have a chat with. So that's kind of the only support system. I remember listening to [confidential] they had someone like that, that they would go and speak to because she talks a lot about mental health. And her wife in particular, so I think that person is just someone to talk to. But within the sports that I specifically worked in, apart from, as I say [confidential], I'd say not really.

I: Why do you think that is? Do you think it's an awareness thing from the athletes? Or is it something maybe national governing bodies could do better?

P: I think the people that I've worked with think mental health, like depression, even anxiety, and you know, anything even more serious than that it just goes to the GP.

I: So, they'll refer them? Or refer themselves?

P: So you think about where I've worked, it's largely work with individual athletes who've come and approached me for performance gains, rather than anything around mental health. And if I'm honest, if an athlete came to me and said, I'm struggling with, you know, severe depression, I would say, I can't support you with that. But try and find someone who was more qualified in that area, because I'm trained as a sports psychologist it's more geared around performance development. I think that I would be treading a dangerous line if I was trying to, you know, counsel, someone we've got issues outside of the sport. I could listen. And yeah, and be like someone to speak to and listen to, and to listen to them. But I would be really uneasy about, you know, recommending certain things with serious mental health issues.

I: How would you try to enhance understanding of mental health issues in athletes?

P: So one thing that I do is I share literature with athletes. So if I think someone might be struggling without burnout, for example, I'll send them kind of less academic stuff, easy to understand. And I'll just say have a read of that. And help them kind of understand themselves more in terms of what I think needs to be, I think so I've... I've done my sports psych training with the BPS. And so I'm a qualified Sport and Exercise psychologist. And I've done very minimal, if anything on mental health.

I: So do you think that's something to do with the provision elements of your own training. Do you think that's something that's missing?

P: Yeah. Yeah. And we have a viva at the end of that qualification, and you get challenged on like, your, your ethics, your philosophy, your approaches. And, and we have to talk about our own self care, but then we don't really talk about you know, even what would you do if you get an athlete who you think severely depressed or a risk to themselves? The easy answer is referring to the GP, so I've only become more aware of certain things through like having to read myself and go off and kind of learn about myself. I think there are, I'm sure the BPS do run certain workshops.

I: But is it something where maybe even the training could cross over into clinical elements?

P: I think it could. What was funny, because in my viva all they kept talking to me about was performance, like what if you work with an elite level athlete who's a narcissist and you know, like, I've never worked with the best athletes in the world. And I can imagine that some of it to be the best athlete in the world. There's some non-normal things that you might have to engage in. And my response to that is I don't want to be part of unethical behaviour or there's the big question as a sports psychologist, would you be prepared to do unethical things? And compromising someone's mental health is part of that. And going back to your original question, I think that because as sport psychologists we're kind of traditionally taught, it's all about performance. It's kind of like, well, we don't really care

about mental health, because we're just here to make someone a better athlete. And sometimes that gets forgotten about.

I: What do you think the athletes perception of mental health issues is? You think they're aware of them? Or do you think it's something that's sort of less regarded?

P: So now, it's I think, the media and, you know, mental health is a big topic, isn't it now, but I do think that athletes, especially elite athletes, they're worried about, you don't want to admit that they've suffering from different things, because they're replaceable, a lot of them. Yeah, it's just a commodity that especially and we've seen, like in cycling, what was it? The coach said, I think she's one of the athletes didn't qualify anywhere, oh you can go off and have babies now.

I always hear people say, and I have arguments with my family if they say, well, they earn that much money, they should be prepared to put up with that. That's what you get for earning that much money. Well they're humans at the end of the day, so with [confidential], a really good example. It's like, you've got feelings, and it hurts them when people criticise them.

I: What do athletes perceive mental health is? Is it stigmatised for them or disregarded for performance?

P: I think they perceive it as a weakness. And yeah, I think I'm generalising, but I think a lot of elite athletes see it as a hindrance. I think some people think it's part of the job of being an elite athlete is dealing with these high pressure, this high pressure and you see some elite athletes with bags under their eyes, they look absolutely shattered all the time. But I think there's this kind of rhetoric that that's the price you pay now to become a an elite level athlete. They think it comes with the job... So, I had a debate in my viva with [confidential]. So he's been the director [confidential]. Because I was saying, you know, as a sport psychologist, I'm all about developing the individual. It's not just about the sport, he's basically telling me I was wrong. And saying that, to be a high performance athlete, you need to sacrifice, and you will work with people who are like narcissistic, who do neglect everything else in the life apart from the sport. And that's alright. Because to be the best athlete in the world, you're not a normal person. And I just thought, Well, if that's the view of like, every elite coach, who's pushing it onto an elite athlete, then you're going to have a lot of damage people. But I appreciate that it takes a lot to become an elite athlete. But there is evidence that people can be healthy, and still be an elite athletes, but I just think that them kind of people need to be promoted more.

I: What age group do you feel would benefit most from understanding or being educated on mental health issues?

P: I think it's important to start quite young. I can see how, you know, some athletes will start to develop mental health issues later and kind of question why they're developing them. And am I normal? Is this normal? But if you know, they're educated from younger ages and told you know, there is the high chance that you might experience these feelings. And then when they start to experience it they know, it's okay and can seek support. And so yeah, I mean, it depends if you're going to educate them from a school perspective, or in the

sport or whatever, but I do think that it should be kind of part of the development. Who delivers that is another question. Because, again, that the coach's job becomes bigger doesn't it. And not all young athletes have sports psychologists.

I: Do you think there's that element that there should be some sort of incorporation of professional to sort of lighten that load or deliver that?

P: I think so. There's a lot of stuff in coaching and coach education now. So if you're on the UK coaching website website. There are a lot of online materials for coaches to be aware of mental health. It's awareness raising, so for coaches to be able to identify it within their athletes.

I: Is that like workshops and stuff that they get signed off on? Or is it something they just volunteer for?

P: So it's a bit of both where you can, I don't know if you're an FA coach, to get your level three, you might have to do so many online modules for UK coaching, otherwise, you or I can register and we can do pay plan and do an online mental health awareness workshop. Just because we want to educate ourselves. If NGBs make that compulsory for all coaches. So if you do level two or whatever and have to do this as well, and I think that would definitely be a step in the right direction.

And then later on, I'm going a bit off topic here. But if like mental health and young people is a hot topic anywhere, and it's all over the news, and in schools, my wife's a teacher, they have to teach a bit more of it now, then you kind of ticking more than just elite athlete boxes. Not all young people are going to become elite athletes.

I: According to research it has been suggested athletes suffer most with their mental health during times of injury. What is your opinion, or perception of well being and mental health support during this time?

P: It depends what sport. I know in football, for example, from my own experience. I think once if an athlete's injured, they think their life is over. I've had one athlete who said to me, I don't want to go to uni and stuff. I'm not clever enough. So it just sets off all his education to pursue football. He gets an injury and he's only 21. And then he's thinking, well plan B, and he hasn't got one. So my nephew's a good example. He's 15, plays rugby for [confidential]. And I do some work with them and they're always telling me how good he is, and his dad was a [confidential] as well, and then I can see it in him he's starting to sack off school a bit and he's just injured his shoulder. And I'm thinking your career could be over right before it's even started.

I: Do you think they're encouraged to do that?

P: So, in Rugby League they're not encouraged to do that. Because they have to stay in school until the age of 18. And even when they sign them at 18 they offer them to do part time degree. So I think [confidential] do a lot. Definitely [confidential] do some stuff with [confidential] for a part time degree there. But I just think the ego and things get carried away with the idea of grandeur of being an elite athlete. And I think they've gone from such

high to they're no more with being injured. I think the social support element is really important. At [confidential] with my nephew, I felt like they handled that really well, because they still brought him into training. They still cared for him. So they still involved him in the training. He wasn't doing the tackling and that kind of stuff. They put him on a bike and get him to do WattBike stuff. So he's still part of the environment and still felt like he was included. It didn't feel like he was a nobody anymore because he was injured. Whereas when I was working football, it was kind of like you can come to training if you want, but you don't need to. And this particular lad, [confidential] then struggled massively getting back on the pitch. That's like he, he doesn't play for that team. Well, he got dropped pretty much straight after, because he wasn't performing. Like he was so anxious coming back on. So you're suffering from paralysis by analysis. So he's overthinking everything, because he was so worried about getting reinjured. And then he was playing pretty shit. So I think it's all about the social support element, whether they're not necessarily having a sports psychologist, just still feeling included, and part of the team I think, are really important.

I: Do you think that's then rooted in anxiety or an issue?

P: Absolutely. So he was so anxious about performing well, and because he's proved himself to be back and fit, that is it's kind of a massively negative effect on his performance. So when we become too invested into the competition you think about it too much because you've got so much resting on that performance. You become so internalised in your thought process everything around just kind of disappears. From a psych perspective you revert back to being a cognitive learner, when you start making a million mistakes, and I see that quite a lot in people coming back from injury.

So [confidential] got a red card in his second game back. And it's just that then added to the stress and anxiety and it just kind of snowballed out of control. And he was just dropped from the team. He had a little girl and he was commuting like four hours to get to his and he lived in [confidential], and driving all that way to [confidential] in Cumbria. But he's actually just graduated with his degree. So, he got dropped from there and moved back to [confidential] to play for more of a local team. And yeah, he had a daughter so obviously spends more time with her now and then he coaches so it's kind of a nice story.

Interestingly, when I worked for [confidential] that season, they won the league. Obviously, not all to do with me. They won the league, so it was like the best thing ever. And I knew this would happen, because the manager told me, like 90% of the team were got rid off. And then they just bought a load of new players. So I'm thinking you're all buzzing you've won the league but you're gonna get dropped from this team as soon as you win. So you're helping them become these league champions, and then the manager's just like he's not good enough, he's not good, he's not good enough for next year. I was just like, oh my god. It's brutal.

I: Yeah. Imagine any other career that happening.

P: Yeah. Sorry, random story. I was getting a new carpet fitted in my house and I was talking to this guy and anyway we got on to the topic of what I do, and it turned out his son who was working with him fitting carpets also played for [confidential] and was fitting carpets just to top up his wage. down the road. So this guy's challenging the proper skills skill set.

And then he's like, we got into this topic. So, if he was gonna get dropped he could go into a full-time carpet fitter. So, it's just negotiating their identities, which is massive. Especially at that level, because some of them were full time, paid full time. Some of them have kind of been part time. And so it's interesting from an identity perspective to observe some of them players, the ones who were full time, like higher up in the hierarchy. And the ones that were paid on a part time basis were nobodies. It was interesting.

I: What's your opinion on how athletes are able to cope within and without sport? Say for example, dealing with injuries, retirement, dealing with pressures, etc.?

P: So I think it's very, very much dependent on where they've come from, their education, what support they've got. So for example, like the skier I worked with, she's coped very well, because she was doing a distance online degree while she was skiing. And so she kind of had a plan B, I guess, but her parents were very well off. She was very intelligent, you could tell that her head screwed on and, and now she works in [confidential], actually I'm not sure – it's not coaching or anything like that. But she's got a job. She studied sport management or something. So she seems to have come out of sport and managed really well. Quite healthy. A social life, job, that kind of thing. Whereas I feel like the footballer, you think is playing in [confidential]. He drove a really nice car is only 20 years old. He's from [confidential], driving a nice car, wearing the nice watch. And he was already on his way out. He could see that he wasn't going to make it. And he was really, really struggling with what he was going to do with his life. Because he hadn't gone to school, he was living with his grandmother. And it didn't seem like there were any opportunities for him either. No one had his back or had anything set up for him. So he was just getting passed around different clubs. But then if you speak to [confidential] she's coped really well, because she had a dual-career. She's got a really good career now. So she's probably earning more money now than she did as an athlete. So it depends what sport you're in as well. Footballers we'll always compare, like finances and salary, because they don't want to go and work a normal job because what they earn a year in a normal job, this is what they see as earning in a week in football. And I think it's the sport dictates what exactly you've just asked me there. I have a lot of conversations with my dad because his son was a professional rugby player who didn't make it. So my brother played Super League rugby got dropped in early to mid 20s then went on to play as semi professional and works as a roofer. I think my dad struggled mentally more than my brother, because he was like yeah, that's life. Moved back to his hometown, married to his partner, two kids lived happily ever after. Whereas My dad was always like you could have made it, that kind of thing. So I think because my brother had like his partner and the social support. And coming back to his hometown where he was like famous because then he played for [confidential] as a semi professional rugby player. He still had the identity and carried on, but was just happy with this more simple life.

I: It's interesting, because we're looking at single identity versus dual identity that seems a lot more conducive to reducing or preventing a mental health issue to have this from an earlier age.

P: Yeah, for sure. So, [confidential] studied, did a PGCE and worked as a teacher alongside being an athlete. She said the best year of her career was when he was working as a teacher as well. Which is quite rare, I would assume. But I think because she's managed that dual

identity where there is more to life than sport. And also she's not earning millions of pounds. So... Did you watch Harry's boys?

I: Yeah, yeah.

P: The guy who's got a gambling addiction. Going from people cheering their name every week and 1000s of people to sit at home twiddling their thumbs. And it's that experience of the highs – and [confidential] talks about that the smell of the track on race days, like the feel of it and the supporters cheering for the team. And you can never recreate that. So, I understand when athletes come out of the sport, they're looking for new high because they won't experience that again. Because from a physiological perspective, you experience the adrenaline, dopamine, serotonin just buzzing all over the place. And they will only get that again, possibly from taking drugs. But I'm not advocating that (laughs).

I: And so just building on that, what would you recommend needs the most improvement regarding that support around the transition during and after retirement?

P: That's a big question, isn't it? I think, personally, as a sports psychologist, now I've thought more about it just from having this conversation, is that I'm not qualified from a mental health perspective to support people. So I think as practitioners, we need more education, both coaches and sports psychologists, more awareness. If we're more aware, then we can feed that in to the players and teams. When I work with teams, I always do workshops, you know, more performance-related workshops, but you could feed in a mental health related workshop. So I've taught a lecture to my first years, about how the brain works, how we develop and I had a student come speak to me afterwards and be like, I think I need to speak to somebody, you know, what you said there really resonated with me, I'm struggling with certain things. So even that, make people aware that people experience different things for different reasons. That student's recognised they've possibly got mental health issues. And then I can signpost them to a professional at the university. You could take that example, put it into me working at [confidential] and say these are some of the issues athletes can face, and one or two then might be more comfortable to come and speak to you about some issues that they've got. And I think in terms of the times exiting from the sport, it's really difficult, because how do you prepare for – especially those that are injured – you don't know that you're not going to be an athlete next week.

I: Well, in that sense I suppose the question is twofold in terms of how would you support the athlete in a normative transition? And how would you support them in a forced transition out of the sport?

P: The skier I work with, when she realised she was going to retire, she was only like, 22. I shifted my approach and also, she wanted me to make the decision for her which I said I'm sorry, I can't make that decision. And so we kind of discussed the pros and cons and you know, what was the plan B and all that kind of stuff. But at that point, I realised that my job isn't performance based it's just to make sure that she's a happy, healthy person, and support that process. And so I kind of became more of a life coach in a way rather than a sports psychologist, because it was more around to give her a bit of support with her uni work. Because I guess because I'd known her for so long, we kind of became friends and

stayed in touch. I think the biggest thing there is just social support from other people. She just knew she had someone who understood where she'd come from, what the decisions she had made and why she'd got to and that I wasn't judging her or, you know, I'm just here as someone to support her, I guess. So I do think the biggest, for me, the biggest thing is social support, so it doesn't matter whether you're injured or planning your retirement and having people that are there to support that process is really important.

I: I think it was interesting what you said earlier as well with the person who retired and she's still involved in sport. So that still resonates with that part of her identity as a person.

P: I think that's key. And that's why a lot of athletes become coaches. So a friend of mine was professional netballer, and now is director of netball. So if you look into netball, for example, all the top coaches or directors are ex players. And because they're trying to maintain that identity, and that's all they've known, and I've got a few friends that have been professional netballers and they don't have a pension. They might have an education, because they'll have got scholarships at uni, but they've got no job or work experience, because they've just been playing netball. And the other thing now is like they do a salary, but I think it's like 28 grand a year. And that's if you're the top players, so they've been living and surviving and travelling around the world and stuff. But they get to 33 with no work experience and no pension, and probably no savings. Because it's not like massive salaries, especially when they're living a professional lifestyle. So I think, yeah, maybe education around, it depends what sport you're in, but education around life after sport is needed. But again, I think that the coach can, can be doing that. But there's a conflict there, isn't there? Because if you look at a lot of the research says that athletes who have more of an athlete identity are more successful. But then the stronger the athlete identity, the more difficult it is when they retire. So it's like a contradiction, or a double-edged sword.

I: There is some research by Park suggesting this idea of a retirement plan. So with people who had a narrow athletic identity, ultimately getting to a stage where they activate this process of we're now on a retirement plan to transition out of sport, which I thought was interesting idea.

P: And I think that's a great idea. So I've got a friend who's a professional netballer, and she's 32. I know that she's thinking about retirement, but she won't admit it she won't tell anyone. Because I don't think she knows what she's gonna do next. But one thing that I took for granted is that people will talk about that because it's such a sensitive area. So I asked her and she was just like, I'm not sure what I'm doing. I've got no plans for retirement. I'm thinking she has but she doesn't want to share that because it's a sensitive thing. Yeah, so it's like well, this is all have been known as, as a netballer. So yeah, that's all she's been known as from the age of 12. Yeah, it's tough. Like I've never been an elite athlete, but I used to play national league basketball. And, it becomes part of your identity. That's all people ask you about. And then you think oh I'm a bit boring now I'm not playing sport. Another thing that I haven't mentioned is the physical identity. So if you're injured, and keeping in shape. We've been talking a lot about like the physical identities associated with sport. And that's part of being an elite athlete, having that strong aesthetic, because some sports are aesthetically good looking and it can be really important to some people.

I: I think it's a really interesting point because I've never really considered it, I suppose in the last maybe 10 to 15 years, we've seen massive amounts of development in terms of peak physical conditioning. So it's interesting how that cultural shift has happened in the last couple of decades,

P: Because some of them (*A program mentioned earlier in the interview*) haven't done any exercise in 15 years.

I: You mentioned before that you pretty much become friends with the skier you work with/ Do you think having that title of a psychologist is a detriment in some ways?

P: In some ways? Yes. But then others? It depends on the person. So like, because I've got the title of sports psychologists someone got in touch with me to talk about burnout more recently, but then when I'm working in football, because the club have got me in. And it's like, you know, Come on, guys. Talk to me if you need anything. Oh, so it's like, they're worried to disclose things to me.

I: So a negative perception already?

P: Yeah. And I think there's the real issue with what is [REDACTED] telling my manager. I spoke to one guy and he just told me he was 10 out of 10 for everything thin and he's got no problems. So then it's like, kinda like impression management, I guess. So does he think im then going to go back to his manager and tell him what a great player he is? So, I think it's that element of surveillance, and it's potentially a hindrance.

I: Yeah. That's interesting. Do you believe stigma of adverse mental health is still prevalent in professional sport?

P: Yeah, I think so. In the UK, possibly. And like we've talked about previously there's that thing around you're deemed to be weak or weak if you've got a mental health issue, and I know more so in other countries, I was at a conference last week and someone mentioned that it was in an African country that you were – It's contagious. Don't go near it. So that was really quite eye opening. I think as a as a nation as a country and a culture, we are more open than others. And obviously, we've got a long way to go. But I think once you admit that you've got, you know, depression, I don't know, like, even if I'm suffering with anxiety, people assume it and see it as a weakness in elite sport, definitely. And sometimes in general life it depends like, my family, a very like, working class and the men are all like shipbuilders and my dad's like, I don't understand what stress is. What do we need to be stressed about?

(Break)

P: I'm just thinking about football. But if you're injured, and then you acknowledge that – it's like you've got an injury, so your physical issue, then you start developing depression symptoms, you'll just feel almost doubly impaired. So you could see it in them, like the managers and the coaches that I work with in football, it's like, oh he's on the pile, so let's look for the next person, what can we spend the money that will be spent on him on looking for the next player instead? And the players know that, so that's not going to help, because it's just gonna escalate the problem even more. Even more anxious and worried.

I: In your experience, do you believe athletes are more or less likely to seek support inside or outside of their environment?

P: Again, it depends, but I think they'll seek it outside if, if I'm understanding your question, right. So say I'm an athlete working and I'm part of a team. And don't want everyone to even know I'm going to see the psychologist, I'm probably more likely to go to the NHS doctor or GP or whatever to seek a counsellor or a psychologist. For example, if I was going through a hard time and I go and speak to somebody. And then I'm like, do I speak to the university counsellor? But then my boss knows. Or, do I go external and pay for it myself? And I was thinking I was more likely to go external. Because I didn't want people to know about it. And so I think there's a similar scenario there in elite sport. But I think that if you've got a nice environment, so like, I don't know if it was as nice or it was good as she makes out to be but, well, she's retired now. But she talks a lot about like the ethos and kind of, you know, the, the culture there, and it seemed more of an open culture to be able to do that. So to put your hand up and say I'm struggling at the minute, I'm going to speak to the psychologist or the chaplain or whatever, and it was more accepted. And you're not seen as weak by doing that. So I guess it depends who, what, what sport, what club. If you're in an individual athlete, you might not have access to the psychologist because a lot of sports like athletics, for example. And so yeah, think it's just people being aware of it.

I: Do you think that's implemented then by the national governing bodies, they should have something in place?

P: Yeah. Definitely. But if you got one psychologist who's working for 100 athletes? Yeah, it's tough. Yeah, I think there should be more of it. I've just thought of this off the top of my head, but just for every athlete to check in with a psychologist, it should be a requirement so that then, even if they don't want to say anything, even if they're just silent for 10 minutes, if everyone's been to see them, then someone's going to need to speak to them. So then it's not like oh you've been to see the psychologist, because they've all been to see the psychologist.

Personally, my view is mental health is an issue because we can't see it. The problem with physical injuries is because I can see you're hurt, or you're limping, and I can see that then I can understand it a bit better. But with mental health issues people don't know enough about them and don't understand it so this is where that stigma comes from.

End of Interview.

Participant 2

P: Worst case scenario if we have to find another time, just let me know. There's no problem.

I: Yeah. Oh, brilliant. Yeah, that's great. Thank you. And are we all right to start?

P: Yeah. Yeah. Cool.

I: Yeah. So just, first question's nice and easy if you can just detail your experience working within professional sport. So consideration of any sports or teams or individuals you've worked with, and just sort of go from there?

P: Yeah. Well, I sort of did most of my training in professional basketball. So in a league called the BBL, sort of, obviously, it's not size of like American Basketball, but it's a professional league and in this country – so I did three years in pro basketball. I did bits of consultancy around the professional ice hockey league as well, little bits. I worked with GB biathlon, so more, more sort of individual but also they sort of compete in a team but it's individual as well. Strange. Sort of similar to cycling. So they compete as individuals, I think this is strange for anyone. That was interesting. And, and then most of my experiences or training really has been in football. So I was in an RTC, so like a girls' academy for two years, to two or three years, which was just an evening, so it wasn't like you're in there all day, like, like you are in a boys academy. And then I was at a cat one Academy for just over three years, three to four years. And now I've been well, [confidential], obviously. And it's just gone from a Cat two, to a Cat one. So quickly go through a bit of a transition, but I've only been here since March. It's always been like a bit of a reduced programme because of the lock downs and things. Yet to fully get stuck into it and stuff. But yeah, that's where I'm at at the moment.

I: So quite a varied experience across team sports and looking at the different expectations in sports?

P: Yeah. It's been mixed, but really it's been football the sort of last four or five years.

I: So in those experiences have you found that mental health provision as any that you've encountered, really, within professional sport has been useful or successful in any way? Or even if it doesn't exist? You know, were athletes aware of any mental health provision? Or was it all sort of going through you as the individual in the first instance?

P: Yeah, I've never been, I think the best experience that I've had of sort of mental health or wider wellbeing support is probably where I'm at now. I think at my last club, it was maybe just starting to get into it a little bit and sort of coming here, they seem a little bit further on with it. With that said, in terms of, you know, actual mental health – might be people who are maybe Mental Health First Aid trained and have a bit of awareness about it, but really the best placed people, for me, it is often obviously the club's doctor. So people like me, or like the player care, or sort of head of the safe guarding, we might be the sort of people who are in and around it day to day, and people might come to us for some initial advice and

things, but still we're not properly fully trained in the area, we might just be best placed. Best placed. So then, obviously, down to us to maybe pass things on to the doctor or keep them informed. Although I think there's a good sort of awareness around it and importance is definitely placed on it, I'd still say that there's a lack of people, including myself, who are, properly trained in it and yeah, so it's always that referral pathway on to the doctor rather than us dealing with things.

I: suppose in that sense, is it difficult for you then because you'll build a relationship with people around you? And it's like encouraging them to speak up if you've got any issues, have you found it from a personal perspective, difficult to then refer them on?

P: Yeah, I wouldn't find it difficult. So I think the last few years there's probably been a handful of people who are referred on to the club doctor. There was one sort of – maybe case – here, which in the end, didn't go any further and then at my old club was probably over three or four, three and a bit years, there's probably three or four players. They were referred on and needed that extra bit of help I mean, there's probably more who need it but you don't spot it or they don't speak up, it's still an area that needs a lot of work, I think. What was original question?

I: It was just asking about any provision that you'd encountered? So you have answered the question, don't worry.

P: I guess I sort of, because we do have to do some sort of psychology profiling, which is led by me. So, I mean, we base it on personality, so there might be personality things that we can pick up on where we might go, okay, that person might be a bit more at risk. So let's just keep a little bit more of an eye on them. And that sort of screening process, if you like, has been successful, in that a little bit. We've picked up on a few things. But yes, it's sort of like that gateway to refer on rather than me dealing with those issues myself.

I: Well, I was actually going to ask you, what have you found has worked best for you with that, in terms of, I suppose, not only helping athletes understand mental health in general, but I suppose like, mental health literacy. So looking at that spectrum of mental health, what do you think helped you most to help them understand better?

P: Yeah, I find the profiles are a good place to start. So once after they fill in, or whatever, so I write a summary. And then they get that feedback back. And we can talk about sort of, you know, what, what stresses them out a bit? And how do they deal with that? And it's a basic level of stress and coping with something. Well, I think, despite those conversations, like I found, because as I said, this academy has just gone from Cat two to Cat one. So it was only recently where they've needed like a full time performance psych in, so I'm the first person here in this role. And what I've been reflecting on recently is that actually, like, the willingness for people to openly talk about their emotions is just not there yet. It's like, a big project really, that we try to work on, we've got a sort of, we've got a leadership group with the under-18s, which has worked really well in terms of psychological safety, and them speaking up about stuff. So that sort of stepping stone between players and staff seems to be working really well. But again, on an individual level for someone to stick their hand up and go I'm struggling here. We've got a lot of work to get to that point. The last six months

with that group seems to be a step in the right direction. Yeah, that's sort of emotional intelligence, saying what they're feeling, say why they think they're feeling like that and being able to regulate it, I think there's still quite a bit to go with that.

I: Do you think do you think that it's down to maybe their, I don't want to say education. I suppose it's more awareness of what mental health actually is. Because it's not always bad. Is it? It's not always a bad thing?

P: No, exactly. Yeah. I mean, it's almost like I mean, you don't want to not use the word mental health. It should be a fine phrase to use. But you know, talk about the stigma and stuff. And there is a little bit of I think – a negative connotation when you talk about mental health. Like you say, it can be good mental health, but you sort of presumed that it's bad if you're talking about mental health. So I think, yeah, there's definitely that bit to work on. But yeah, this is even like your basic psych stuff around like, what am I feeling? What am I thinking and how that affects our behaviour. It's even just tapping into that. So at the moment, if we're doing like analysis, from a performance point of view, it's not even like individualised emotions. It's just as a team what we may be thinking when we look at that a bit of our performance, you know, how did that feel on the pitch at that time? At the moment, they struggle to even connect to those questions, even when it's largely football based. So yeah, it's an ongoing project and getting them to reflect in that way. And not just around the football actions, but the thoughts and the feelings that come towards that. And then maybe if we can get that in a good place, when it's attached to performance, we can then go a little bit more personal with it, and with a bit more comfortable with it, but yeah, yeah, definitely work to do here on that. Because it's just new I think, they're just not used to it.

I: Yeah. Well, I was actually gonna say, because it's interesting when you've mentioned about performance, there is obviously I mean, a lot of emphasis is put on performance, have you found in your experience that people were more likely to almost disregard well being in favour of performance in that sense, or have you found that they go hand in hand so if they're feeling better than they perform better?

P: Yeah. 100% they do go hand in hand. I'd like to think the staff think that as well. But it just reminds me, a couple of weeks ago, someone put in the staff group something around this webinar, that was debating that wellbeing and performance link. And the way that the message was described in the Whatsapp group was well being versus performance. And you know, that's where we're at with this stuff. And I read that. And it only might just come across as a sort of thing to most people, but that use of the word '*versus*' instead of '*and*' stands out. Yeah, it's like, well, that's where we're at with it. Again, it's just new here. And it's a large part of what I'm trying to do. We've got really good safeguarding and player care staff, for sure. But I just think we're a little bit at that stage, again, where we're not integrating that well. I think, again, because we've gone from Cat two to Cat one quite quickly. Lots of new staff has come in to tick those boxes. At the moment it's not quite integrated in and it's not truly multi-disciplinary yet, like everyone's here and can work together better, for sure.

I: I suppose it ties into that point that you made earlier about emotional intelligence and being more self-aware, doesn't it? Even from the coach perspective, in that sense?

P: Yeah. Yeah, yeah, definitely.

I: And so have you found then that athletes are receptive to learning about those wellbeing points and those mental health points, the ones that you have encountered? Or have you again, have you found that they may be a bit more reserved or hesitant to discuss those issues? Or have you found that they are they have been open when, you know, obviously, as you say, it's still relatively new in the environment you're in? But in previous experiences have you found that athletes tend to be receptive when you are discussing these elements?

P: Yeah, I think most of them are. Yeah, I think there's lots of education and awareness around mental health now in the schools and things as well. So I think they get it and get that it's important, but like you say, actually, maybe discussing it openly is another step beyond that. And I find that most of them in a one-to-one setting. Or when it's just me and a player. I'm probably with the player care team as well, they're quite open to discussing it. I think there's still that barrier in terms of maybe letting the coach know truly what they're feeling. That's always going to be a difficult breakdown. Whatever club and whatever level you're at, but yeah, I think that one-to-one space, they seem a lot more willing to open up, which is good, which is really good. I might think a little bit sort of idealistic around it, maybe just because of my role. But if we can get them in a group talking about stuff, then they're building their own support network within the team, and they can support each other because they're going to be much more open with each other anyways, as players that maybe they would be with, you know, when coaches around or whatever. Yeah. And so just getting them, even if it's just talking amongst themselves or being open about this sort of thing and creating a network helps facilitate. Yeah. Yeah, it's wider group support. Yeah. I think on a one-to-one level, it's better but still early days here working with them.

I: It's just something interesting you mentioned then about that that relationship with the coach, have you found then that in those experiences athletes that you have worked with in the past have been more inclined to seek that support outside of that environment? and due to that relationship and dynamic they have with the coaches and managers? Or have you found that they'll come to you, and as you said, you can refer to the club doctor, or you've found speaking someone who said, Oh, yeah, I've always struggled, but I didn't feel comfortable within, say, for example, [confidential]. I wanted to go outside, so no one found out. Have you ever encountered that before?

P: I've not been aware of that. But as I was saying I've only been here since... sort of March, April time. So I've not come across that yet. But there's nothing to say that doesn't happen. My last club, again, some of them spoke to sport psychs outside the club, in the same way that some of them have extra fitness training outside the football club. And so yeah, and again, that might just be like you say, because they'd rather do that sort of privately, or they just want another voice or someone a bit more neutral away from it. I think here, the way we try to set the performance psychology up is that it's integrated into coaching. So I'm sort of in and around the coaches a lot. So whether that sort of is a bit of an environmental barrier for them to come to me, maybe I don't know. You know, I've got a lot of work to do

still just to get to know them and build up those relationships. But typically, I'd say that, especially with younger ones, because again, there's maybe that self-awareness, emotional intelligence gap if you like. It's almost like staff notice a change in the players. So again, it came down to us about what your role is to sort of notice. Or I think it's been a change and they don't seem that like themselves or you know, might just pull up for a conversation and then you sort of get out of them how they're feeling. I've had some experience here with older players approaching me about it, or another club have told them to come to me. But again, with maybe younger ones, maybe they struggle to articulate it, I think it's more of a staff thing to notice. Yeah, that seems to be where it comes from. So a little bit of a mix I think.

I: So, do you reckon then, I suppose if we break them down into age groups, based on what you're saying, you probably found that older players are more likely to seek support, maybe be more emotionally intelligent, or maybe more self-aware. Do you think—

P: Yeah.

I: Implementing these education awareness strategies and processes that you're working on would be more successful long term in a younger age group? Or do you think it's just important to maintain consistency and have it in this group, this group this group right throughout the way up until retirement? I suppose?

P: Yeah, yeah, I think so I think sort of the challenge here longer term for me would be to embed those sort of emotional intelligence skills in the younger ones. So hopefully, sort of as they go through the adolescence and the growth periods, and things like that, obviously, the emotional side as well, it might be a bit more equipped to have a bit more awareness around managing that and regulating themselves. And likewise, when they get a bit older, and through that, understanding themselves, what emotions help them, what emotions don't help them, what triggers them. And, you know, noticing those pressure moments. And if it's all snowballing, which is something some of them have described that sort of snowballing feeling.

I: Okay. That's interesting.

P: Yeah, we had we had a good chat actually, with the under-18s second years recently, because they're at that stage where they're in their last season unless they get a professional contract for the under-23s. So we had, we had quite an open discussion with them, although it was a little bit short, and then initiated by us, the staff, again. We just sort of went, you know, like how you're feeling about it. Because Luckily, a lot of our coaches had been through that process themselves. So we could start off by him going oh I've been there, I know what the pressure could feel like and how were you feeling at the moment? It was maybe only 10 or 15 minutes? Again, it was just trying to show our human side and connect with our feelings. It's just dropping things in like that. So hopefully open them up. Well, yeah, you're right longer term. Embedding things for the younger, the younger ones, and the further down the pathway. So by the time they get to the under-18s they can be more open about it. I think that's key.

I: Yeah, just something you mentioned before about being integrated within the coaching team have you had experiences where you haven't been integrated with the coaching team has it made it more difficult or easier for you to function?

P: I'd say, in previous clubs, I was a bit sort of, in between, like, maybe in between coaching and Sports Science, and it was a little bit of a separate thing. Although typically, it sits in a sport sciences, like it's one of the supporting sciences or performance, which I totally get. But then day to day 80% of my work is with the coaches around environments, and how they set stuff up, and so I think it helps him a sense that of around the players a lot, and can affect the environment. And, you know, it's all about psychological safety and things like that, and influence the coaches to create those environments that are psychologically safe. I don't know, I think I think maybe there's a little bit of – not pressure. But it's important for me to remember that I also need to have that sort of neutral feel a little bit as well. And have a space where they can come to me one-to-one. And whenever I sit down with players, I'll always start by saying, you're in control of how much this gets shared. Yeah, they're always in control of that. So I think hopefully, they know that, like I said, I've not been here too long, but hopefully they get to know we've understand what my role is they'll now know that if they do want to talk to me that there is no flop between me and the coaches if they if they want it. But again, you know, if we're trying to get people to be open about stuff, then again, ideally, you know, everyone would be open with each other. But that would be sort of the next logical thing. Them being honest with anyone to start with is good. And then longer term, if we have an environment where everyone's comfortable with everybody knowing things. Yeah, that would be amazing. I don't know if we would ever be able to get that 100%.

I: There's quite a lot of a prominent research area, within mental health issues surrounding the effects that an injury can have on an athlete's well being and mental health. So in your opinion, have you found that there has been sufficient support of wellbeing and mental health, for those that are suffering long term injuries, in the environments that you've been in?

P: I'd say no to be honest, I think that's something again, that probably all – well a lot of clubs might be able to do better. In my experience of being a psych I'm typically the only one in the club, I know, other clubs have got more like little department, maybe two or three, so like I said, I'm the first one here, there's only me, so it's difficult for me to do everything. So again, it's like trying to connect with the physios to help them support the players, maybe rather than me being able to sit down with them all. I definitely think that's a really, really important area. And we'll talk about identity and identity during that period. Again, yeah, I hate to say it, but just the amount of provision makes it hard to, to do that. Well, yeah, I don't doubt that it's important that I think should be better, that's an area here and other places.

I: Do you think that would fall into that referral process? Or do you think that that's something that the sport psych can be responsible for, in the first instance, almost, I suppose, under that context, maybe even preventing a potential issue arising? Because your programme that you've developed, for example, might sit in and be embedded within the physios' physical rehabilitation?

P: Yeah, definitely. I think I think there should be – no doubt that we'll have this eventually. But you know, again, I'm not throwing out excuses, but I'm quite new and trying to embed stuff, we did try to be that at my last club. Well, if a player is going to be out more than, say, three weeks or four weeks, then what's the process? So maybe, I mean, it might not have to be explicit as me having a one to one with a player who's going to be out longer than a month, it might be, If we know the player's going to be out for that amount of time and I sit with the physio go, here's that profile, by the way we've done this might be sort of where they need more support, this might how you can sort of connect with them a little bit. And so supporting the physio is going to be with them every day. What we typically did at my last club was just before they will come in back into the performing like training and playing I'd typically sit with them then towards the end, maybe rather the anxieties or confidence around coming back in but typically what we didn't do well was something at the start or middle of that process. So I've learned from that as well. And yeah, I think longer term that that would be good. Again, but you know, the physios' the one with them every day. So how can I support the staff who's going to be with them all the time? and supporting them, I think is probably the key one.

I: I thought that was a really good idea about offering them performance profiles, because you're essentially almost able to identify who's potentially more high risk.

P: Yeah, exactly. Yeah, we've got that. So at the start the season after I've scored all the profiles, written summaries, and blah, blah, blah, yeah, we've had a multi disciplinary meeting. So all the support staff and coaches, anyone who has anything to do with that squad, I'd go well, let's look at what the team looks like, on average. There's some maybe red flags, but still maybe amber flags. This is what we might do around that. And we just discuss it as a staff team. And we're working towards the staff being profiled as well. And so again, it's like, matching them up. So if you've got a player who needs this type of support, and we know this member of staff might be better at giving that there's probably a little bit better and can we match them up and be a bit of a mentor and tight relationship. And yeah, that kind of thing. Again, just a bit of an ongoing process at the moment.

I: How have you found in your experience that athletes are able to cope within and without their professional sport? So considering even things like injuries or then maybe older athletes who are approaching retirement, or even things like dealing with day to day pressures with the sport?

P: Yes, I think it's more difficult now with COVID because that loss of social interaction amongst the team members, I think, I think has been massive. So now they sort of come in later. Go straight into like school work or training rather than maybe having an hour in the changing room together, like they miss a lot of that. And they've been open about saying that as well. But it's really, it's really difficult to substitute that with anything. Again, just like social restrictions. I've not had loads of experience with older athletes coming towards retirement to be fair, so I couldn't really comment on that. And then yeah, again, was more with COVID, but even not with COVID. I think that sort of period in the afternoon. So typically, teams will train in the mornings, probably stay in for the lunch. And they might do a little bit of something afterwards, either in the gym or training. But then they go home,

mid-late afternoon. And then, you know, they're meant to sort of rest but I think, a lot of athletes moving learning how to spend that rest time. So I've had, I've had quite a few experiences of players in 18 to 23 group who describe that period as like, they can't deal with that boredom, they have a few hours to kill, and they don't really know what to do with it. And I found that with some of them who may be a little bit more susceptible to anxieties, or whatever, for whatever reason, that's when their mental health gets challenged. So they're at home on their own, especially during COVID. They can't go out and see family or friends. And that boredom turns into, you know, how did I do today? Like, what about my contract? And, yeah, that boredom is a space for these worrying thoughts to start building in their minds. So yeah, I think that's a challenge is managing that rest time, especially for the more social ones who don't get to socialise at the moment. So that seems to be a key area that I've noticed in the last club I was in as well. So yeah, managing that downtime.

I: I think in the sort of weird way, that's almost like a glimpse into potentially what could happen during retirement. Because obviously, you lose those social aspects of being with the same team.

P: Yeah, definitely. It's still in that time, essentially. Yeah. Yeah. Really good point.

I: So what would you recommend that needs the most improvement with regards to aiding athletes' mental health? So what processes or strategies do you believe would need implementing or improving upon?

P: Good links... Well, I guess first and foremost, is that awareness amongst the staff, and the staff feeling comfortable talking about it, whether it's their own or noticing things in players. So that sort of education around different personalities and stressors, I think, a good starting point. And that wider emotional intelligence stuff with players, I think, again, it's a good starting point, because then, like you said earlier on, it's opening those conversations around good and bad mental health, not just mental health is a bad thing. Just understanding emotions and how they affect us. And I think connections, like that sort of holistic approach in terms of, well, if the player care team is aware of something that might be happening at home, it's affecting them, but like, the more performance sided team, like the coaching staff aren't aware, that's a barrier towards being able to give them the right support. But again, you know, sometimes you'll get messages from parents to player care or safeguarding. And they'll say, like, Oh, we don't want to make a big deal out of it, though so don't let the coaches know, and so again, it's parent stuff in terms of that openness. The there's connections in with club doctors as well, because, you know, as much as people like me to be aware of mental health and feel like we can talk about it a bit, we're not trained in it, and doctors are best placed. So how we link in with the doctors is really important as well. And then a clear referral pathway. So yeah, if someone spots something or where a player approaches them, it's just having the confidence of knowing what to do with that. Yeah, so you know, what sort of questions would you ask at the time? How can you reassure them and what do you do next? Speak to them, so it's all that kind of thing builds confidence in that pathway. So a few little bits that might not solve everything, but definitely key little starting points to normalising it a little bit.

I: Yeah, absolutely. I think that's a really good idea what you said, Because essentially, you're almost building like a web of support around the individualise. Your by making like parents, social groups, the coaching staff and the support staff. And essentially, you've got this like, nice structure around them, rather than maybe people not being aware or not understanding it as much as they potentially could or should.

P: Yeah, they will have wider case formulations, you know, that other people you might have interviewed could have mentioned. So, you know, not coaching staff talking separately around like, Oh, this player seems to be on low confidence at the moment. And you know, we're not tying in with, like, player care, like player care might know why they might actually like having a really hard time at school, or the parents breaking up and that's really difficult to deal with it. You know, if we don't know that around the performance, then again, it's really difficult to find the right way to support them. So that linking across staff is super important. And like I said with here, we've just expanded stuff quite quickly. And I think we're still finding our feet with how to communicate with each other, never mind integrating stuff like this.

I: So what I have found as well is that in previous studies that I've done, there's quite a bit of report into the physiotherapist as a first port of call in terms of – especially during times of injury for obvious reasons. But why do you think pro athletes may be less likely to seek help from a trained professional with regards to well-being and mental health? And how can we improve that situation? And that understanding do you think?

P: I think in fairness with the physios it's a brilliant space for players to feel comfortable to open up. You know, it's often one to one stuff and physios often, you know, hopefully, they do like, a good sort of bedside manner. And you know, and physios will be doing a lot of sort of psychology work, so to speak, maybe without being aware that themselves. I'd say that across most walks of life, like, if you feel like you have a bit of a challenge with regards to mental health, the first person you can go to is a friend or a colleague that you trust, or your parents, partner or whatever. You're probably not gonna just go straight to a doctor. So I think those social supports are really important. And then you know, whoever you open up to, you might feel bad for opening up sometimes.. But I think that's just human nature to do that. And, like I was saying before, it's mainly good to have the physio as someone to allow them [the athlete] to say 'have you considered talking to the doctor and maybe opening up about it', but I wouldn't expect that a lot of people, let alone in sports would maybe just go straight to a doctor. Even with physical stuff, you probably have friends that you talk to first and go well is this normal is this happening, etc. And then probably go to the doctor. So yeah, I'm not too concerned about that. But my, my concern would be so long as they've got someone to talk to and whoever it is so long as that person they're talking to deals with that conversation well, and encourage them to go to somebody professional then yeah, well, yeah, I'd say that just happens everywhere, to everybody.

I: I suppose that ties into your earlier point about embedding and having a more holistic support process team.

P: Yeah, yeah, exactly. 100%.

I: So in your opinion, what do you believe needs improving in order to better prepare an athlete for a transition out of sport? You'll be aware a lot of issues have arisen in recent years with athletes being quite open and honest disclose in their life without sport compared to with sports?

P: Yeah. And I think that's a big question around athletic identity. And it's gonna be a challenge. It's a massive challenge to encourage the lads to have other things as well as football. It's really odd because a lot of them have been in the academy for a long time. And I don't want to point the finger at social media, but I do think it exasperates a little bit, you know, the WhatsApp pictures and their Instagrams or them playing football and yeah, it's just who they are. That wider challenge of getting them to identify with other things and not seeing themselves as a footballer but see themselves as a good person with values. And these are the most important things. And so that's an ongoing challenge, but a really important one. I think. I can't remember his name now, but and you might have spoken to him, but there's a guy at Man United. I think he's doing a PhD around identity. And then he did a webinar over lockdown. Yeah, he had some really good ideas is that metaphor around the table, you know, if the table was one leg, and it gets chopped out for one year, that tables, screwed. Four legs, four parts to your identity, you lose one that is still going to be quite stable. Yeah, that sort of message is sort of what I think is really nice. But again, like the reality of the lads and how they live the lives, that's a massive challenge. Well, that would be that that would be a key one for me in terms of that.

I: Do you think that then that's something that needs to be integrated earlier on? Because I've seen reports and people talking about this idea of a pre-retirement plan. But when people have mentioned that it feels like it's coming too late in their lives. It's like, are you going to retire next season? Now let's start thinking about it. It's just my personal opinion, really, in terms of is that leaving a bit too late or come coming? Maybe not start that conversation or that thought process a bit earlier in their lives?

P: I think it's early as possible. You can't build an identity overnight. It's a long term embedded thing. I think a lot of players, and this is maybe guessing a little bit, but a lot of players who are playing professionally as adults they might think that they just want to get on with playing and enjoy playing and then naturally as they as they get towards the end of their career, they might go Okay, now I'm gonna start thinking about it. The education stuff has changed this year. So they do this around being young footballers, rather than their education being totally different, like maths, and they've got something else they can think about. Now, all their education is just football as well. So it's constantly non-stop. So I'm not sure if how we will see longer term if that's helpful or not, because it's sort of new this season, but in the back of my mind, I'm thinking that can't be healthy. Because even their education now is all around football. You know, when do they have time to think about anything else? Don't know if that's been a good move, but will have to see, but it's not the club's fault. You know, it's the wider Premier League education.

I: So even from an organisational sense, we're looking at narrowing them identities even further there.

P: Yeah it's scary but we're just going to have to see how it plays out with them long-term.

I: That's all the questions. Thank you, Chelsea. I really appreciate you taking the time to speak to me. It's been it's been really, really good. Thank you. You know, it's been really, really good. Really interesting. Listen to you. So thank you very much. Really appreciate it.

P: No problem. Well, good luck. Yeah, thank you very much.

End of Interview.

Participant 3

I: And so first, if you can just detail your experience within sport. So thinking about any sports teams or athletes or roles that you've had within the industry.

P: Like, I think I said to you over email that I haven't worked in the professional environment, which it sounds like you're interested in working in is your – that you're interested in collecting data from you know, I haven't. I haven't worked in like a premier league football club or a professional Olympic sport or anything, but...

I: but the research is looking at sport in a in a broader sense, anyway, because I didn't want it want to focus on those aspects too much.

P: All right, well, I've provided I've done one on one private service delivery to a range of athletes from, you know, child, grassroots sport all the way up to the top end of parasport. And I've worked with Commonwealth athletes as well. So that's probably the range of individual clients that I have experience of providing support to. I've done that for about five years. And with regards to being more integrated into a support team of sorts, I'm actually wearing the hoodie today. I, I worked in a performance academy for about three and a half years for junior athletes across a range of sports. So it was a it was like a multi-sport academy and it was from entry into the performance pathway system right up until GB or team Scotland selection. And that was kind of the – I was part of a team of high performance coaches, S&C coaches, physios, dieticians, and that was embedded within a school as well. So that meant liaising with the educational providers as well. And, privately, I've also provided quite a lot of support to a range of performance pathway squads, but that's where I am brought in as an external service provider. So working with Junior podium programme orienteering teams, or junior podium dressage, or fencing or archery teams, that sort of thing. And, yeah, a lot of that in that context, I'm more of an external speaker than anything. And I've, so that's probably the more classic support provision that I do. I also, in my role as a lecturer and my research activity, I have quite a bit of experience of working indirectly with these teams. So that's where typically the head coach or the sports, the existing sports psychologist, or clinical psychologist from that team, might come to me and we might do a project together of sorts, which will then help inform the work they do, or will help make systemic changes to what's going on in their environment.

I: Right, that's interesting. It's like a broad range of age groups as well, How have you found the differences with working in the different sports,

P: To be honest, not that different. It's almost as if the way the sport works is not doesn't matter. There's a common thread that runs through all of them as if they all have a support system of sorts, and they all have things that work. And they all have things that don't work. And it's my job to identify where in the athlete's journey from entry to exit, whatever that standard of exit looks like, whether it's professional sport, or if it's transitioning into working life. It's to make sure that that athlete is adequately supported along the way and that the support team around the athlete is adequately informed and has adequate resources to make sure that that happens.

I: How have you found that in those environments – have you encountered any mental health provision within that working with those teams or in an individual sense as well as have you found that even if you have, is it been successful or useful in any way, or have you even had situations where you've not encountered it at all?

P: In terms of support provision?

I: Yeah. So like specifically towards their well being?

P: Okay. Well, so do you mean, do you mean their well being whether Mental Health?

I: Good question. In my opinion, I think they can overlap.

P: They do. But I would say that the degree to which the overlap is what causes a grey area for a lot of support providers, because if an athlete's well-being is of concern than I am the primary support provider for that, more often than not, but if we're talking about psychotic hallucinations, then I can't provide for that, so there they are, I understand that they overlap and that the common factors might influence one another. But I do think it's important to make a distinction between the two. And sometimes you have environments which to answer your question, I've worked in environments where they have concrete support provision to support the athlete's well-being, you know, some places have a careers advisor, for example. And I know that that is that is an indirect form of supporting an athlete's well-being because it prevents stress, it looks after duty of care factors, and all of those things might be a precipitator to mental health problems. So you know, some of these organisations, for example, the performance academy, they have a career advisor embedded in the school, they have a school counsellor embedded in the school. And that's the first point of referral if, if an athlete's well-being is of concern, but an I, I have to play a very proactive role in supporting these athletes' well-being and that's in the context of one on one support. That's often my role is – as well as trying to focus on performance enhancement, I need to proactively put things in place so that the athlete, the athlete's well-being, you know, and that is a very broad term, which is very grey, is well supported. If the athlete's mental health, on the other hand is of concern, then it depends on the nature of it. And it depends on what kind of support system the athlete is embedded in. If it's a professional athlete, for example, I've worked with a professional wheelchair tennis player before and if that athlete was to ever experience a mental health concern, then there's a very clear referral pathway and support resource available for that athlete. You know, where they would get access to a medical doctor, and then a clinical psychologist and possibly a therapist. And it wouldn't be appropriate for me in my in that context, to provide any kind of signposting or support. But for a lot of the athletes where I work privately, and they're not embedded in a wider support team then I might, you know, I'm quite comfortable to treat certain kinds of anxiety and depression symptoms, depending on their severity. And if not, then I have appropriate kind of referral networks that I might suggest to the athlete and, and help them access that if they need it.

I: Yeah. Okay. What has worked most in your own experience to enhance the understanding of mental health issues within these athletes? Have you ever come across

athletes where they potentially lack the self-awareness of their mental health? Or even maybe misunderstood the term, the terminology or the other definition associated with it?

P: You just repeat the question, please.

I: What have you found works best in your own experience to enhance the understanding of mental health issues within athletes?

P: Mental health literacy?

I: Yeah.

P: In terms like mental health, often, because I find that it's a loaded term. And quite frankly, I don't believe that just talking about something is going to change it. So I don't talk about mental health, per se. I do talk more about well-being. I more often use the phrase like, you know, we need to focus on how you're doing out of the pool as well as how you're doing in the pool, for example. And I drill that in right from the start when I start working with an individual and I illustrate that, you know, it's not just gonna - we're not just gonna work on what you do in a race like it has to be bigger than that, because and then I kind of, I might, I might often share some stuff or anecdotes or metaphors that will help illustrate why it's important that we look at the bigger picture. And so that's, that's usually, perhaps the route I might go down, because that's just my style of working. Maybe that hope maybe they'll answer your question.

I: Yeah, it does. I think it's interesting. I agree in that sense, because I've long since had a problem with the terminology of mental health because I think the immediate reaction is to go to the negative side of that I've got clinical depression, or I've got bipolar or, you know, I've got an acute stress disorder or something like that. Whereas even different terminologies sort of almost drip feeds the information in that sense, to sort of sounds like, that's, that's something what you're doing similarly?

P: Yeah. And, I guess, nowadays, I don't label things quite as much. Like, I was working with an athlete yesterday, and the athlete was facing persistent interpersonal challenges. Like with regards to the athlete's training, he was progressing very well, and everything, but a persistent challenge he was encountering were interpersonal stressors. And you know, that was the bulk of the work was actually focused on that, like, how can we improve the harmony of his social support relationships in his network, and that's not performance focused, per se. And it's not, you know, we're not talking about dealing with psychosis, depression, anxiety, substance abuse. But, again, ultimately, stress is very often a precipitating factor to bigger mental health problems. And if you don't proactively try and support these issues, then a mental health problem might emerge. Yeah, even though in that example, yesterday, the athlete's interpersonal issues were, were nothing to be concerned about, you know, if you if you deal with them proactively early on, then that prevents it from becoming a big source of stress in the athlete's life, which might then in conjunction with other things cause a mental health or wellbeing related challenge.

I: I think the one for me is, as I've always tried to make it clear that it that it is a spectrum, you know, it's it is a continuum. So your mental health, same as your physical health will,

will constantly fluctuate and adapt and change, depending on your circumstances, your mood, your environments, etc. So I think that's, that's something that I've tried to steer more towards staying away from that not necessarily the definition of mental health and, and maybe try to broaden that, in that sense. But I completely agree with what you're saying, I think it's more conducive to an open and honest chat, I suppose, isn't it?

P: Hm, yeah.

I: Have you found then when you are talking about these things, or when you're starting to build the conversation with the people that you've worked with, are they receptive to learning about them? Or are they only interested – I suppose it sort of draws on what you've already said in that sentence with regards to using the terminology and opening the use of the language.

P: I do research in this area of how we optimise support provision to athletes, and that includes mental health provision. And I often say that it's not what you provide, it's how you provide it. So quite often, you know, most sport organisations have some kind of mental health provision or in place already, quite frankly, they might not need to change what is provided, they just need to change how it's provided. Similarly, I find that if I change how I talk about it, and you know, like I've already said, then that that will often facilitate engagement.

I: Have you found one age group would benefit more from a, I suppose a more rigorous process, then, say, a more mature age group? Or do you think it's better to sort of integrate educational processes or procedures that when they are older, a bit more mature?

P: I'm not convinced that education is necessarily the answer, because again, that implies that you need to provide more than what's already being done. I think what's really important is that you get the leaders in any kind of organisation to espouse the importance of it. So what I mean by that is, if you go into a performance academy today, the theme is very often that the sport psych is someone who's a little bit on his own in the support team. And yet, you know, a third of what he says to the players which he says the players will be disregarded. But everything that head coach says is very often embraced quite religiously, in those contexts. I mean, I'm not – I'm generalising and this is not always the case, but similarly, the performance director might think, yeah, the sport psych is doing a good job, you know, they're there to provide mental health support, if needed. If they're not banging on to everyone in the organisation about the importance of being you know, literate in mental health and it's everyone's responsibility. You know, targeting a specific age group and educating them about it is not going to make a difference. In my opinion, it needs to be an ethos that is embedded throughout the entire organisation that needs to come from the top down.

I: So within the literature, there's a lot of research suggesting that athletes are more likely to experience a mental health issue or a common mental disorder during times of injury. So what's your perception of mental health support or even well-being provision – as we've already talked about – during times of injury for athletes?

P: Depends on the sport and I think it depends on the level the athlete is at. Rugby, for example, a lot of rugby organisations are actually quite at the forefront of athlete duty of care and support provision. So even if you look at academy performance pathway systems in rugby, you know, 15-16 year old rugby players that are being signed, to some extent, there's like a compulsory, there's often like a compulsory clause in these contracts that requires the rugby player to engage in some kind of support provision during a time of injury. Whether that is again, it doesn't always have to take the form of counselling or clinical psychology. It's preventative, I don't believe that mental health support doesn't have to look like a clinical psychologist. Does that make sense?

I: Yeah, yeah, no, I completely understand.

P: If it does then that implies that you're too late and it's now a reactive problem. I think the good mental health support needs to look more like things that are put in place proactively to prevent it in the first place. So to answer your question a bit more directly, you know, these organisations, they might say, okay, you're an injured 16 year old rugby player, even for the next three weeks, while you're rehabbing you need to have a think about your future career, or you need to talk to a careers advisor, or you need to go and get work experience with a pro team, that sort of thing. All those things make a big difference in my opinion. what was your question again? [laughs].

I: That's fine. During times of injury, how have you found mental health support during this time?

P: Okay, so that's, that's my opinion, that's gold standard, what I just described to you, but in other sports, that's not in place yet. So the athlete if they're injured, is left to their own devices. And I think that's, that's a red flag, you know, because their whole environment is the sport environment. And if they're injured, they're not exposed to it. So lose the support and I think that's, that's a prime breeding ground for a mental health related problem. So, yeah, I think I think people need to think more carefully about what they do proactively during when an athlete is injured, some sport organisations are on it, and they're good at it. But perhaps practitioners, individual practitioners also need to think a bit more carefully of, okay, well, the athlete is injured for the next six months, and then and they're not paying me to do service provision during that time. What can I put in proactively to make sure that when the athlete is out that they don't slip into depression, for example?

I: How have you found that athletes are able to cope within the sport environments? Certainly, for example, if they're dealing with an injury, are they are they able to cope adaptively with it, or even if maybe they're an older athlete and they're approaching retirement, are they able to deal with that? And even day to day stresses and pressures associated with sports?

P: Yeah, it's the athletes that have multiple group memberships. I think that adapt better to it. You know, so, if an athlete is, has a tunnelled identity and most of their life rides on what they do for their sport. I think that makes those injury experiences a lot more severe. Whereas if you have worked with athletes who've got a lot else going on in their life, you know, they've got a partner they've got, you know, they've got family they've got a second

career that they're busy developing. They have other groups, groups of friends that are completely not related to the sport environment at all. I think those are the people that cope with it better, generally speaking, yeah.

I: Do you think that then, as a result of those broader interests, it's not that that narrow focus on the sport, as you just mentioned?

P: Yeah, wouldn't say it's just because of the interest. I think it's simply because if you have multiple groups available to you, outside of sport, that gives you more resources to draw on during a time of need. Especially because if your only support network is in sport, and you're injured, and you're not in the sport environment, how you supposed to access your resources?

I: How have you found athletes have sought that support then? With regards to say, for example, if you're working one to one with an athlete, what is it that they look for with you? Are they disregarding wellbeing in favour of performance? Or are they looking for a more holistic approach where they can maybe get a greater appreciation of their own self awareness? And that benefits performance? What do you think they require most from a professional support service?

P: I think it varies enormously from individual to individual, I've never met anyone that disregards well-being in service of performance consciously, they might do it subconsciously, and they don't realise they're doing it. But I've never, you know, I don't think that's what anyone implies. But I don't I've never met an athlete say, I want to become faster at running and I don't care if it hurts me. I don't think anyone says that. But um, yeah, it really depends on the individual and what kind of service provider you're referring to as well, obviously, you know, some sports psychologists are very holistic. And then I guess a service provider could be a strength and conditioning coach, and they could be focused on functional movement that exists beyond the sport environment as well and injury prevention. A physiologist might be more interested in just performance enhancement, I guess. But yeah, I don't know if that answers your question.

I: I suppose I'm related more to your experience directly. So what have you found an athlete will come to see, say, for example, if they sought you out externally, what are they looking for from you?

P: Yeah, it's most often performance enhancement, or it's to cope with a stressor that they're facing of sorts. That's very broad. But I would say that stressor, but you know, both of those issues are underpinned by well-being or external challenges they might be facing, and ultimately that those are the Yeah, that's it, I think.

I: in that sense I suppose it's getting them to understand that those two are interconnected?

P: Yeah. And your performance will also affect your well being.

I: Yeah. So have you found the athletes are more or less likely to seek support inside of their environment? So as you were referring to before with embedding into that multidisciplinary

team, or if you are just solely as an external and they are seeking that support outside of that environment, have you ever found that they're more or less likely to seek internally or externally?

P: Yeah, they're more likely depends on what's at stake. So if selection is at stake, or progression or a contract is at stake they're less likely to seek support, and what the social norms of the environment are. So I've worked in an academy where the norms were actually, if you were to talk in front of the group, and explain that you have been struggling with a well-being related concern lately, that's actually seen as a good thing. People were quite proactive in life and almost like happy to talk about it in front of their group. But that's because the performance director and the coaches created an environment where there was a lot of trust. And there was a lot of, you know, social norms around disclosing those kinds of needs. Whereas, if you work in a more professional environment, like I've come across that if there's a contract at stake, if there's selection at stake, the athletes will hide any kind of challenges they might find, because they fear that it will affect their eligibility for selection, or they fear that it will cost them their contract, or that they'll get benched. And yeah, the other factor is, if there's a social norm against speaking up, although that is changing quite a lot in certain places. But again, that has to come from a top-down leadership position, I feel. So yeah, there was another part to your question wasn't there?

I: Yeah. So I suppose it's essentially your perception of how athletes are more or less likely to seek the support inside that environment or outside?

P: I think I've answered your question. I guess in the in the latter instance, going outside externally, and trying to deal with it quietly and under the carpet is often – not often, but it is seen. Yeah, there's just some athletes that are because of their own upbringing and their own history, that they're probably quite comfortable disclosing things and others are less comfortable doing that.

I: Just to give you an example then, do you think someone who is more comfortable with that and more confidence in disclosing that information. Is the environment or the culture, is that going to draw that out of them? Or is that going to force that positive behaviour to recede in that sense do you think?

P: What are you saying that if someone is inclined to discuss and disclose that stuff, will the ethos of the environment influence whether or not they do it?

I: Yeah.

P: Yeah, I'd say, well, yeah, I would say that that is the case. It's almost like the culture is a moderator how likely someone is to disclose but obviously the other moderator's, their personality. So I mean, I've seen environments where the attitude towards mental health related needs is very hush hush, and it was quite poor. But there's just some very confident, brash athletes that are like, no, I'm, I'm depressed. And they laugh about it. And, and they're quite happy to seek help, they don't care. You're always gonna find individuals like that.. You know, I understand that. Sports psychology, we were ultimately interested in helping athletes to overcome their challenges and to support them better, but at the same time,

like, they're just people, and some people are confident and brash, and they will find a way no matter what. But then there are others, of course, who are not like that.

I: So I'm just one more question for you, please. What do you believe needs improving in order to better prepare an athlete for the transition out of sport?

And I'll give you a bit of context on that, just because in my, in my previous studies there was quite a bit of discussion regarding the idea of retirement plans. The idea of building on what you've actually said with regards to this narrow athletic identity and this really narrowed in focus perspective of the sport and, and the implications or effects of ultimately having to take that away when they do inevitably retire. So, essentially, what do you think needs improving in order to better prepare them for that move into retirement?

I: It's a structural directorial responsibility, in my opinion. Because you can't rely on one well informed sports psychologist to make these changes. Because if they leave and the changes leave with them, so it's the national governing body or the club or the organization's responsibility to speak to their lawyers and to say, we're not going to sign this Premier League footballer unless they agree to a contract that says, if you are injured, you will do x, y, z to proactively promote your career development outside of sport. Like, it needs to become a standard thing that all professional athletes do. And if you opt out of it, you don't get you don't you're not signed. I know, that's not going to happen. But, it needs to be something that the athletes opt out of. It's like, okay, well, you want to play for Manchester United, you're going to sign the contract. And you need to explicitly opt out of this transitional support programme. And if you're going to do that, you need to sign a bit of paper that says, while you're doing that, so that, you know, it sounds horrible but if you end up leaving the sport, and you suffer from a mental health problem, and we can say that it wasn't our fault, it was – you chose not to seek the support, you chose not to take the support. That's a that's a bit of a horrible thing to say. But I guess to the point I'm trying to make is that these organisations need to make it essentially a compulsory support programme that runs alongside professional sport, it's not just. How should I put it? You can't just put out an information resource and hope that 10% of the athletes might go and read it in their spare time. It needs to be something that's shoved down their throat, and it needs to become the norm that they engage in on a day-to-day basis. Proactive retirement planning, proactive dual career planning, proactive mental health literacy training, proactive events of stuff that has nothing to do with sport, like cooking classes, for example, you know, I mean, the rugby academy that I did some work with, they're great, they were great at that they, they would get external speakers, you know, because the they were dealing with, like young athletes transitioning into professional sport. They don't know how to cook and live by themselves. So they actually got them to do group cooking classes together. Like that's, that's the stuff that needs to happen, and that, you know, they would sacrifice an S&C session once a week to do that. So it's the organization's responsibility, I think, to put in a more robust support system that is compulsory for the athletes to engage in. Quite frankly.

I: I think what that then does is it sort of removes this potential to have an issue later on in life with the sport and also, I suppose what that does is, during times of injury, they can just go, Oh, well, I've got that, which I can do. I don't have to go to that. I can't do the S&C

session, but I know I've got this going on to do that. And then that could potentially still integrate them with within the team as well.

P: Yeah, and the other thing is that if you gave the athlete a choice, would you rather go and do your group cooking class? Or would you go and do S&C? Of course they're gonna say, I'm gonna pick S&C because like, that's just stupid. Why would I go do a cooking class? But if that comes from the top, and it's like, yeah, everyone in this organisation gives up S&C once a week to go and do a career development session with a guidance counsellor. It's like, Oh, well, everyone does that. You know. And that's, that's an order from the top. All of my coaches are telling me to do that. I'm going to do it. So yeah, it will normalise it..

I: Yeah. That's, that's great. That's, that's all my questions. There's a couple you'd pre-empted me on as well and answered before I'd ask them. So that's been brilliant. Thank you very much for your time. I really appreciate it.

P: No worries. I enjoyed it. I'm keen to find out what the outcomes are. How many of these interviews have done?

I: Erm... 18 so far.

P: Yeah. That's quite a lot. Yeah. Well. Good luck with everything. Don't know if you're able to disseminate the findings by email.

I: Can do once I've analysed it. Happy to do that. Yeah, that's fine. It's just the going to be in my PhD anyway, so I suppose it's gonna come out eventually, sooner or later. So yeah, happy to do that. And I'll just make a note of it. And I'll email it over to you when I've got it sorted.

P: Great. Yeah. That'd be fantastic. Well, good luck with the rest of your journey, Tom. I'm sure we'll speak again at some point.

I: Cheers. Thank you again. Yeah, absolutely. Yeah, that's great. Cheers.

P: Take care then. Cheers.

[End of Interview]

Participant 4

I: Okay, so first of all, if you can just detail your experience within sport and any sort of notable clients you've worked with, or maybe teams or roles that you've had within those teams?

P: So I worked quite a few different talent development areas. So things like the ACE and now the what's called the DICE programme. So with Huddersfield Giant, British athletics, England, netball, British hockey, and British modern pentathlon as well. So I've done a few different things around workshops, kind of one to one support, depending on what that looks like. And I've been doing that for about four years now I think.

I: That's interesting, because you've had, obviously different sports and maybe different genders. Have you seen any major differences in the teams and individuals you're worth with within those environments?

P: Yeah, there's a huge difference from sport to sport in terms of how well-being and performance is balanced. And I don't think I've noticed it as much generically across gender differences. But I think within sports, there's still kind of different cultural perceptions if that makes sense.

I: So in your experience, have you found any current or even previous work, you found the mental health provision has been present within professional sport? Have you found that it's existed at all in any way? Or if not, why do you think it doesn't exist within that, based on what you've said?

P: Yeah. So then the talent development side, I've not had much experience on the mental health side at all. And it's quite restrictive, I suppose in terms of what you do there. But in terms of the kind of more full time roles, I've had with British Judo and now the University of Birmingham, they've both had some exposure, shall we say? So, within Judo, it's been a very hit and miss one. So there's not a kind of dedicated clinical or well-being person in place anymore. There was a kind of well-being advisor at one point but that role was kind of integrated into the performance psychologist and lifestyle advisor roles.

I: Have you found if anyone does have any potential issues, have you found yourself maybe in a situation where you've been immediately just have to refer them then as a result of that?

P: Yeah, yeah, we've had to do that a few times, especially judo. So obviously, not only as a mental health concern, a lot of eating disorders with weight making work. So around that it's been a it's been a really difficult one. And there's a lot of kind of areas where you start to realise, okay, this isn't really a performance issue so much and it just gets passed on to an external clinical psych then.

I: Have you found, in your experience people who've approached you and discussed that?? Have you found it's more difficult to do that, in a sense, because you're having to refer

them? Is it just immediately, like an external refer, or as almost like, pass the book within the environment to see who can help them first?

P: Well, if it's kind of agreed that it's definitely something outside of our realms, whether it's psychology or with the doctor, or otherwise. So the nutritionist often as well is drawn into, then it normally gets kind of left for the doctor to refer. So they kind of take on the role almost like your GP would, where they then refer you on to the kind of necessary support that they feel you need, which has kind of been agreed within the team.

I: Is there's any particular way with regards to helping athletes understand the mental health issues or understand their well being? because I know you mentioned there about performance and well being. Have you found maybe a dissonance between the two where maybe one is valued more than the other?

P: Yeah, absolutely. I mean, it's, I mean, I think it's the problem in most performance centres and programmes anyway, but from my experience, I've seen the well-being is always a factor. It goes into every performance into every kind of athlete's psyche, if you want to call it. And in that way, it's often kind of seen as less important, because the important thing is the performance because it's either a qualification event or further down the line it's an actual Olympic event, which is kind of where pretty much everyone's jobs are on the line. So in that way it yeah, it's definitely difficult to balance and I think for a lot of people is it does come almost secondary in those kind of cases. Because the culture is very much well, you need to win, because otherwise we might lose funding.

I: It's interesting you mentioned that about, even like the support staff as well, it's sort of everyone's in the same boat with regards to being performance driven, rather than maybe balancing the two.

P: Absolutely. And, I mean, they've tried a few times to kind of bring in either someone who's more removed and so that title isn't kind of performance, or its well being or even with lifestyle, it's often kind of tried to balance the two. But when it comes down to it, and you're at an event where winning this competition is kind of the difference between going through Olympics and not or, you know, qualifying for another major event. It's at that point, it's very much the focus is on okay, you need to win.

I: Yeah, absolutely. It's interesting, because it's almost from that perspective, and that understanding as an athlete, and as even as a staff member, I suppose you're then consciously aware that you're almost disregarding well-being for that purpose, aren't you?

P: Yeah, definitely. I think you fear in a lot of sports. I mean, I've seen in my own experiences as well that sometimes to the detriment of the athletes. So they'll be able to push through for a short period of time. But often it's not. Yeah, it's really not kind of conducive to long term mental and physical health. And that, yeah, I think that's, that's a really big part. Because there's lots of things around kind of more than an athlete and trying to work on that and show that there's so much more to people than just their competition and the the wins they can contribute as such. Yeah. When it comes down to on the day still. Yeah, it's

difficult to bring that across to everyone, especially the people who aren't directly involved in the wellbeing side.

I: What do you believe athlete perceptions are have mental health issues? Have you found that they're receptive to learn about them? Or have you found that? I mean, obviously, based on what you said, it sort of sounds it's almost dependent on the time frame, as well, in that regard with how you balance well being versus performance?

P: Yeah, I think that's a that's definitely a big part of it. But I would say predominantly, it comes down to the athlete, but I think nowadays, especially the younger athletes, are very aware of that, and a lot more willing or ready to kind of stand up for themselves and say, look, I need a break, or I need a bit more support on this side. So I think in that way, the kind of ere of well beings definitely more coming into focus for athletes, because they're starting to understand themselves too obviously, like I said, education through previous examples of it hasn't worked well, in terms of long term, but I think it's still difficult because sometimes it can be kind of stigmatised or seen as – especially when you're in a very physical, yeah, like a fight sport, whether that's, it can be rugby, or Judo, or anything like that, where you're physical and kind of meant to be on the edge like that. You can sometimes still be perceived as being weak. So I think that makes it difficult for some people, especially typically anyway for the guys. I think just generally speaking, I think people are more aware of it now.

I: Because, basically, I was I was just about to follow that up, then you sort of beat me to it. Did you believe that there's still a stigma attached to mental health issues within sports that you've worked in?

P: Yeah, I definitely think so. I think I mean, even as a psychologist I can see how many people are looking at my role as being someone who fixes issues, and doesn't necessarily help performance or, you know, makes you feel more confident or capable. It's until you kind of start out with conversation, the perception is very much, if you're speaking to the psych, there's something wrong, even though it's not clinical psych, and we're purely looking at improving performance. So yeah, I would definitely say around kind of mental health and psychology as a whole, there's still a definite either stigma or misunderstanding.

I: I was just about to say as well with have you found that even in staff members, or have you found staff members are very receptive to how you work? Because you've probably had it yourself. I mean, when I've spoken to others, and when I've worked in sport myself, there is a bit of a disparity between you as the sort of maybe like performance or psych member of staff versus, other coaching staff. I mean, I've had a bit of a mixed bag, myself, where I've had, you know, a nice integration with all the staff, and then I've been almost like a very separate, almost external member. So have you found similar experiences in your work?

P: Absolutely. So it's changed from sport to sport, and depending on what's gone before me, if that makes sense. So at Judo, for example, it was a lot easier, because they already had previous support from psychologists, that kind of experience of it, and were more aware of it. So that made it a lot easier to integrate and become a part of it. But there was still, for example, some staff members who are more old school, and their kind of idea Judo was a fight sport. And, you know, if you need psychology, and you're not coping with some of the

things like that, it can be construed as weak. But my experience in football, for example, is very different and quite negative. So I would say, when I worked, there was very much, yeah, that's very separate than that's like, an issue almost if you're kind of involved there.

I: Yeah. So if you're seen to be going to the psych, then it's already seen to be a negative essentially?

P: Yeah, definitely.

I: Yeah. Okay. What age group do you feel would benefit most from understanding or being educated more on mental health issues?

P: I'd say at the moment is probably a split between the older more experienced athletes who have who are kind of on their second cycle, especially Olympics and stuff like that, because things have developed so much even since 2016. But I would say at the same time, the younger athletes, so making sure you get in early and work on education and normalising it and showing that it is not just for when things are wrong. So it's kind of going to both ends of the spectrum. So going into academies and talent development side to be really useful and kind of normalising it. And that's the more immediate effect going into the kind of older and more senior age groups where people have experienced, they've dealt with these things previously, possibly on their own, or in a different kind of cultural environment.

I: Do you think having some sort of relatability for athletes and would benefit that educational process?

P: Yeah, definitely. I think it always helps to kind of give them a bit of context in that way. So whether it's kind of looking to other well-known examples in kind of professional sports, where athletes have spoken about it, or even just illustrating within their sport, if someone was going to share, I think that kind of mutual sharing is always really beneficial.

I: There's quite a prominent research area within mental health issues within sports where it's been suggested athletes suffer with adverse mental health issues during times of injury. So what is your opinion of well-being and mental health support during times of injury for athletes?

P: I would definitely agree. I think that it's a huge part because it is such a – especially if it's a long term one it's such a struggle because it's so isolating. The research has told us that but I think in terms of kind of the support and how the environment reacts I think it's a very, it's almost like a habit now when someone comes in is injured. The first thing is okay, here is your kind of rehab plan and go and see the psych. I think it's become almost habitual that does become part of your rehab. And I think in that way, it's quite good thing. But again, it kind of probably perpetuates a little bit of the idea that you're there to fix things rather than proactively support, if that makes sense.

I: I think that was a really good point, it reinforces that stereotype of a psych having to fix a negative, rather than, as you say, proactively. What is your opinion on how athletes are able to cope within and without professional sports? During times of injury when they're outside of that sport? Or even maybe moving towards retirements and or dealing with pressures? As you said, though, like Olympic cycles, where it becomes a lot more performance driven towards the end of that cycle? Have you found any major examples where athletes are able to cope well within all without their sports?

P: Yeah, I think in my kind of experience, when things have gone well, it's because they have quite a strong identity around sport, and outside of it. But it's almost like there's different versions of themselves, as in there's one is the competitive kind of athlete. One is when it goes to training. And another one's the brother, sister, friend, colleague, however you want to frame it in that way, it gives them more to, to their lives into their personal identity than just sport. So when there is, for example, injury or a global pandemic, I think that's when you really see the people who are more comfortable in that regard. Yeah, they say, Okay, look, I can't train but I can, for example, balance my life better in preparation for that, because I've got all this stuff to do. I'm spending time with family, job, university, sometimes things like that. I think in that way, that's a really good indicator.

I: Have you found any experience of athletes who maybe haven't been, as confident or proactive in that sense of managing two identities, as you put it, where they may be then struggled?

P: Absolutely. So we've had a few across the different sports where it's when someone gets, for example, a long term injury, and they're very much been completely immersed in that sport. Prior to that, it's very difficult to then start building up other things to look at. Speaking to lifestyle advisors, you see it a lot when, especially people are early exellers. So they're really positive, really good early indicators of development and ability. And then they get to a point where they're just like, yeah, this is just kind of what I do, this is what I enjoy most. And they have a good balance in terms of performance versus well-being, when you take it away. Everything rests on that sport. So now it makes it really difficult to fill that time, especially if it's something where, for example, like an ACL, where you can't train for at least three months at all, even before you getting to light rehab.

I: Yeah, definitely, I think long term injuries like that I've certainly found within my research area, it's usually a strong indicator of maybe like a pre-existing issue that that then comes to light, I think I should say, completely agree with you where, because you've got that singular identity, it's almost this really narrow focus in one particular area. As soon as that's taken away. It's sort of like, well, what, what do I do now? Now that has been taken away from me. So as I think I was a bit of a bit of a bit of a fright for the athlete, isn't it? Especially if it's early on in their career? It's like, well, what am I going to do with my life once this has been taken away?

P: I think it's summed up well, that it's almost pre-existing. But it just only comes to the fore, when they're kind of tested in that way. So with injury or deselection or a bad performance, whatever it is that brings out those issues and, yeah, makes it a lot more difficult then.

I: So, what would you recommend needs the most improvement with regards to aid in an athlete's mental health? So does it come down to a specific process that needs to be in place or a particular strategy that you think needs implementing or improving upon purely down to your own experience and opinion?

P: I would say definitely one thing to look at would be having mental health support as readily as there is physios. So I've seen in all my different sports where I've been involved, when you have to either refer or you want a second opinion, or those kind of concerns, it's quite, quite difficult, and it's never internally. So even if it's, for example, in the EIS, you can go through the EIS, and there's resources within that, but it's not within your direct performance environment. Because it's like, it's frowned upon, it's not the right kind of thing to show athletes or whatever you want to call it. But I think if you had the kind of resources ready and had people in that environment already, and normalising it, it would make it a lot easier. So it's not a huge break. So I mean, you've seen it in lots of professional athletes have spoken about it, like a lot of footballers, like Danny Rose and Lee Griffiths, who took long spells almost out of the game, to look after their mental health. But if that was in place, in training and in the environment, you'd hope that it could be dealt with and supported whilst things are going on, rather than when it comes to a breaking point.

I: Yeah. So instead of being reactive, you create a process that can manage and treat that pre-emptively?

P: Yeah exactly, and it just helps to normalise it as well. But this person is just part of the environment. And the same way that if you've got some issues in your knee after surgery, you go on to the physio, if you're feeling a little overwhelmed, and struggling with coping with lockdown, for example, you have a go to and it's not okay, who do I speak to? Is it the psych, is it my coaches or someone else? And it would just make it a lot a lot clearer, easier in that way.

I: Definitely. And have you found that in your experience, that athletes are more or less likely to seek support within their environments, or outside of their environments? And what I mean by that is, within previous research from my PhD, I've had participants sort of allude to this fact that they don't feel comfortable seeking mental health based support or well-being support within that environment, sort of building on what you've already said, because of fear of a weakness or a stigma is attached to it. So have you found similar in your experiences? Where that is true, or have you found otherwise?

P: Yeah, definitely. I mean, I wouldn't say it extends to all sports and all athletes, but generally speaking, I think, yeah, it's definitely preferred when mental health stuff is external, for example, working with me, and we're looking at a little bit of emotional periodization. And dealing with stress and making sure that that doesn't get in the way. That's always very, almost scary for athletes, because it starts to delve a little bit into well-being and things like that. And it becomes more of a concern, something they're not as comfortable with. Whereas if you're working around pre-performance routines, or some confidence or some things like that, that is seen as strong and helpful and performance base. That's a lot more accepted.

I: Yeah, I think it's probably they're more in line with what they're expecting, rather than delving too deeply into their own personalities or their own mindsets, then, isn't it?

P: Yeah, yeah, exactly.

I: The previous professional athletes have reported they are more likely to speak and discuss their mental state with a physiotherapist. So why do you think pro athletes are less likely to seek help from a trained professional with regards their mental health?

P: Yeah, I would definitely agree that I think there's a few things to it. So one is there's not always access. So not everyone has the psychologist or a lifestyle or mental health support system. But pretty much everyone has a physio. And you spend a lot of time with them, you get comfortable and talk to them a lot. And there's already that relationship in place. So reaching out to them is often felt to be kind of safe and supportive. Whereas someone coming in and seeking out mental health or psychological support is normally I find it a bit more difficult because they might not know how they might not have even spoken to that person. So I've had it before where if an athlete says no, I don't need any psych, outside of group workshops, you won't see them. And then if something comes up, they won't really want to talk to you, because they don't know you. Thinking that way and the combination of it works well, because it's someone they know and they trust already. As well as just not having that not willingness to open up and say, Oh, I need mental health support. And rather, it's just oh, I need help. Yeah, I think that makes a lot easier.

I: Do you think that's a key area then for sports psychologists within that environment is to develop that trust and that that relationship with athletes to help break down those barriers and break down those walls to encourage them to speak to you?

P: Yeah, absolutely. And just to kind of normalise them to look, this isn't, there might be a stigma attached to it. This isn't saying you're unwell or unfit to train or participate it's just that we're trying to make you better in a way and more comfortable and we're able to cope with these things. And I think in that way, definitely, it's a yeah, it's a huge thing to try and normalise that.

I: So in your opinion, then what do you believe needs improving in order to better prepare athletes for a transition out of sport? So building on what we said earlier about that identity crisis with injury? What do you feel needs improving I suppose you're in the system to aid that transition?

P: Well, I think there's, there's a few things. So one is not often having that in place early on. So lifestyle advisors tend to only really be at the very top end of the game. And when they do, they will only start to work on athletes typically on that kind of stuff when they're close to retiring. So I think normalising these conversations, and it's alright to be more than an athlete. Earlier on, is really key, because I think you see a lot of academies, especially in football, that it's kind of an all or nothing approach. If you come up with nothing, whether it's a first pro contract or not reaching the Olympics or having an injury that ends your career early, that is really tumultuous, and something that they're not equipped to deal with. Because those kind of compensation don't come into play as comfortably, I would say,

until an athlete is experienced and has been around the block and has not necessarily achieved but just been around the sport for a longer period. And it's something that they're more open to. Whereas I think 18-19 year old is just coming through, you start to say, oh, what you want to do after, when you retire? It's like, Oh, you know, I don't know. That's, that's not important right now. Right now it's getting into the first time. It's getting this medal. It's Yeah, achieving a certain level. And in that way, it's something that I don't think it's easily approached. I think normalising there so that you do overcome those obstacles, when they arise rather than just in the very foreseeable retirement kind of way where I think that would be a huge help.

I: Do you think there's a midpoint then? Or do you think it is a case of the earlier the better that they understand that or maybe waiting for that, I suppose like that critical or that key moments where they've transitioned into the first team, and then it's establishing that or do you think it can be done earlier?

P: I definitely think it helps in the first team, because I think even if you brought it in earlier, some people would be unlikely to listen to you. Because they're so single-mindedly focused on achieving that. But you've seen it in some really, really horrible news, like the Man City youth player who was released, didn't really have that support available and that is a huge life turning point. And that ended awfully for him, because he wasn't able to cope with that. So I think in that way, having those support systems in place earlier is really essential because it won't ever just be retirement. It might be that you have an incident like new term, something in in the year 20 and a have to retire happens all the time. Yeah, it might be that you get dropped. You're not good enough. You're anything like that, and I think doing it retroactively then is really difficult. Bordering, potentially impossible.

I: Yeah. Because they've already transitioned into that status without proactively engaging in preparation.

P: Then it's very much kind of, okay, well, can we give you to give you an identity, but it won't be good enough or the same because it won't be what they've been working for possibly 15-20 years to try and achieve. Yes, definitely not the same is it.

I: That's a great point. And I think that's, that's all my questions. Thank you, Christian. You've answered him before I got chance to. And but know that that's absolutely brilliant. You got anything else that you feel you want to add or happy?

P: No, I think that's Yeah, sums up quite well. But yeah, definitely. It's a really important piece of research. And I think getting something out of this in terms of a physical change or a new role potentially would be really, really useful because it is - It's really important across all levels of sport really, and we see that more and more all the time.

I: Yeah, absolutely. I completely agree. That's great. Thank you very much. I really appreciate you taking the time to speak to me. And that's been that's been really interesting. Thank you.

P: Very, very welcome. Yeah. Thank you for having me. It's all I t

I: Thank you very much. Cheers. Enjoy the rest of the day.

P: Yeah. Thank you. You too.

End of Interview.

Participant 5

I: first of all, if you can just detail your experience, but also any notable teams or any individuals, clients, etc. and what you've worked on that sort of thing really?

P: Yeah. So I'm a chartered sports psychologists, and I've been chartered for just over three years now. Started training in 2013. So I've been practising for about just over seven years. In terms of clients that I've worked with, well, currently, the majority of work I do is with Talented Athlete Scholarship Scheme [TASS]. So these aren't necessarily professional athletes, but they are high-level athletes. Competing at a very high level. Yeah, that's kind of the majority of the work I do. And then in and around that just working on kind of private client isn't necessarily elite level, professional athletes, but of members of the general public. Before that, I've done a fair bit of work in County Cricket. So, during my training, I sort of took on a role within County Cricket, not an academy, but the emerging player programme. So working with players between the age of 13 and 16. And that was probably the main bulk of my sort of training really. Oh and I have worked for a couple of semi-professional football clubs, but that's probably the highest level that I've gone to.

I: Yeah. Okay. So in your experience, have you found that any mental health provision you've encountered within professional sport? Has it been present? Has it been useful when it has been present? What have you found within your experience?

P: TASS has been really good? Because they have an inbuilt referral network. So I've had to use that a couple of times when I've been working with a student athlete, and we've done assessments and I've realised that you know, they got the symptoms of depression or generalised anxiety. And it's been very easy to then further on through the people who then outsourced the mental health support to. So that's been pretty smooth running. I think in my work in County Cricket, there was none. Which is interesting. I was reflecting on this recently. And we sort of think that, yeah, the mental health support is becoming a more prevalent issue within the adult level. But I do wonder at the junior level. Especially given the mental health disorders tend to develop around the age of 14. And so you wonder whether mental health support is as prominent at the younger age groups as is at the adult level.

I: Yeah. So would you say that more support? Or maybe I suppose more education needs implementing a youth levels?

P: Yeah I think like you put yourself in the shoes of a trainee sports psych. And they're typically a) made to go work with younger age groups. And even though it's actually harder to work with younger age groups. Second, like to go to workshops that they do will be on confidence or on controlling emotion stuff, they don't have a go to workshop on mental health. Or at least, I don't think there's enough training around mental health support for youth. So I think, sort of reflecting back yeah, I said, there wasn't the provision. But yeah, I also wasn't really in a position with the training that I'd received at that point to really be aware or know where to refer people on now if I was going in. Yeah, I do things a lot differently. At the time yeah there was very little. And I wonder if that didn't work the organisation now so I wonder whether – I doubt it's there even now to be honest.

I: Well, like you said, I think the issue is potentially if those issues are arising earlier, they're essentially carrying those issues for a longer period of time going untreated?

P: Cases of, you know, Major Depressive Disorder sort of generalised anxiety they tend to form around those teenage years.

I: Yeah, absolutely. What have you found that in your experiences worked best in order to enhance I suppose not just mental health issues and mental health in general but also well-being in athletes.

P: From my experience, I think it's about having a joined up approach between performance psych and psych for well-being so I've been in a situation before where I was working with Cricket Club and there was this awkward situation where I was working with the emerging player programme and then the academy, which is obviously above the emerging player programme had an unqualified psych working with them. And then the academy manager came to me and said, I know we've got so and so doing stuff on performance but I was wondering if you could come in and do some stuff on the well-being. So they want this idea of having two psychologists one doing the performance side of things and one doing the well-being side of things. I just said no, because actually it needs to be all joined up. Because I think there's still a little bit of a tendency to kind of treat psychology for well-being as separate from psychology of performance.

I: Well, I was I was going to ask you, as well, in your experience, have you found athletes, maybe even been aware of the relationship that that wellbeing and performance can share and the benefits it can then have on performance or have they maybe thought they've disregarded their own well-being in favour of just focusing on performance?

P: Yeah, I think there's still that idea that it's there's there needs to be a trade off between the two. So if I'm going to invest time in the psychological side of my well-being it's going to be at the detriment of my performance when it's really not the case. So and that's within the players, but also I think, within management as well.

I: Is that something then that we could potentially look at with educating the coach or maybe embedding that sport psych element throughout the coaching staff as well?

P: Yeah. Yeah. But in terms of sport psych delivery, the well-being side of things is not something that's a silo that operates on its own it's actually integrated in and deciding that it's not one or the other, you can have both at the same time.

I: Yeah, absolutely. I think as well, this, certainly, in my experience, as you quite rightly said, often there's this misconception that you need to sort of disregard your own well-being in favour of performance, which I've found the opposite tends to be more conducive to a successful performance. That if the player is better, sort of emotionally in their own well-being, they tend to perform better.

P: Also, the higher level you go, the more being an athlete is part of that athlete's identity, wellbeing and performance are intertwined. You can't separate the athlete from that part of their identity. Yes, you can add more identities, which is helpful, but you can't separate that from their identity. So if someone is not performing well, it's going to impact on their well-being. So they're not separate things.

I: It's interesting that perhaps it is perpetuated in the culture where they believe that is the case. What do you believe athlete perceptions are of mental health issues? Have you found that athletes tend to be receptive to learning about them? Or have you found the opposite?

P: I think it's getting a lot better now. Certainly, in kind of the years where I've been practicing. Over the last seven years, I've seen the awareness of this [mental health issues] is getting much better. I've done a little bit of work involved in a cricket basement of charity. And you seeing over the last sort of few years, you know, the team GM you present to and do workshops with are a lot more receptive now. And I say what they would have been a few years ago. Definitely.

I: Do you think do you think that's something to do with the terminology or the connotations associated with mental health? Or do you think that's maybe just their own sort of focus just on performance?

P: I think my big thing is the anecdotal cases coming out of the media, you've got more athletes who have competed at the highest level disclosing their stories relating to their mental health. I think it's had a massive impact. I think sometimes it leads to a false narrative that sort of, there's more mental health problems going on in sport, than the rest of the population, there's not, there's just more athletes coming forward now and disclosing that. So I think that's had the biggest impact on reducing stigma, I think, like feedback I've had from workshops is I want to hear more anecdotes. Want to hear more stories. You know, rather than, you know, all these tips around managing your well-being they just want to hear these stories about how other people have looked after their own mental health.

I: Is that some sort of relatability for them, or they can maybe see themselves in that?

P: Yeah. I think so.

I: I suppose it makes sense. Because you're almost creating an opportunity as well. This is what could potentially happen to you if you follow the same path under these circumstances or maybe if you're not as emotionally intelligent potentially.

P: Or the idea of this person performed at the highest level but yet still had all these other things go and had to cope with all these other things. Therefore, you know, it's not detrimental to me to put my hand up and say I go through that as well.

I: Yeah, that's a really good point. So, there is quite a prominent research area surrounding the effects that long term injuries have on an athlete's mental health. What is your opinion on the availability of well-being and mental health support during times of long term injury

for athletes? Do you think it's effective? Or have you found it's, again, solely based on physical rehabilitation rather than psychological?

P: It's patchy. It's one of those ones where I think it's only made available if the athlete asked for it. Whereas a lot of the time, the athlete might not be aware that it's something that they require, in order to help them recover from the injury. I think there needs to be a little bit more of, you know, say you're working in a rugby team or cricket team, whatever, athlete has suffered long term injury that's going to have them absent for months, I think, you know, at least one session with the psych should be compulsory. But again, it's not certainly the cricket organisation, I still dabble with every now and again, but I so go in every now and again, but not very often, is very much like 'oh the psych's there if you want it'. But despite the increased awareness, I think there's still a case of athlete's knowing that or at least not knowing that they need support.

I: So in some of the previous research that I've done, there's been some reports where athletes have felt maybe more comfortable or more at ease seeking some sort of support or even just speaking to a physiotherapist during the times of injury. Why do you think in those cases, those athletes have been less inclined to seek help from a trained professional and have maybe found that they prefer to speak to a physio in that instance?

P: I think it's the rapport that they might have with the physio, so they would have regular contact with the physio anyway. Up until that point, and actually have physical contact with somebody, this kind of the idea that because they have physical contact with the physio, it does create a sense of trust. Because they're putting their body in the hands of this person, it does create a sense of arguably a much stronger level of trust, compared to a psych, and particularly if the psych's not good at developing rapport and becoming one of the multidisciplinary team, or if the psych is – not their fault – treated as kind of like, off on the side. Off on their own little silo rather than actually one of the High-Performance Team.

I: In terms of how that support provision is embedded in the environments that you've experienced, have you found that it is more accepting of the support available for wellbeing, rather than just being a separate entity away? So say, for example, the common misconception is are you struggling goes to the sport psych. Whereas really, it's much more than that, isn't it? It's more about maybe managing emotions. It's not just about confidence and motivations.

P: Yeah, my work within cricket is still very much seen as a 'Yeah, you got a problem, go see a psych', right. Whereas TASS, it's much better Tass, you know, all the athletes on the programme, get X number of sessions with me. They see me for that number of sessions. And if they need more, funding can be found to supply them with more. It's almost like an expectation that I'm going to see every athlete for a minimum of three [sessions].

I: Right, so it's at least some opportunity for them to receive that support. So even within the environment itself.

P: Yeah.

I: Have you found that athletes are more or less likely to seek that support inside their immediate environment? Or have you found that they're more likely to want to come to speak to you outside of that environment?

P: I don't know. I think the issue with in the county cricket is that Yeah, I'm very much treated as the outsider, I was very much treated as the outsider. And the coach would only encourage people to go talk to me if they thought they had a problem and all this kind of stuff. Yeah. Usual sort of usual problems usual issues. Whereas, I think TASS I am very much seen as part of the multidisciplinary team. So, it's very much you got lifestyle, you got psych you got S&C, you got the nutrition all kind of working together.

I: Yeah. I suppose what I mean there is that level of trust, you know, if you're dealing with a client, say, for example, they were a professional footballer, and they came to you and said, I don't feel comfortable speaking to the psych within my environment. Have you ever come across something like that before where there's maybe less confidence to disclose any – I suppose the best way to term it is potential weaknesses or potential issues that could affect their ability to be selected?

P: Yeah it's a trade off, isn't it. So if you're seen as too much as a part of the inner sanctum, as it were... There is going to be that perceived risk that disclosure of information is going to affect, you know, team selection with the coach. But in that, in that situation, I'd say the most important thing, therefore, is contracting their confidentiality. Making that explicitly clear to all the players and all the coaches about what is shared and what is not shared. Or having levels of confidentiality. Where you actually, you know, before you talk about something, talking about something with a player, you ask them is this a level one or level two? I've used that before where it's like, is this is this like a level one where it's like, you don't mind me sharing this with the coach, if it's for the betterment of you and your performance? Or is this level two, where it's like, we keep this between ourselves? Sometimes I think the way confidentiality is taught to trainees is very black and white... Sometimes. Whereas, I think there is a place for having levels of confidentiality, as long as you're open and honest, and there's negotiation.

I: I suppose in that sense, then you're almost putting the power of control with the athlete. It's to say, you know, I'm trusting you with this information, or as you said, the level one situation is I'm happy for you to share this. And so I suppose you're then building that sense of trust and that relationship with the athletes?

P: Yeah, because I've talked to plenty of athletes who say I'm happy for you to share this with my coach. And plenty of instances where it's like that. But there are obviously going to be instances where they're not going to want the information shared with coaches. So it's just making that explicitly clear.

I: What is your opinion on how athletes are able to cope within and without their professional sport? So, maybe consideration of how they are able to cope with long term injuries, or if you've worked with anyone who's maybe approaching retirement as well, or even sort of day to day struggles? Or the pressures associated with sport? How have you found athletes' ability to cope with that? Has it generally been positive?

P: I think sometimes we as sports psychologists, we're always looking for a problem. We, I think sometimes underestimate athletes' resilience. So like, when the first lockdown happened, I'm expecting to have loads of calls with TASS athletes around sort of how to manage lockdown how to manage the fact they weren't training and this and the other. But the vast majority of the athletes I checked in with were fine. Probably because they're student-athletes. They do have studies to focus on. But even so I think sometimes I think we underestimate a little bit. The resilience that athletes have. So that's, that's certainly an example. Because I think we hear all the horror stories all the time about certain athletes who have struggled to adapt to retirement struggled with injury, we overlook the stories of the ones who do cope very well and who do adjust very well. I think there is a problem sometimes where we do pathologize professional sport is just a living hell, when actually there's plenty of athletes, I mean, the vast majority of athletes adjust very well and do cope very well, are resilient. So yeah, from my experience, certainly, yeah, using that lockdown as an example of the vast majority of student athletes I work with cope very well.

I: What would you think that's down to? Are they maybe more consciously self aware in terms of what they can and can't do well, and they recognise what is good and what is bad?

P: I think so. I think for the student athletes, that the difference was that a problem that they always wrestle with when things were normal, was trying to balance studies and sport. It was like, perpetual conversation was like, how are you balancing this compared to this? And lockdown happened, even though Yeah, losing sport was, you know, a significant part of their life. It's solved that problem of how they can just focus on their studies. Okay, I now have time where I can just solely dedicate my time to my studies and nothing else. So from that perspective, purely for my own experience, it was actually quite – I wouldn't say a positive thing, but it simplified things for them.

I: It sounds like they've got a much broader identity in terms of their awareness of themselves. So yeah, I'm not just an athlete, I'm not just a student. I've got this positive mix of different identities, so help them cope better.

P: Yeah. Yeah, that was a thing. Another factor.

I: It's really interesting. A big question this one. What would you recommend needs the most improvement with regards to aiding athlete's mental health? So, things like processes or strategies? Do you think it's something then the organisation or the NGB needs to do better? Pretty broad question, really, but it's just entirely dependent on your own experiences and opinion, so essentially what do you think needs the most improvements?

P: Yeah, I think, really, it's just a case of, I mean, the biggest, the biggest thing is just processes, processes of referral. We, as sports psychologists can deliver as many webinars, seminars, workshops on psychological wellbeing as we want, we're not in a position to treat athletes who actually have major depressive disorder, generalised anxiety. So the referral pathways need to be in there. And certainly for like a cricket club, for example, you know, cricket club, should have an organisation that they refer their athletes on to – a named organisation. A single place, like a TASS, like that is a referral process, referring a couple of

athletes through TASS was very straightforward. Very easy. So it's just having those, the process is in place more than anything.

I: I mean, because we've talked about referrals, do you think there's potentially room there to have an available clinical psych or even like a sport psychiatrist within that multidisciplinary team? Or do you think it is better as a referral system to have them as an external source if and when they're needed.

P: It's difficult because I think if they actually had a clinical psych on staff, I think there is the risk that the management would then say, well, we don't need the sport side, we've got clinical psych. When they're two very, very different beasts. And two very, very different things. Certainly, from my perspective, I don't think that a lot of sports would necessarily have the budget to employ a full time sport psych on top of a full time clinical psych. So I'm not sure how that will work to be honest. Yeah, I think it's just about having those referral networks, just having a consistent, very clear referral policy, which I think is managed by the sport psych. Because the sport psychs should have the knowledge of that and those procedures. So I think part of their job description should be to manage those referrals.

I: So in that instance, and we've got a really nice straight linear process of this happens. We can manage the referral, and then you go straight to there, rather than maybe it's a constant pass the book situation.

P: Because the sport psych should have the knowledge and the expertise to identify psychological disorders. But they're not they're not in a position to treat or intervene with but they should have the knowledge and expertise to identify. So therefore, it should be their responsibility to refer on. They should actually have that written into their job description.

I: I agree. So, do you believe then there's there is a stigma of adverse mental health prevalent within professional sport, or do you think it is sort of diminishing or it is improved?

P: I think it's diminishing, yeah. I think that stigma is definitely reducing. To the point where, certainly in my private work, this isn't with elite athletes, but in my private work, I'm getting a lot more people come through who are kind of on that much more on that borderline or whether I'm actually in the position to best help them or not. So on the one hand, you've got more cases, more stories of athletes open up about their mental health, which is leading to other athletes at the sub-elite level to think, Oh, I need to get some psychology in my life. Going to see a sports psychologist, but actually, they don't really need sport psychology. All they need is counselling or clinical psych. So I think it's definitely opening up the awareness of sport psychology. But yet also, I think it's showing up, in some cases, sport psychology of not being what a lot of athletes need. That makes sense?

I: Yeah, completely get what you're saying. Yeah, it's almost treading the line, isn't it? So just one more question for you. What do you believe needs improving in order to better prepare an athlete for the transition out of sport? There's been a lot of reports where athletes have

maybe struggled upon retirement. So, what processes and strategies do you think need implementing in order to better help athletes coming out of the sport?

P: It's a good question, not something I'd really done to be honest, much work in. I mean, given that the majority of the athletes I work with are young athletes who are at the start of their careers. I can't say I've ever really done any sort of work around, exiting that. Exiting the sort of pathway as it were. I think a lot of the work needs to be done before the retirement. I think we talked a little bit earlier about having a healthy number of identities. So really, I think the work shouldn't be done the second that the athlete leaves the system, the work should be done whilst they're in the system. I've been, It'd probably just be the one thing I would push for. When they're active, it's more proactive.

I: Yeah. When would you think about integrating that?

P: I mean, the second they enter the system, to be honest. Because it's not just a benefit for when they eventually leave the system. There's potential benefits on the performance pathway as well. Having healthy number of identities is a legitimate positive strategy for developing good psychological well-being. Has benefits for them and their performance, and their well being whilst they're on the pathway also has benefits when they leave pathway as well. So I think, yeah, probably what I would suggest would be a good approach.

I: Yeah, absolutely. I think I would agree with that as well. I think it makes sense. Because you've got that long term strategy of interests outside of the sport then it doesn't then get to that point where you're maybe 6-12 months away from retirement. And then you're like, oh, what do I do now?

P: Because again, this is something that again, forms during teenage years. You know, this process of identity foreclosure, where young athletes solely identify as one identity, I am a I am a cricketer. I'm a footballer. So again, the answer is early intervention.

I: So creating that awareness that you don't have to put all your eggs in one basket from the get go, then isn't it?

P: Yeah, I was discussing this with some practitioners the other day about creating like a experiential activity based around roulette wheel. So you have your table of numbers, and each number is a different identity. And depending on how many identities you have, and identify within yourself, that's how many numbers you get to play on the board. Then you get given chips, and then you have to kind of like, proportion, you know, your spread to chips across the numbers you have available to you, you spin the wheel. And so, if you've only got a limited number of identities, it's like basically putting all your money all your chips on one number And then spinning the roulette wheel and then hoping that it comes off becomes off, the rewards are fantastic. It's great. If you only have one identity as a footballer, and you're successful as a footballer, it's the best thing it's the biggest high is fantastic loads of awards to be won. But it's a massive risk when you don't, whereas if you have multiple identities, you could take the low-risk option, sounds a bit negative, but when it comes to protecting your well-being. Being able to spread your chips Round the numbers around the roulette table, then spin and then slowly recoup the winnings that way.

I: Yeah, absolutely. No, I think that's a really nice way of putting it as well. And that's all the questions. So, but thank you very much for speaking to me. I really appreciate you taking the time to sit down and talk with me.

P: That's okay.

I: Yeah, it's been really useful. Thank you.

P: That's alright. Best of luck with it. Cheers.

I: Thank you very much. Yeah, enjoy the rest of your day.

P: Thank you. Cheers. Bye bye.

End of Interview.

Participant 6

I: So firstly, in your opinion, have you found the mental health provision in professional sport has been useful or successful in any way? Have you found it to be present? Or has it been completely absent?

P: Oh, probably all of that. There are guidelines – the European tour, in golf, each golfer actually has a handbook, a little card, like fits into your wallet, which is a medical card. And that has guidelines because they're responsible for themselves. It's got drugs, what's banned, what's not banned, sort of standard stuff. And there is a section at the bottom in terms of mental health. And it just recommends, so they might have the European tour, for instance, have a massive truck that is a physio unit, so it's a mobile physio. So if you twist your ankle, you're going there. And it could be any one of 152 golfers that are using that or those physios. With mental health it might be we have a provision that might be in Amsterdam, you've got the local Amsterdam clinical or sport psychologist that could be a different person because you're then in South Africa the week after, and then someone else in Ireland.

I: So do you think there's probably a lack of continuity?

P: Yeah, it's definitely a lack of continuity. Because if you're a golfer, even me as a corporate practitioner, or a sports psychologist, it could be called Bill, could be Fred, could be Janet, you've just no idea who it is. I think in football, let's say the psychologist is Bob, you might have mental health issues or think you have, you can build up over four weeks, six weeks and you think yeah Bob seems like a nice bloke. I'm gonna go and see him. Not today, I'll talk to my wife when I get home today, but if I have a bad day, I'll go and see him. So they're there in the environment, you know, like a friendly guy. He's approachable. He's got a sense of humour. He cares, he looks smart, he has breakfast with us. So I think it's fairly easy to access. Now you land in Amsterdam. This week it's Janet. Who's Janet? What will she be like?

I: The process starts again?

P: Yeah, exactly. So each time it might be oh she looks a bit timid, or a bit aggressive, whichever one it may be. So you're never really, there's no sort of internal breakdown if you were low or and it affects confidence. I think any type of mental health issue, because of the way it is I think there's a time period before you say I'm going to go to the doctor. Or I'm going to go on and see that psychologist. Whereas if you wake up in a rash tomorrow morning, you will just ring a doctor. And you will go. I think with psychological issues. That degree of familiarity, not rigid, but set structure is helpful. And you then see the difference. When I first went into football, you're introduced as a psychologist, but at that point, I was on the degree or the MPhil pathway. And it's like, all you who've got a fucked up head, go and see him. No one's even asked what you do or what your specialism is. Whereas, I'd sort of say, well, I'm a sports psychologist, I'm not clinical psychologist, my interest and professionalism and expertise, if you want it, is getting you better at riding that bike or defending or whatever it may be. I understand mental health and I'll be empathetic with you and I'll sit down and I'll listen to you. I'll do what I can, but there will be a point where

I'll say, Have you seen the GP? Have you seen the physio? Has anyone referred you to a clinical psychologist? Have you spoke to the FA? Have you spoke to Sporting Chance who were prominent in football at the time. So you're gonna push them down that pathway if you will. Whereas with golf, you'll get, your're around then and you live with them. So you might be in the hotel together or you might have a house. And that could be you and a couple of golfers or it can be family. So you'll sort of see the... I had an instance, we're in Scotland. And we played two days, we missed the cut and went out for a meal. And then we had a couple beers. And then this particular guy said, I think what you're doing is fantastic. I can see my golf improvement. And I can see perhaps realising the potential. But what I really want you for and why I've hired you is because I'm having difficulties with my marriage. I've been seeing my GP at home and I'm anxious. And it took him eight weeks to get to this. But he's engaging with me all the time, as a sports psychologist, in terms of using data to measure performance to create a deliberate practice environment, probably putting more pressure into the melting pot. Now you've said to people or said to him initially, this is what I do. So he knows what I do. You'll say that, as a psychologist, I can help you in other ways but that might not be me direct. It took him six weeks, to eight weeks. And then it's come out after three pints.

I: Do you think that's because he's got to a point where he feels he can trust you?

P: Yeah, he's not seen me on the golf course, we're not talking about why have you missed that cut, we just start talking about the food. And you normally drink Guinness. Is this what you do at the weekend? So he's seen me as a human being. And then probably opened up or said that to me, not because I'm a sport psychologist but I could have been his mate in the pub really. But at which point, I'm thinking we've got a whole new dynamic here. We're gonna have to talk about that and decide what to do, and how to do it. So suppose in answer to your question, the structure or the provision, in that kind of anecdote, it is different in both. In golf, where they get that card to get that medical thing, they get that support, but it's different all the time. But in football it's kind of there. But it's invisible as well, because it's a vast training ground that's got four buildings, and 25 acres. The PFA's information on mental health might be on a leaflet on a coffee table in the reception, or it on a business card about that big, or a noticeboard in reception. In golf, you go to registration and you get an envelope and that envelope has your course plan, the course card, the times that you're on, your access, your hotel. That card, and the physios card and other medical things. So it is something that you sign for each time you get there, so it's probably every tournament a golfer goes to they know that psychological support is there. I don't think a footballer walking into a training ground, let's say at [confidential] where I worked, or [confidential] or [confidential] goes in and is aware that today, psychological support is available through your governing body. They'll know if there's a psychologist on site, permanent, semi-permanent but more performance related. Still for mental health it seems to be in this stage that it seems to have been in forever for me. We're raising awareness, we're raising awareness... Are you raising awareness or are you telling me about the latest person who's got problems? Then publicising that and getting that in the paper and putting that on TV? Surely we all know that there are problems out there and people that are suicidal, people are suffering with anxiety, depression, addictions. I don't think I'd go into a football club and find, out of 70-80 people, anyone that actually doesn't know that that's happening. I don't think there's an awareness of the provision and how you can

manage it, treat it, look after it, dig into it, get from A to B. I don't think there's an awareness of that. And I think that is a problem. In particular in football. So they differ there.

I: Just on that point, what do you think athlete perceptions are towards mental health issues? Like you're saying, in golf, you've got to sign for it. So there must be a level of consciousness there in terms of, Oh, I know it's there if I need it, whether or not I use it is my choice. But what you're saying in terms of the football aspects, it's sort of a bit more, I mean, to use your own words; invisible? So are they a bit more receptive to it? Or is it just all performance based?

P: I still don't think they're receptive to it. Because of the environment and the culture and the demands. To win a game, in a team environment... If I'm playing at centre half with you, and I'm aware that you've got mental health problems, I'm straight away thinking is he okay? So, instead of going into that game with a focus right, and marking this person, we're playing this high up the field, fullbacks are gonna be in front of us. These are the dangers, these are our strengths and weaknesses. That is what I call tunnel vision, or focus, process and tasks going into that game. Now on top of that, I'm thinking, and by the way, is he alright? Asking if you're alright. I'm looking at you and I am worrying about you. So that is instead of one cognitive process, I've got two going on all the time. And I think that is then a problem in that scenario for both them centre halves. Because the other one might be thinking, alright, I've told him, what does he think about me? So, you've got another thing to think about. And that team perspective or that coach really doesn't want that. I think there's an acceptance that these problems are part of human nature. They will happen. But I think it's more, well, we'll now remove you from the equation until that's fixed. And then you can come back. And I think individuals are more accepting that this is likely to happen to me, because that's probably one of the good things of the awareness because they then think, right, it is happening. It's normal. So the awareness has promoted that. But then it's when is the point or when do I come out or expose myself, and how do I do it? And also a way to do it. And I know I'll be accepted and looked after. But, is the start of the end for my career. Because it's just the way it is in football in particular. I don't think it's prejudice against psychology. I think it would be the same with someone who's got a calf strain. We can't carry them either. I don't want to play centre half with you having a calf strain because I'm thinking can he turn quick if he turns, or is he gonna push up same pace as me? So it's not sort of discriminated. But it's still not accepted.

I: I know you mentioned cycling, it's a bit of a weird one cycling because there are elements of being in a team, but there's elements of individuality as well. Have you found anything different or similar within those environments compared to other sports?

P: The time I spent in cycling, they are very good at self-managing. They're very resilient. We train for long periods to breaking point, to absolute exhaustion where they can't get back on the bike. But it's kind of... normal. That they expect that to happen before they start. There's no blame on anyone else or no reliance on anyone else, even though you might be in a team or an individual within a team. They'll eat all day, they'll turn up with loads of water. They're responsible for their own backpack, the food that's in it. They don't actually have a dinner hour. It's like a tangerine or an apple or a granola bar or whatever, every 30 minutes just to

keep that food going, but that avoids fullness and tiredness and that type of thing. They're responsible for their own kit. A bit like a military type environment, whereas a footballer; What time is dinner? It's at one o'clock. We're all eating fish, we're all eating three ounces of fish. Two milligrams of salt. You're going to get your kit at five past ten, you'll be number 11, he's number 36, etc. Responsibilities are taken away from them. They're over-provided for. Then we're looking for individual brilliance or decision making on the pitch, but you're not creating that within the environment. Now, I think because the cyclists have got that, they'll take responsibility. And these are young ones as well, they're 15-16 and on the Olympic programme. And then they'll come out and they'll sit down and you ask what did you do? They'll go, well, I went in front of him there, I decided to make the drop off 18 seconds instead of twenty because he or she were flagging. And then decided to go to the bank and attack there. They just made all the wrong decisions. Whereas in football, they'll be like, well, I didn't know whether you wanted us to play that deep gaffer. He's fucked off down the left and you said that we're playing like this. So I've stayed here. The coach will say, well we've become disjointed now, do you not think you should have done something about it? Well, yeah, possibly but you never said anything and he's not gone. It's like it's all open to questions. Is this decision making? So then, in terms of the humanistic side of things I think they are – I think a cyclist would say I don't feel good today so I will sort this out. And they've probably either called a psychologist or spoke to the GP without even knowing and just kind of got on with it. You know, they're part of the English Institute of Sport system. So they can access whoever and whatever. But I just think they're a different human being, different creature. They review their own training, they do online training blocks. So you've been out for a 16 hour ride, they almost sort of write a qualitative and quantitative report. I felt good. Why did you feel good? Probably because I've had so much sleep. Three miles in there was this hill and I attacked it, there was a few cars and there's just so much detail. Whereas footballers are coming out and a coach is saying what happened today? Let's watch it and wait for the coach to tell us what happened. So maybe that builds a better decision maker, humanistically, or better self-managing person, just that environment or that culture that they're in. I don't know.

I: So do you think then, under that environment, because there is a sense of responsibility or a bit of a greater level of self-awareness? Well-being and mental health issues-wise, they probably, from the cycling perspective are more inclined to recognise it earlier, maybe manage it better?

P: Yeah I think they're closer to the normal population, whereas you know, someone who lives next door to you he's off work, feels a bit down, you'll ring the doctor and get on with the process. And I think that's what a cyclist does. I suppose the three sports are different, really.

I: What have you found most helpful in terms of enhancing understanding of mental health issues in athletes?

P: Life experience and age. Definitely. I've seen them all. I've had a suicidal person that you've got to deal. You refer them clinically, but you don't just like put the phone down and say I'll ring you back. Are you alright? Where are you? Where are you tomorrow? Why are you feeling like this today? We're gathering a bit of information, and you're trying to have a

human conversation within that as well. Have you had your breakfast? Are you at home? And then you get to a point where you've got some confidence and say right, this is what I'm gonna do now. I'm going to ring this governing body. I'm going to ring this hospital through the PFA or where we go. And I'm gonna do this now. And I'm going to ring you back in five minutes, and tell you what's happened. So you're almost verbally documenting what's going on. And then, is there anyone with you? Have we got their phone number? Are you safe? Do you need an ambulance? Which I think is just me not panicking, because I'm 40-odd years old. You sort of deal with it in a way as you would if you just walked outside and you're dealing with a car crash. Using a bit of logic and common sense and then drawing on professional training, you know, you're not panicking, but you've got a pretty shit situation that you somehow need to put a provision in for. I think it's life experience and age. There's the training throughout the degree course, being a member of the BPS, being a member of the PFA, but just being... I wouldn't say you follow every letter to the guideline. There are things that I don't agree with the PFA, stuff I don't agree with the BPS, but you're intelligent enough and old enough to look at all that information and understand that some of it is good practice. Some of it are rules and regulations that you stick to, but all the information that you've got inside you actually helps you make the right decision. Deal with the situation. I think being a former youth footballer helped, definitely. Because I've been stressed, I've been panicked, I've suffered anxiety, I've been released. I've been nervous going into a stadium. I've had self-doubt. I've not slept. I've had a good game, and scored goals, and then that thought only lasts for 24 hours because you train again the day after and then it's like Tuesday night, you know playing someone else on Saturday. So I understand how this is just soaked away in an instant. It's a roller coaster of that life. So I think you know how they're feeling. And I think that's a bit of a unique situation because it's not – you can't get someone to do a sport psychology degree and then say, right, you're going to be professional golfer, or footballer for four years and you're going to live in that environment. I've been in that dressing room when a manager has walked in and just fucking stripped the walls, hammered people, thrown cups of tea and seen people gambling all their wage. They've got paid on Thursday, gambled it all away by Friday, and they're playing on Saturday. Can't even get there and can someone pick me up. They can't even get any credit for that type of thing. So it's not a surprise to you. Anything in football in particular, I suppose in other sports as well that comes to you. Because you've lived it. Other people probably only get that through the raising awareness initiatives, so they're probably good for the type of person who hasn't had that sort of exposure or experience. But that also informed choices because I must admit, I mean through all my life, I am interested in the performance bit. I've been through the mental bit and I've suffered it and dealt with it. But rightly or wrongly, I don't like that area. I don't like it. And I've never ever applied for a job, or volunteered or even temporarily doing things such as welfare officer or psychology per se, in terms of looking after them. I'm more interested in winning football matches winning golf tournaments or winning bike rides. That elite performance thing. And I think it's probably my own experience that's pushed me that way.

I: What age group do you feel benefits most from understanding and education on mental health issues?

P: The young ones. In terms of education, definitely. Because I think if you can get that in early, you know, you've got these sort of slogans, it's okay to talk. It's okay to ask for help. I

presume most people, if not everyone is going to come up against it. But if you've had some education early on, you're going to deal with, you're going to raise that flag, make that phone call, you're going to make that appointment. So I think it's absolutely crucial. And I'd start very young, not necessarily with the players. I mean, I coach a six year old team now. And we went to a tournament the other week and I've got scouts from City, United, Preston, Everton, Liverpool, Burnley, Blackburn looking at these six year olds. And because you're the coach, they have a protocol where they've got to ask me who the parents are, can I speak to the parents blah, blah, blah. So the parents comes back to me. So, they're six right. City are asking him to train three nights a week. It's an hour and a half to get there. And back. He doesn't read that well yet, doesn't write that well. He probably still wets the bed once every three months. Is it a good idea for him to be getting in at around about 10 o'clock at night and eating in the car for the next year of his life? What pressure is that gonna put on you as a family? And then him as a child. What's he doing at City? They're manipulating the ball, learning to use left foot, right foot, they're doing turns, passing the ball, inside outside of the foot, they're running with it and striking. They're doing that at [confidential], which is a mile away. Right. So where are we best going? Probably [confidential]. Now if he's exceptional, or is world class, you can't be a world class six year old. You might be world class 14 year old but then fundamentals are gonna put in when he gets to 14, City will then take over. And it might be that you stay over or you're put in a school or the whole thing is then looked after. So you're educating the parents, the granddads, the families at that point, because some people just think he's six and signed for City. Fantastic. We've made it and then so it's the parents responsibility probably, I'd say up to 11-12-13 you're then working with the schools because there's a bit of a switch over to them working with players, because they're told at school that it's okay to not be okay. So why wouldn't they be told in the football academy It's okay not to be okay. And you're just lacking whether you're teaching maths or anything, you just got to have that education right from the start. So it's just normalised at 17-21, or 23 whatever. That's how I feel it should be. I think the elite athletes who have perhaps not been through that system or come from other countries, It's 27-28 year old they do bore. You don't know they've got a psychological issue. The first thing you know is that player has been missing for four days and then it's in the paper that player has been on the piss for four days. Whatever it might be. Then the coach and the manager are like he's an idiot. Psychologist is, why has he done that because he didn't do that for last six months? So something's not right. This is an uncharacteristic behaviour. Or if you sign a player that's always done that and going missing, then why have you signed him?

I: According to research, it's been suggested that athletes suffer most with their mental health during times of injury. What's your perception of well being and mental health support during this period of time for an athlete?

P: Well, I've been injured. About seven operations. I probably had three before I was 20. You've got a fear of coming back for a start. Is the ankle is the leg – And I had an illness, glandular fever, which in sporting terms completely flattened me. But you're on a two year fixed programme to make it as a professional footballer. The first one was done with a fever. And I was playing, I was fine. I was not the best. I wasn't the worst, competent, but I felt that there was no real reason why I won't be a professional footballer. You have glandular fever you're away because you're at home to be honest, you're in bed, you're resting, you're eating certain things, watching football on TV, and you'd go and watch the

youth team games on Saturday. Then you train again, probably after eight weeks. I remember training for the first time... After five minutes I was fucked. Seriously knackered. You think, right, I've been ill. Normal. But it went on through the week, and then I think I can't seem to shift it. You're knackered and then you've got technical deficiencies and you've no idea what's going on. I look back and I've missed the education, them players have been receiving balls or told to and I've missed all them sessions. So it's a bit like I'm in a class and we're doing the three times table, four times table. You're ill, you come back in and we're now on 15 times table, crack on. Oh, shit. I don't know the six and the seven and the eight. So it's a real problem. In terms of that development is the injury. That was an illness. The other one is a knee injury, which repeated itself. So you have surgery. Can I strike it as hard as I can.? As hard as I could? Do I go in for a tackle? So your performance and how you approach a particular task technically, tactically, it's different. Because your head's different. Because you're not actually confident in being able to do it. And I remember – there's no psychologist, you've got a physio who's saying, we've assessed it. They've got measures, they'll scan it and look at it. They'll bend it, they'll say that you're alright. But it doesn't work in your head for someone to say you're fit to train. I remember when someone says you're fit to train. Straight away you go, oh fuck, am I? You've ran, you've swam, you've done the weight. So the physio's kinda right. But you're then thinking shit, what if someone tackles me or I have to tackle someone, or someone smashes you, you're not ready for it. And the only way you actually become okay, is when you get in a tackle and I remember going into a tackle. And I went straight through this 50-50 and it was a muddy pitch, weather a bit wet and you're kind of in a heap on the floor. Your first thought is, I'm all right. My leg's not broke. It works. And I must admit you get up and you feel bloody brilliant. And you're into another tackle and another but it's luck. You've just actually gone in a tackle and gone through it. No one's worked with your head or my psychological well-being or my state or told me that this is going to happen. And when I say that, I know that there are other people who've been through the same thing. And it's not worked out. They've gone through that tackle and it's gone. Or they've sprinted for that ball. And it's gone. I mean, the stuff in the serialisation of Michael Owen's things at the minute where he just couldn't run anymore. Because he was thinking every time he sets off, my hamstring is gonna go. And it did. So it's a weird sensation that I'm not, I'm not sure there's an answer for. I mean, I've worked with athletes now and I think you can, with the physio, you can get more evidence and more data. So you can probably increase the confidence level to a degree. They've got better, you know, you can replicate tackling and sort of soften it. You can go through virtual reality, you can then use, you know, pads, these sort of blow up things, and you can tackle that. So you've got sort of a step process to get closer and closer, where we were more he can run, he can lift, you can swim, you can play on grass, you can tackle. There was only perhaps five stages in the process, there's probably 20-25 now. It sounds better, theoretically, it looks better on paper, it looks more professional. I don't know whether an athlete will feel any different in their won head. I don't think they do, because when you see people interviewed after it's kinda, there's relief in the voice or the face, it's like, I've got through it. I've got through the game. It's almost like shit, I've got through. How's that happened? Yeah. Yeah. It's weird.

I: How would you feel an athlete's well-being is affected by injury? Do you think it's supported in any way?

P: It is supported. They're out of surgery and they are training in some way shape or form within 48 hours. So straight back into that environment. So the physiological buzz of exercise, they feel all right quite quickly, and then in the general population, like wife, girlfriend, or general public or even being at a game in the players' lounge, like you've had an ACL injury. They're like, all right, he's walking, sort of the first three weeks, it's normal. Then it sort of hits them after about four or five weeks when it's like, oh, team's just won three games without me. We were eight, now we're third, or team's lost three games and we're mid-table. We're now in a relegation battle. And you can't do anything about it. And you sort of living and watching these games, or you're even getting asked for comment by the media. And there's nothing you can do about it. So it then sort of dawns on you like, when am I ever going to get back? How am I going to get back? and there's loads of support round them, especially medically, and I think there is psychologically at the higher clubs. Is that just what it is? In terms of 'its support'. Are you really gonna get back or you're gonna get back the same or... I don't know it's hard to quantify. The support is there...

I: Do you think the athletes know about it? The support?

P: I think they know. In football it's probably more through direction, because it will be like, right there's your programme. You'll be with the physio, you'll have a masseur, you'll have a scan, you go here for that particular treatment, and you'll see the psychologist. So it's like, there's your day, there's your week. So they're in that like, it's almost like a factory production line for a car. And you're going to do this for one week, one month, six months, and then you are scheduled to play against Southampton on the third of march at half past seven. It's kinda like that. And you just think, alright, okay. I'll follow that. And I don't know if there's any statistics, probably more people do get through it than would have done in the past. You'd like to think, I don't know. But there's a system there. And there's kind of a protocol. Anything happens on a training ground now; an ankle injury, concussion, a 6 inch gash in a leg. But there isn't panic. It's like, bang, we're on this programme, and it starts now. Is that mentally healthy? I don't know.

I: I suppose it would depend on the person.

P: Yeah. And I think that they're all human beings. I mean, why would we expect them to be any different because they're a sports person? Is he any different to the solicitor who just had a trial, for whatever reasons, it's just been too much for him. And he can't now switch to this next job and go in that courtroom because he's burnt out, or stressed, or whatever it might be. Or a pilot who's just flown through some terrible conditions? Surely, for him as a human being, he can say I've just landed this plane, dunno how I've got it here, but I really don't fancy flying again for a while. They are human beings and treat them like that, you know, and I'd say, all my athletes that I've worked with, I kinda, the young ones I'll ask who's your mom or your dad? What do they do? What do you do? Where are you from? Where do you live? What else you interested in? What do you eat and why do you eat that? What music you're listening to? Oh you've got dog. You know what I mean? They're people. Not an article or a statue or another worldly being? They're people.

I: So what is your opinion on how athletes are able to cope within professional sports? for example, I know we touched on injuries but maybe dealing with their own mental health,

dealing with pressures within the sport, and outside of the sport. Because as you said, they're human so they're gonna have stresses in their life but they're in the public eye so how do they cope?

P: Different ways. Some will get through the system because they want to get through it and they're built to do that. Some will not get through it, but they might not want to. I can't remember his name, he was a quarterback packed in about two weeks ago. Is it Andrew Luck? And I think he comes from a family I think his dad was an NFL player. He's waking up with his shoulder in pain. Two-three days before week 1 of the season he's just done a press conference, and said I'm retired. Had enough. Why? I don't want to play. Why? I want to spend time with my kids, my family. I live on a farm. I want to go and work on my farm, whatever it is. And people are saying, Why? Why are you asking why? That's what he wants to do. If your next door neighbour works in a car manufacturing plant, and he comes home and says, oh, I don't like it there, I'm going to retrain and become a plumber and you'd say, that's a great idea. Hey, good luck to you. Because you're a sports person, you're mad. What have you done that for? I think you need to see a doctor. I think you need to see psychiatrists, because we're going to fix this. Why? Just let him be a human being. And I think there are footballers... There has been a couple who've walked away from the game. One changed to be a boxer. So if they want to do something just respect that. We, the public don't own them. We kind of live in this world where United fans want Pogba back for the Arsenal game. What's it got to do with them? Manager needs him back. I mean, I get they're under contract. And this, that, and the other. But the athlete decides who the athlete is. And there's got to be more respect for that. And awareness of that. And probably, we talk about raising awareness in mental health, which, in sport and football in particular, it comes with the gone off the rails, alcoholism, addiction-type. Why don't we raise awareness of being a human being in sport? Michael Owen has got a farm. What a good idea, let's talk to Michael about his interest in horse racing. Gazza likes fishing. It might have been a massive help to do a documentary on fishing with Gazza, rather than let's do a documentary on Gazza's anxiety and going off the rails, and in being in a pub. They're doing that, because he's not comfortable. He loves fishing so let's go fishing with Gazza. And we can probably do that, and raise that awareness with all these people. Some of them will have dogs and they go walking dogs in the morning. So were into music interviews, some collect art. Louis Oosthuizen has a farm and I think when he won the Open, he bought a combine harvester and a tractor. Fantastic. He's achieved two of his dreams in one. He's a good golfer, he's won the Open. And he's just equipped his family's farm back in South Africa. So praise him for that and he'll probably be a better golfer and a better farmer. Because you understand him as a human being.

I: Do you think then there's something to say that athletes who are struggling to cope, it's because they haven't got broader interests? In your experience, have you ever found athletes who may be so driven or single minded that they lack the mechanics to cope?

P: Yes. Yeah, definitely. I've had a couple, who quite literally – and these are at transition stages – I don't know what I'm gonna do after football. Or I have to get a job in football, or in terms of in golf, because it's an order of merit, basically. So if you are in Europe, it's the race to Dubai and I think the top 120 places, it might be 90 places, qualify for next year's tour. But then when you're on the tour, you have to make the cut to earn and then the

higher you're placed, and then your ranking within the tour is determined by earnings and when you win. It's like, I'm not gonna make the cut. I'm not gonna earn what I need to. So I might not be on the tour next year. What the hell am I gonna do? Well, just bought a new house. I'm going to have to coach golf. So the first instinct is like, right, I'm staying in golf. But I'm gonna coach it. I'll have to commentate on it or I'll have to... There's panic, but it's panic within the sport because it's not like they can say right, I'm going to go and run my farm. And footballs the same. It's like, right I'm 34 I've got to get my coaching badges. I've got to do my B licence. Sometimes I'd say, Why? Well, I'm gonna need a job. There's loads of jobs out there. Yeah, but all I know is football. You just said that you're going to do your coaching badges and you're going to retrain. So you could retrain in something else. Could be a builder. Could be a lawyer.

P: Gudni Burgsson retired to be a lawyer.

I: You're right, he did. I was with [confidential] who used to play for [confidential]. He's a lawyer now. Maybe awareness of that, as well. If you're retraining in something... If you're trained as a teacher, it's very difficult to not get a job as a teacher. You've trained as a builder. It's very difficult to not get a job as a builder. You train as a football coach. Are you gonna get a job as a football coach? You train as a golf coach, are you going to get a job as a golf coach? I'm not so sure. So I think there's probably a bit of perspective, I mean, that in terms of what else is out there in the world, and what human beings do.

I: So do you think then specifically with retirement, that's probably the major area we're looking at in terms of helping these individuals transition out of the sport to be able to function well, mentally, physically, etc?

P: Yeah, I think it'll definitely help them function. Here are the other interests and B) that transition stage if you've got some kind of idea, and you look at the successful ones – we'll take Gary Neville who's one of the most decorated footballers in English football has been a coach and has been a manager but that's actually by accident and didn't want to be and he said that there's no way that he's going to go back to that. But he was running businesses and building businesses that 26-27 years of age. I've spoke to him where there were points during a team meeting and he was two minutes late and he's saying Fergie's gonna kill me but he's on the phone to his lawyer in the shower. But he's planning for the future and to be fair, Ferguson respected that even though it was like minor breaking the rules because he might be a minute late, but he's like, well, you know, in the greater good, A) that's doing Gary good, and he's probably going to play better for me because I'm managing him as a person. Not a robot footballer. And B) what a great idea for him because he's gonna retire at some point. Michael Owen did similar, so I believe, with his horses. He knew way before he finished in football that that was what he's gonna do. And you look at the two of them, I mean, totally different characters, different opinions, different footballers, but both look very stable, very healthy, mentally and physically to look at the two, they look like very healthy 42-43 year old people.

I: What would you recommend needs the most improvement with regards to aiding athlete's mental health? What processes or strategies do you believe would need implementing? If any, at all?

P: Well, as we said earlier, the awareness of the issues I don't think is the problem. Because we know that they're out there, it's more an awareness of how to ask for help, then what that help looks like and where it might take them at all them different stages whether it's at the education, whether it's at the injury, because it's, it's not clear. If you were to go into a conference and say, right mental health awareness, what is it? Loads of people would put their hand up? You go in and say, right, the mental health process for an injured player? What's it look like? No one's raised their hand here. We actually don't know what that really looks like. The mental health process for someone who has got a psychological and physical equilibrium, i.e. how to become a Gary Neville or a Michael Owen or a Gary Lineker is probably another one. What did that look like? How did they get to this point? We seem to be raising an awareness of the problems, not an awareness of the process. And I think there's probably in the middle, a bit of an abstract awareness of the provision. You know, it's that we have a psychologist, well, but it's in small print, you wouldn't not know where your football pitch is and you wouldn't not know where your golf course is or where you're playing. So it's more getting a balance. It just seems to be ramming down your throat, that it's a potential problem. You know, whether that's done through success stories. You've got Ronnie O'Sullivan, we've got Clark Carlisle, two people that are in the media a lot. It's all about the problem, but not the solution. And there were probably days, months, weeks or whatever, where they're alright and are probably other people that might be totally alright. But that don't generate news.

I: Is there an issue here, say, for example, the particular people who you picked out it's, consistently discussing suicide attempts, or their lowest ebbs, it's like they're opening the wound constantly in discussing it? I can't imagine there's much catharsis involved in only ever discussing the negatives of their experiences.

P: Everyone is different. I was watching a documentary the other day and DB was on it. I'm not sure whether they're helping. Whether they're self-counselling, they feel better, because they've spoke. Face value, when you look at both of them speak they don't look that well to me. Whereas the others we spoke about, you look at Michael Owen, Gary Neville and Gary Lineker, to me, they just look healthy when they're on the TV screen. So I'm a bit... And then that age old question, did they really know what they're doing? Or why are they doing it? Or who they're doing it for? DB was talking about raising awareness. And he is on screen for about six minutes. It was a BT documentary about Michael Calvin's book, State of the Game. And I thought you're not telling me anything I don't know. I think it's you that doesn't know that we are aware. Not the other way around. And I teach classes. We could go around here now and I think people will know about mental health issues. And I think they will know of public figures, be it in sport or acting, or theatre or whatever. Be it politicians who have broken down. I really do think we know. And I find that a bit odd, so I'm not really sure that they help. And then you've got the governing bodies or the practitioners; why is no one stopping them or advising that? Why is it okay, to put them up to speak? I think there's a greater responsibility. Would the Premier League put me up to talking about bad legs because I've had a bad leg? You've got an injury now, would you want me to operate on you? In mental health that's what we're doing. And that is a bit stupid, a bit ignorant. It's kinda awareness and understanding of we know a lot more through

research and medical and psychological science, we do know more than we let on in the public domain. So why are we letting the nonsense get out?

You know, you look at general health right, there's a programme on television with a guy, a doctor, he'll do like cardiovascular health in aged people or movement and joints in malnutrition population where in wherever and he's a doctor and he knows what he's doing. They're interesting and he does things in research and advises to solve whatever it may be in cardiovascular diseases or whatever. He's an expert in the field, whereas in sport they'll be like right so and so has had a heart attack. We're going to have a program on the heart attack. Why? We're more interested in selling newspapers or people watching TV programs than what the issue might be. It's respecting the knowledge that we've got to support, fix or whatever it might be that takes this field forward. It's a bit crazy but it's typical of sport.

I: Do you believe that there is still a stigma attached to adverse mental health issues within professional sport or do you think it is improving?

P: Yeah, I think there is in sport.

I: Why do you think that?

P: I still think going back down to what I said earlier in understanding psychology and being aware of it. I wouldn't want to play next to you if you've got a problem. And that's someone who actually understands it, but going down that tunnel, playing in a first team. I want to win, I need to win. You get in to that selfish way of thinking. I just wouldn't want to play with you. I'd go out with you after training, I'd go to your house for tea, I'd walk the dog with you, but at 3 o'clock I just wouldn't want to be stood next to you or relying on you for two hours. The same goes for someone with a bad cough you know or a centre half who's got six stitches in his head. I'm going to be covering him all the time. And I don't think you'd get away from that. You've got to be absolutely optimally prepared to go into it. I'm not sure I want to be in a racing car with someone who's got blurred vision that morning. You're there to win. So at the professional level there is that ruthlessness about it.

I: Do you think then with players because there is that stigma attached to mental health issues, there's a fear of discussing it and opening up within that environment?

P: Yeah, because at the same time I'm your centre half partner so if I had an issue I wouldn't want to tell you because you still want to play, and I'm gonna kind of – I know I feel shit. I'm not right. I'm not prepared. You're almost thinking I know I can play because I've done it before. So it'll be okay. Hopefully 20 balls come forward. And just by circumstance, you head all 20 of them away. I'm not even exposed but we've kept a clean sheet. So, you won't say anything if you're the sufferer. Neither will the one person suffering because I don't think you can get out of it. Because the stigma coming from both perspectives. But I know he's not great so I don't play want to play with him or I know I'm not great but because of that stigma I'm not actually going to say anything because I don't want him to know, because if I were him I wouldn't want to play with me either. That goes back really to the understanding of humans, they're human beings. It's not, It's just not gonna work in sport. It's just the way it is.

I: So is it almost this perception within professional sport that it's regarded as an injury as something that's detrimental to performance?

P: I suppose it's got to be treated like that. Lingard withdrew from the England squad because he was poorly. It's fine. Martial is not playing now because he's got a hamstring injury. It's fine. You won't open the paper and see, there's mental difficulty with for Paul Pogba at the minute so he's not playing tonight. It would be like, Whooooo, that can't happen. But it's the same as the injury. I don't want to play with him, and he doesn't want to play. In fact, in golf it is fine, because you manage your own schedule. It might be right. I'm playing Amsterdam, Dublin, Scotland, Belgian Open. I'm not playing Morocco. Why? I just don't feel good there. Why? I don't know, I can't put my finger on it. You wouldn't then say is it the travel, the heat, the food? They're saying mentally I don't feel good. And you go, alright, we're not playing Morocco, Spain? Yeah, Spain, Portugal, I'll play there. Qatar? No, don't feel mentally at it. Heat, tired, flight. So, that's fine, we won't play. Then there's the issue of being South African, and for some reason it is difficult for South Africans to get into certain countries so that does affect them. We had it in football with the player who wouldn't go to Baku to play. I mean, sort of a political decision. But let's say he could go. Now imagine it's like all of a sudden, through all this press. Now, the game's gone out the window because all the spotlights on him. Jesus, a lot of pressure on him. If you're a psychologist within that club, you would probably argue if someone else could cover that position to diffuse it before it's even started.

I: What have you found athletes required most from a professional sports service? Is well-being disregarded in favour of performance?

P: Yeah. Absolutely.

I: Seriously?

P: Yeah.

I: Have you found that to be consistent as well?

P: Yeah. You've got to win games, everyone's jobs on the line. It's not right. I don't agree with it. You've got 4-6, if you're not getting results, you're sacked. Really, that can be a player, manager, coach, whatever. That affects your family, affects your kids' school, your parents.

I: Have you found that across the different sports you've worked in?

P: Yeah, I think the junior stage of cycling is probably a bit different. Because there's no guarantee and you're responsible for yourself. In football, someone's got to pick you and trust you and then give you a contract. In golf, I mean me and you can enter the Open. You can go through local qualifying. You can get in and you can win it. No one's stopping you apart from you. That has that reflection on that so there's that self-responsibility, self-management. So it's kind of okay for me and you not to make it. It's okay for a cyclist not to

make it. I think they're a bit more prepared, and it's okay for that alternate. And that's in the young ones. For a golfer when they're on tour, it is a win at all costs and they might get to a point where they're gambling where they're right on the edge and they start thinking, do I need to change coach? And they'll start to panic. Danny Willett has just won and he's been through terrible times, so his coach must be unbelievable, so I'll hire him. Was it really anything to do with his coach? Or has Danny just been on a human journey and come out of it. Sometimes a bit of illogical decision making in sport. They are desperate to win. They'll sacrifice anything really to win or to make it. Your health, your diet, personal well-being, physical, mental. There are so many sportspeople now...

I: Have you found they actively talk about that, to consciously make the decision to do that?

P: Yeah. Yeah. A lot of the retired ones, their bodies are knackered now. You look at – I read Andre Agassi's autobiography. And he just like, he has, like a 15 minute procedure, getting up in the morning going in a hot shower to actually get his body to move. And I know loads of footballers who are like that. They've made that sacrifice. A lot of them don't regret it. Like that was brilliant. I was talking to a retired player on Saturday and his knee was a balloon and he said he hasn't had a knee replacement yet, because he's too young and the replacement will need replacing because of his age. You know, I had seven operations, but I loved it. You look at [confidential] who we know, he's the same, but he loved it.

I: Because you've spent your life pursuing that...

P: You're doing something that you're in to, that you enjoy that. You know, this goes for anything and everything in life, there's a cost for it.

I: Do you believe athletes are more or less likely to seek support inside or outside of their environment?

P: Outside.

I: Why do you think that is?

P: Because of that stigma, we spoke about it earlier. It can affect that – Are you in the team? Or will you play in this tournament? But I respect that. It's a bit like, if you feel shit and you go to the GP do you tell everyone? You don't tell your next door neighbour that you've gone to your GP. You might sometimes go to your GP with something you tell your work that you've been with the doctor but you don't tell them what for, or why. It's kinda outside. You still separate it. Because I think it is personal. Most people, we're all individual as human beings. And there's a degree where you need to have your own counsel, your own trust with yourself and live your own life. I don't think that means take away any provision at the club. Because the fact that there's a provision in the club it does help say that, that's all right. So it's kind of triggered action. You're gonna go private. But you might not have done if it wasn't in the club or on the European Tour.

I: So you're going to have the sports or performance psychologist there in these environments. Do you think they are then in the best place to discuss those issues? Because

I think there's an element there where realistically, it can't be treated in house because they're not necessarily trained in that area.

P: I'm not sure that the best psychologist would be in the clubs or in sport. Because I don't think psychologists get the respect and they don't get the pay. You probably don't get the satisfaction. Whereas you probably have the best doctor, you probably have the best physio or you probably have the best sports scientist. So Steve Peters for a good reputation for his work. But he was working outside of sport before he started working inside of sport. Because he was sort of seen as the best in terms of this man management and managing anxiety with the model that he created. And there were people in cycling who had a psychologist, but chose to go to him. So he then came into cycling. Football's then went to him. So next thing he's working for Liverpool, and then he's working for England. So he's come from outside. And there might be a lot of years before more of that happens. Like you will read an article that might sort of say, City have employed world leading orthopaedic surgeon, that's quite possible. Or they have employed world leading strength and conditioning coach. You'll never see they employed world leading psychologist, whether that will come. I don't know.

It probably didn't happen in them other fields for a while in football. So anything can change. It is becoming more acceptable, it is becoming more prominent, it is becoming more reported, and I dare say there probably are more people that have actually gone through treatment versus not. So I think as a natural evolution, it might not be the last cog because something else will come. Never had a doctor in football years ago, now every club has to have one. Yeah, no one had the strength and conditioning coach, that's now mandatory. It's always got that, it's not a physical thing. You can't see the brain, you can actually see something in performance analysis watching the video. So you can tangibly quantify that. I'm going to employ him, because that's what they're gonna do. So, why employ a psychologist, what's his salary? 60 grand? What're they gonna do? Talk to them? Oh right. So when does he work? I don't know. Very difficult to write a contract to job description and put in place accountability. I think a doctor might be the same, I mean, you probably go for six weeks in certain football clubs in pre season where there's no injuries. So what's he doing? He's probably researching or reading things or being immersed into football club, that's all a psychologist would do. So, I think it will come.

I: Do you think then before that, there needs to be an element of a more rigorous approach to referral systems because they haven't got it in house?

P: A bit more of a rigorous process, a bit more accountability.

I: There have been some suggestions from previous studies that they would prefer to speak to the physio over other members of staff in the environment. Why do you think these professional athletes are less likely to seek help from a trained professional with regards to their mental health?

P: You're at your weakest, and I've been there, you just feel weak or vulnerable. And you're in a situation where you're in the unknown, you might be having surgery explained to you, you might be having treatment, you might be having an injection, you might be down, a physio room is the place within a football club, where you are going to be vulnerable. And I

think you can then couple it with that a physio is probably the only person visibly within the building, who has their own room, their own office, have their own rules within that office, and have professional certification that is probably on the wall. I'm a chartered physiotherapist, it's the closest to being in a doctor's surgery or a consultant's room. And I think it is just simply the combination of those two, the vulnerability of the individual plus their environment equals disclosure. For me, I think it's that simple. I think that's why they do it. Possibly also the physio or the doctor are know that the jobs are getting people better.

I: Straightaway, there's this presumption from the athlete perspective, then based on what you're saying is that they are associating that person and environment with getting better?

P: Yeah. So it's working better and they've got authority. They can turn around and say to the manager, Tom's not training today. And the manager will go, okay. Whereas Tom goes, not training today, gaffer. Well I'll see you in five minutes, I'll go and see the physio about that before you make the decision. That's just the way the environment is. And it will be confirmed by the physio, and it'll be like, yeah, no problem. But, why was it no good in the first place?

I: The trust element, that lack of approachability, they can't see themselves discussing these issues and the sports psychologists can't go to the coach because of that lack of authority, do you mean?

P: No. And they've still not really got their own office either or their own area. You say to the physio, what's your environment? What's your culture? And they'll just define it like that. Your sport psychologist, or psychologist probably won't know and they'll words like, It's where the athletes are comfortable. So where's that? It's a bit abstract and hard to quantify, define.

Suppose the only way to do that is to ask footballers that have been through it and been through, you know, research, really, what you're doing? Find out. There's probably enough cases out there to certainly get to a starting point. We've interviewed people 300 people and they would prefer this, so at least you've got somewhere where you can start, you can edit and modify that and change it and adapted as you go on.

I: In your opinion, what do you believe needs improving in order to better prepare athletes for the transition out of sport?

P: Education and opportunity. It's difficult in terms of when it comes, we've got education in football. But at the minute, it's at the point where they're most under pressure to be a footballer between 16 and 19. And they've got less time and their body's still growing and developing. So it's probably, I think it's in the worst place right now. Once you are a footballer, let's say you're 25, you've played 200 appearances. There's a degree of, we can now educate you. And I think it'd be easier to educate someone at that stage. Or, alternatively, I really do think there is enough money in the game, to sort of them that don't make it at 20. We'll educate you then. There's millions, if not billions. So relieve the pressure, give them every chance of being a footballer. And then if you're not making it you're at school for two years, and it's paid for. And you'll get a grant to live to feed yourself to clothe yourself to get yourself there. You know, just like people in here with student

grants, bursaries, finance, whatever it may be. I think there's just a smarter way of doing it for both parties. You try educating footballers as they've just come off the training ground, you're getting told they're going to be a couple minutes late. Then told please don't keep them after three because we've got a game tomorrow. My objective is for them to pass this NVQ, not your match, you can't have that, because that won't work. Neither are really working together.

I: So there's a real disconnect between the education process and the sport process?

P: Yeah, I mean, in America they go through it beforehand. I know you're on the pathway, but you're not. So, especially in the NFL, you're not even going to enter that draft or get anywhere near a football club until you've gone through this process. But while you're in this process, it's fine to play college level football. It's, it's worse than the NFL. Yeah, of course it is. Because they're students, they're not professional NFL players. So it seems to work better out there from what I can gather. Something to add to that. In the past footballers were coming through. I'd probably need to do some number crunching but debuts were happening at 17-18. They're not now, certainly not at the top end, they come in. I mean, theoretically, you look at Chelsea now you've got Tommy Abraham, and Mason Mount and I know they've been out on loan, but they've really made their debut in the top flight at 20-21. With the loans, there's almost the College Football type thing. But we're overpopulated with 92 football clubs on this small island, which is absolute madness. And they're all professional. And they've all got academies. And the numbers don't even add up. I can't think of any other sport or any other country in the world that's got 92 academies with a team. It just doesn't make sense. There aren't that many places. There's only 11 people can start for each team. But the lifespan of these people might be nine years career. So you get in at 20 you're going to occupy that spot for nine years. So that's nine batches of 18-year-olds below you, that's nearly 200 people. Look at someone like James Milner. There's probably a thousand people tried to take his place but it's just not available. I think the numbers have never added up. And new footballers never added up. It's an emotional, illogical gamble. If you were to quantify it, statistically, but there's always that living hope that Rochdale will produce the next thing when Captain or Rushden and Diamonds or you're going to sell a player to Crystal Palace for 500 grand or sell one to Man United for 40 million, how romantic the club gets to survive for another 10 years and you get a new stand out of it. It's just a crazy gamble.

You could even educate people at the end of their sporting life. I mean, I've got a first class degree. when I was 15-16 and in education, there was no way I was at that level. I was scraping around for a couple of B's at GCSE, never mind a first class degree. So if you put me on a program then I would have failed because I didn't have the mental or physical capacity to be in education then, but then when I've come back to it, I have. Because football's not there anymore. And there's actually a different motivator because this education can actually get me back into football.

I: Do you think it's becoming acceptable to engage in education away from sport now? There are a number of examples over the last few years of current and ex players doing degrees and post grads.

P: yeah Vincent Kompany got a Masters, and I think there's a lad at Sunderland, he's done one. So, it's becoming prominent, but kind of doing it at the right time and when they're ready. You're surely minimising, or reducing the percentage or chance of success in education and in football. You can excel at both, but you can do them at different times. Rather than just excelling in one and not the other, or being bang average at both. They can do one and excel, then excel at the other when they're ready and have the time.

I: Do you think there's something then that needs to be implemented to say, you hit 27-28 and we're gonna put you on a retirement plan now?

P: You could go on a retirement plan, yeah. I started the Open University, so you can do it module by module. I mean, my PhD is in corrections now. So I've probably been in the system 11 years. It's not a problem. Doesn't matter. It served me well. It's got me good jobs. It's made me a better person. What that is, I'm 47, so that's from age 35 ish. 34? When I perhaps first started? If I did that between 22 and 34. I'm not sure it would have done the same for me. And you've got that life expectancy as well. I don't know what it is, but for males, which is probably the majority of what we're talking about. Certainly my experience. Late 70s. It was probably we were still working on a system where you retired at 60. You live till you're 68-69. Now you're retiring at 67-68? So they clearly think that we're fit to work for that long. And then perhaps we're retired for 15 years. But education's still a rush. It's worth looking at, I think as a system that fits sport, and fits the human being, giving that human being that best chance A) being a footballer, cyclist or golfer in the first place, then B) if it doesn't work, to be a good human being with a good job with a good education to have good responsibilities and doing the right thing.

I: This is about broadening people's identities, then?

P: Yeah. Because as long as broadening, it's now acceptable to change identity in any way, shape, or form. You know, years ago, you were a builder, how can you be a lawyer now? You're a builder. Now, it's like, look at this builder who's now become a lawyer, or a footballer who's a psychologist, or a pilot. Wow. Brilliant. So perhaps tap into that, manipulate it, use it or thinking a bit more logical to give people a better quality of life. Inside and outside of football. Surely a better quality of life is gonna give people less psychological issues.

End of Interview.

Participant 7

I: Firstly, can you please detail any experience within professional sports so like notable teams, the roles you've had within teams, any particular...?

P: I guess headlines really will be predominantly work in professional football, sports psychology role for the last six years, beginning in part time positions. The last three years working full time. Outside of that I've also done some work in professional rugby union, so that's a consultancy role that I hold at the minute. So that's a much smaller role, so that's couple of days a month for me there. Education wise from [confidential]; Undergrad and Master's in sports psychology, and I'm also completing a professional doctorate in sport and exercise psychology. All being well... Hoping to finish... March/April 2020.

I: Secondly, just within your experience, have you ever found current or previous mental health provision you've encountered in professional sports to be useful in any way?

P: I think in my experience provisions for mental health have varied from nothing, normally. To having some sort of mental health education for staff. Mental Health First Aid. To other organisations at other times where the mental health provision has been much more formalised and structured whereby there's been a designated working party who will be responsible as a group with a kind of shared responsibility, political responsibility for supporting the emotional health and well-being, mental health of practitioners and performers within them environments. Civically, that group is comprised of clinical psychologist, who consult. A sport psychologist, a medical doctor, a physio, head of medical, medical, education, safeguarding, as a working party who are looking after that.

I: Yeah. Have you found in the experience as well that any one sport has possibly provided the support better than the other or vice versa?

P: I wouldn't necessarily say size of particular organisations, some organisations which are better from a financial point of view where in terms of finance, which enables them to put stronger provision in place. So, yeah, not necessarily a sports thing but maybe more of an organisation type thing.

I: So based on your experience, what do you feel has worked best in helping to understand mental health issues with athletes?

P: What has helped to understand mental health issues?

I: Yeah, within the athlete. So what do you feel has worked best? And that can draw on maybe some of the other members of staff or maybe even within your own role?

P: I think more broadly that there is greater awareness of mental health in society. Well-publicised stories, or accounts where ex-athletes or current athletes are talking about their experiences with their mental health, I think those types of testimony are really important. Normalise it, spreading a greater awareness of mental health issues and people are going to understand them better that way. I think there's a growing responsibility in response to

things like the duty of care report that organisations are taking this responsibility to educate more seriously. I think broadly the landscape is changing. And I think that, you know, there's a number of factors contributing to that.

I: Does that help your role then in delivering that, in terms of maybe enhancing understanding of mental health issues within athletes themselves?

P: I think the fact that it's on the agenda. Yeah. It's in the public. It's in the public eye. I think it's helpful. Yeah, I think that's that can only be a good thing. Because it's becoming socially acceptable for people to talk about their experiences that they're having. That can only be a good thing. That helps people to become more comfortable with having those conversations. I think when people are more comfortable having those conversations, I think the opportunity to educate and normalise is enhanced.

I: What do you think athlete perceptions are of mental health issues, then? Do you think they're receptive to learning about them?

P: Probably something that has changed. There is still a stigma around mental health in what people think it is and what people have experienced in their own mental health. Some people who might experience challenges. I think that's partly down to the response of – I think if you're working with developing athletes who might be kind of teenagers. I think their views on mental health aren't probably going to differ too much from the general population at that age. Thinking about that more broadly I think older athletes by virtue of life experience, come to recognise that struggle, from time to time can be difficult is actually pretty normal and it happens to everyone. I think that young people who have not yet had the benefit of that life experience, I can understand why they might be thinking different.

I: It's interesting you say that because I mean, my next question was going to be what age group do you feel would actually benefit from more of an emphasis on education of, mental health issues? So do you think it would be the younger generation that would benefit from understanding that more or more so at a senior level?

P: Good question, I think it's almost a question of readiness. And of course, I think education around mental health is important to younger athletes, definitely. Again, I wonder how ready they are, to better understand these issues, because of the experiences they've had. Again, what I would then question is the education of what that looks like. If that education involves two workshops a season, an athlete with 20 or 30 other athletes in the room. I'm not sure that medium or that method of delivering that mental health education is the best one for coming up with a way in which you're trying to build an education around understanding mental health. There might be much better ways of doing it that might lead to better outcomes.

I: Yeah, absolutely. I've noticed that myself where, say, for that example, in particular, two workshops, a season or two workshops in 12 months seems to be like the go to for mental health, which doesn't seem conducive to enhancing understanding of awareness.

P: Yeah, absolutely. It's a topic which is sensitive for some. Might be quite uncomfortable or unfamiliar, and as such I think probably then requires an approach which reflects that. Something which takes time and care to treat properly. As a topic, I think, if we were doing one off workshops or group education sessions, I'm not sure we would do that in other education settings, saying what we're dealing with complicated, complex issues I think we would take a bit more time with it. And I wonder whether that should be the same for topics like mental health.

I: According to research it has been suggested athletes suffer with adverse mental health issues during times of injury, so they're more likely to suffer with a mental health issue during a time or a period of injuries. So what's your opinion of well-being and mental health support during this time for the athletes?

P: I think there are some obvious challenges that come with being injured. It does make sense that population is an at-risk population compared to athletes who might be playing every week. I think I would be inclined to agree that this is a particular population where they'd be more prone or at-risk of experiencing some mental health issues. Yeah, I think... Yeah, in my experience, I think there are organisations who are more psychologically informed, who will be more aware of the risks associated with injured players. They proactively look into put provisions in place. Safeguard against athletes, so there might be policies or procedures where athletes who may be injured are given access to sport psychology support or psychology support straightaway. If they meet certain criteria for example, that's something I've seen previously. So any athlete who is predicted to be injured for more than six weeks are automatically gets psychological support provided.

I: So is that a sense of they don't necessarily have a choice they are put on to almost like a system then they say, you've got to go to a maybe once a week or something like that to touch base or discuss anything?

P: Yeah, yeah. And again, that's something which is offered to the athlete. It's not necessarily something which the athletes have to take because we know that for the psychologists to be able to work we have to know that the athletes want to engage with it. But I think it's a case then of ensuring that there are regular opportunities provided to the athletes so you know, we keep knocking at the door. In a way, which is sensitive. It's not pushing, it's not pushing people away, but we do it in a way where people know that they're still available. If and when it's needed. You know just because it isn't taken up straight away doesn't just mean it's off the agenda now.

I: And so just to tie into that, what's your opinion then on how athletes are able to cope within and without professional sport so that can be injuries? It can be someone who's maybe transitioning to a different club or someone who's transitioning into retirement maybe or dealing with pressures? Absolutely anything really but how do you feel the athlete is able to cope with and without the environments of professional sports?

P: I think it depends on the sports I guess will be a factor here. So I think if you're in a team sport and you're around a training facility where everyone else is training and playing I think you know as often where players will feel confined, it's difficult. But again, for others, that

staying involved and staying connected can be a source of support for those who they like and enjoy. So they're obviously isolated. I think sometimes the nature of professional sport can mean that injured athletes, it can seem as though their value is decreased somewhat, because they're not able to contribute to the team or the objectives of the team – that type of thing. So, it can be difficult for athletes in professional sports environments.

I: What would you recommend needs the most improvement with regards to aiding athlete mental health, any sort of processes or strategies that you think need either improving or even completely introducing or implementing starting from scratch. So, is there anything you believe that could help improve it?

P: I think fundamentally, it's going to have to be a collective effort. So, it can't be one thing, which is going to revolutionise and change the landscape, I think what it probably is more about is collectively on a broader scale, stakeholders working together to create psychologically informed environments. Where mental health is taken seriously and is given the same care and attention as physical health. So yeah, that would be my take on that, I think is a broader thing that requires cultural and a philosophical shift in a way that mental health is viewed and managed. Managed perhaps not the right word, but how it's valued.

I: Do you think as well there's something in that from a national governing body perspective, because I know you mentioned it sometimes depends on the organisation, the sport, what do you think maybe national governing bodies could do a bit more?

P: Probably broader than that, I think. I think we need to look nationally. Government level, we've only got to look at the way that mental health is treated in the NHS and compared to some other areas of the NHS. I think as much as we might talk about governing bodies, I think there could be some bigger fish to fry with this landscape. With regards to how serious it's taken and the level of the value people place on it.

I: And so do you still believe there is a stigma of mental health issues prevalent within professional sports?

P: Yes. I think, again, it's something that will take time. That's the nature of professional sport culturally. Often, we might be in competitive environments, where people are fighting for places, there's not always a great deal of empathy among individuals. Because of the cultures that we're in. I think that culture is a factor, which plays a part.

I: Because I know you mentioned from an organisational perspective, and we're looking at the different elements of members of staff and opening up a different age groups. Is it almost perceived as a weakness? Do you think in professional sports?

P: I think it could be any... Weakness in professional sport is something that, you know, people will try and pick out in competitors or even teammates and things. So, I think weakness in general is something that people will prey upon. Yeah. I think, yeah, it might, it may well be that mental health is – if it's deemed to be an area that people might well pick out.

I: During your career, what have you found athletes have required most from a professional support service. So have you ever found that there are well being disregarded for performance sake and be more focused on getting better or improving? Is there anyone who's ever really contacted you to discuss an issue or a psychological issue? Or is it all about performance?

P: I think there's often a lot of challenges that athletes will experience that they can not deal with themselves, but mental health issues can be challenging experiences, but not necessarily require the help but I think mental health is often a grey area. A grey area with regards to mental health, well-being where people can be finding things difficult, but they wouldn't necessarily meet diagnostic criteria for mental health issues in that way.

I: Yeah, I was speaking to speaking to a colleague about this yesterday, actually, it was. Because we were talking about the general like the pathway, you go on to be a sports psychologist. There's not there's not many clinical elements involved in it, or it is very much performance focused. So it's interesting that even from a professional perspective that even if someone did come to say you are or anyone who's trained with that particular issue, , you're not actually qualified to treat it. You can offer advice, but it's almost like an immediate referral system, isn't it? Which is maybe an issue?

P: I think. Yeah, I think that's changing somewhat. Yeah, I think now it's becoming more common. More common for a sport psychologist and a clinical psychologist to collaborate. As opposed to to just a straight kind of referral. Which I think previously, people would have done that and thought 'shit this out of my remit. I better refer on' and then that might not be the best for the athlete or the individual.

I: I think like you said, it's almost like a collaborative effort that may be across qualifications and you're avoiding this, like pass the book culture that has been quite prominent in previous years.

P: Yeah, I think ultimately it's about that mental health awareness. Trying to help people become more comfortable with this topic. Recognise that there are some issues that, you know, that may be challenging experiences or things going on, but doesn't necessarily mean that we've got someone who is at risk that immediate risk that requires an immediate referral right here right now. I think it's been panic stations. I think over time people are becoming more confident that actually dealing with these issues professionally and with supervision. Getting experts in to help you with those things that are in the grey area but able to be working effectively with these people.

I: In your opinion, do you believe athletes are more or less likely to seek support for an issue inside the environments or outside of the environments? So, what I mean by that is that say, for example, hypothetically, if they were to have an issue, in your opinion, do you think they would come and speak to someone in that environment of professional sport in their club or to a member of staff or they're more likely to self-refer and go and find help outside it?

P: I think that varies really. I think there's some individuals are quite happy to ask for help and ask for support when they are finding things difficult. Others who are less comfortable and I think there are probably different factors, a hundred and one things which would contribute to that.

I: Researchers suggested professional athletes are more likely to speak to and discuss their mental state with a physio therapist within their club. So the question is, why do you think professional athletes are less likely to seek help or guidance from a trained professional with regard to their mental health?

P: The question there is unfair actually in some respects, because how many professional athletes would have the opportunity to talk to a sport psychologist? It could be a physiotherapist, but there might be five or six different physios in a club and one psychologist. There are definitely going to be more physios there than there are sport psychs. If we're talking about injured players, they might be more likely to speak to a physiotherapist because of the amount of time they spend with them and the nature of their relationships and so on and so forth. Different perspectives on responded that statement but ultimately whoever they confide in it doesn't really matter too much as long as that information gets to where it needs to and the appropriate people who might be able to offer some support or direction to the athlete who has taken the brave step and is saying 'actually can someone help me with this stuff?'

I: So, obviously, we hear a lot about the struggles of athletes having difficulties with transitioning out of the sport and maybe having conflicts in their identity and being able to cope without it, so in your opinion, what do you believe needs improving in order to better prepare athletes for the transition out of sport?

P: Yeah, I think it's well documented that some people transitioning out of the sport have found it difficult and it has impacted on their mental health. I think it's also important to remember that not everyone will and actually there are some athletes who can't wait to retire and try to retire because they want to do other things. So it's not as big an issue for them. You know I'm not scaremongering like everyone's going to struggle when it comes to retire. I think fundamentally if we're going to help better prepare athletes for retirement the process has to be refined in earlier years. So when athletes are developing in a way which promotes a balanced, healthy development for their identity and do they see themselves in – Are they given sufficient opportunities to develop themselves in broader ways than as just as athletes? I think fundamentally these are issues they need to consider In my experience, The UK, professional football as an example. I think they are traditionally pretty bad at promoting the development of a healthy, balanced identity, I think they go to quite a narrow way. We encourage people to put their eggs into one basket and then when we compare that to other European countries, for example. Often I will encounter young professional boys and men from across Europe who speak four or five languages, who are well-read, who are interested in more diverse things than just football. I think that must come from the more experienced formative years that they're having. I'm not sure if this is just something they seem to have in the water in France, or Holland, it just seems to be the way they view themselves.

I: Yeah. That's really interesting. Maybe it's something to do with the culture, do you think?

P: Yeah I think almost exclusively, I said, it's a cultural thing. In the UK, as well. More broadly we talk about education. The education, the way education is valued in the UK is maybe not valued in the same way as education is valued in some other countries. The implications of that we can see in the way that in the way young people respond to education and development.

[Interview End]

Participant 8

I: If you can first please just detail your experience within professional sport. So, thinking about any teams or environments you've worked in, or any individual clients you've worked with in the past.

P: Yeah, so I've worked – So, briefly for about six months worked in a kind of youth football academy. But that was kind of one of my first roles really. So I probably didn't have as much input as I probably would now in my roles, if that makes sense. So working with kind of young players, but more specifically, actually, in that role working with parents and coaches, as well. And I've done work with sort of swim England. So that's some one-to-one work with athletes, and some workshops every year, basically. And then, more recently, I've been doing a lot of work with the FA, which I guess is my sort of main organisation that I work for, I would say. So I've been working with one of their Para-football teams for about two years now, I think. So that involves going to kind of monthly camps in the lead up to tournaments. So it's not, it's not full time, it's not really, really regular. But I guess we still get the short sharp bursts of working with them. And I've been working within that sport at a more national level for this year as well. So coming down from the FA a little bit. And then other than that, just working with one-to-one clients with my own business in sort of a variety of sports. And a lot of it is kind of archery, because that's the sport that I do. So that's my 'in' I guess, but other sports as well, feeding off of kind of the work we've done with organisations. And so that's been in the past, what maybe two and a half years, I'd say is all of those roles, really.

I: Obviously varying dynamics in various sports that you've mentioned have you found any major differences in terms of one sport compared to another where you've felt you're more widely accepted within that, and accepted by the coaching staff and integrated better?

P: I think so with, with things like I suppose Swim England and things like that, because I think of the nature of the role, but it's consultancy. So somebody gets you in and the coaches kind of attend the sessions, I think largely because they are for athletes, I think they attended or interested for I wouldn't say it's as integrated because I think it's quite like sectioned off, like you have your two hour slot or whatever. And so I'd say it's less integrated, from my perspective in those kind of roles. Albeit, I do feel that the coaches do pay an interest and they help facilitate the sessions and things like that with stuff in kind of the FA, I suppose I'd say it's actually similar. Surprisingly, in some ways, I don't think it's as integrated as I would like it to be. And I think again, there's still this sort of mindset that it's kind of a separate entity to kind of the coaching and the training. So they'll have sort of their morning training session. And again, we might sort of section off like two hours or something for me to do a bit of work with the team. But other than that, that's kind of it. So whereas for me, I guess I would like to integrate it more and work closer with the coaches and kind of get in there and training a bit more. I like to think they buy into it, the coaches. I think they do to an extent, I think sometimes there's a lack of understanding of what it is you're doing. And I think from my point of view, there seems to be at least from in sort of the FA setting, I don't know whether the coaches can see that they have a role to play in sort of the mental side of things as well. So again, I think they're quite I'll go off and work with the players in isolation. And that's my job done, rather than how can I work with you as

a coach to motivate the players in a different way or, you know, integrate some of the work we've been doing in our workshops into your training. I don't think there as aware of that, I think, yeah, I think sometimes it is the sort of thing of, you're here for the players because I'm fine with what I'm doing. So I'm gonna go off and do something else where you do your workshop, if that makes sense. And I think that that's been sort of my main experience across the board really.

I: Well, what have you had with the athletes and have you ever found a similar experience where they've been quite open, and that buy in is there then?

P: Yeah, I think so. I think I suppose particularly with kind of the FA stuff, they're the group that I've worked with the most consistently over the past couple of years. Whereas I suppose with things like the consultancy, I guess it can be different athletes every time you go. So I guess they're the easiest one for me to draw a conclusion from, I think to start with, there's always a bit of like, what's this going to be about, what are we going to be doing. What I think the buy ins increase. And I think, for me, we really worked on stuff around that kind of team philosophy and culture and stuff like that. And that seemed to work well. And then we went to an international tournament last year, and they actually won it. And a lot of them have said, obviously, I never say but a lot of them have said that they felt like the psych stuff really made the difference, because they were able to, I guess hold their nerve a bit more and stick to their style of play under pressure. Whereas in previous experiences and tournaments when I wasn't there, they said they reverted back to a different style of play. And that led them to not perform as well. So I feel that it seems to have had an effect. And I think that's helpful with the buy in because I think they've gone there and they've gone. Yeah, actually we've felt more prepared mentally. I think that's really helped with the players. I definitely say there's more obvious buy in from the players. I think you try and drag the coaches along with that, like I think the coaches sort of have gone. Okay, like there must be something there then. Which is good, but equally, because again, of the nature of the role of like we did that tournament last May. And we haven't, we haven't had a camp since because we're supposed to have some see this year and things have happened. But I think because of the lack of continuity of some of these roles, I think it can be quite hard to kind of gain that momentum as a psych and be like, this is actually having an impact, because I think they probably felt it had an impact last year. And now, this time, sort of next year, whatever they probably forgot not forgotten. But you know, I mean, they're back to sort of doing it how they used to do it in terms of the coaches. Yeah. That kind of answers your question.

I: Yeah, no, it does. Yeah. So have you found that in your experience, any current or even previous mental health provisions you've encountered in professional sports be useful or successful in any way? And I suppose what I mean by that is, are there any structures in place? Are there any procedures or formal processes that encourage mental health provision to be implemented? Or are athletes even aware of it as well?

P: I think, again, you know, from like, the para football app for my team. So basically, in the FA, I think there's like, six of us, there might be kind of six or seven or so teams that are sort of para teams. And so there's a psych now for each team. And so we kind of all work on, like the mental side of stuff. And so from a mental health point of view, we've now got to the

point where there is like a referral pathway. I think that's fairly recent thing, though. I know that, like the other psychs have been there a bit longer than me have been working on it for quite a while. But there is now just for my team, or the organisation they use, but there is an organisation that we can refer them to. What's it called? might come back to me, but yeah, it's kind of only, only a new thing for my team is that I can then kind of get in touch with that organisation and pass them on. There is a process.

I: Is it sporting chance?

P: Yes, yes. Yes. So, there is a process, but I would say it's not been massively communicated. And so we had a meeting the other day with the team and the performance director did mention it and asked me to say a few words. And I sort of said, Well, yeah, obviously, it's great that you know, you've got you've got that in place, and to make the most of it if they need it, particularly this year. But I think, yeah, it seems very kind of fleetingly mentioned, I think from people who may be should know more about it. And I feel like I tried to say my role I tried to bring more into it. And I've been trying to do more in the sport in general. I've done some sort of like zoom workshops over lockdown of like, just health and maintaining your well being and things like that. Yeah, but there's definitely still some assuming to say mental health, it's a bit of like, what's this gonna be, what are we going to be talking about? So I've tried to start gently kind of saying, this might be kind of a referral pathway that you might be able to use if you're in the England team. Or, you know, these are the sort of people that you might want to kind of go and speak to if you need it. So I'm trying to do more, from my perspective, but I wouldn't say from my experience, I suppose massively that from an organisational perspective, I don't think they have enough probably in place, or at least enough awareness of it that they're creating, I think it's very much off the back of independent kind of practitioners. So six of us on each team, I think it's very much down to us really.

I: right. It's interesting. And do they still think that there's a stigma attached to mental health because I know, there's been a lot of positive talk and a number of accounts from previous and current athletes who've come out and been quite open and honest about how the sport has impacted them. Do you still think there is a stigma attached to it within the sport itself?

P: I think it's difficult. I think there may – I don't want to speak for other people, there may well be slightly less. I mean, I guess because it's a Para Team. They are more, more, but they are kind of health conscious, I guess, you know, they've all got kind of different health issues and disabilities going on, which I guess might make you more likely to talk about those things more openly, I suppose. Because they've all got kind of similar conditions. And I don't feel like there's been a massive, I don't think I've seen a massive sign either way, I don't think they've massively been too open and speaking about it. And I'm, you know, I find that when I do workshops on it, and in that community, I think people feed it a little bit. But I think people want to sit back and see what other people say first, if that makes sense. Yeah, I don't even know whether they necessarily would still think really badly of people who have mental health issues. But I think there can be a misunderstanding sometimes, between, you know, if I say mental health, I think people kind of go to the opposite extreme and think of mental illness and think of something like psychosis. I'd say from a coaching perspective, I

think they seem to be more wanting to learn a little bit more like because I've run a couple of these sessions, there seems to be like the interest there. I just think maybe sometimes there's a reluctance of knowing what to do and what their role is. So I'm not sure whether or not it's the kind of stigma's as bad, but I just maybe think that they don't perhaps quite know enough about what their role would be within that. What's kind of expected, what's their remit, I suppose. And so I guess when I'm speaking to coaches, I tried to say, you know, we're not expecting you to know all the answers and to diagnose somebody and treat somebody we're just saying, like signpost them in a good direction. So yeah, I haven't come across anything that I think it's really kind of a stigma about it. But I definitely think there's still like a reluctance as soon as you get into that kind of topic area.

I: Yeah, based off what you're saying it sort of sounds like there's a problem with the definition itself, that maybe athletes are sort of defining it in a very specific way as soon as it's mentioned?

P: Yeah, I think. I mean, I've actually been writing a workshop on this recently that I'm delivering this week. But I think from kind of my perspective, I feel like there seems to be this, I guess, element of as soon as it sort of mental health, mental ill health. I guess, if we think of the typical sporting narrative, its kind of strength, its success, its resilience, and all those things, isn't it? And so then, as soon as you go, Oh, you know, even people using the word like weaknesses in sport, I think people get, you know, touchy about. And so I think perhaps there's an element of if I'm going to the psych for some help that means I've got issues, you know, and maybe you're not quite living up to that athletic identity. I don't know whether it would be the same in para sport, I've probably not spoken to people enough about it to really say, but I wonder whether there may be maybe less of that, because I think they all know that they have, realistically there's limitations and what they can do. And that's just objective. So whether or not they wouldn't quite be so, you know, the athletic identity is being really resilient and you can overcome anything, but I think there seems to just be this idea that you shouldn't reach out for help, you shouldn't need help in the first place. So I think maybe that's where I don't know whether it's necessarily a definition of it. I think that's just a fundamental misunderstanding of like, there's a difference between mental health and mental illness. When we say physical health people don't think of like you being really physically ill it's just your health. So I think maybe there's not enough of a distinction made between mental health and mental illness so that people are aware of it.

I: Based on your experience, and what have you found is worked mostly in order to help enhance understanding of mental health issues and athletes. So sort of building on what you just said there about enhancing their mental health literacy, I suppose.

P: I think, probably just trying to learn more about it, I think always comes back to education, doesn't it? So again, you know, I'm trying to do more and trying to do workshops and bits and bobs, and so that they can kind of just talk about it more, I think, and just learn about it. And I suppose I think we probably forget, as practitioners, and I'm doing my PhD in mental health as well. So I've been reading around all of this stuff, I think we probably forget how well versed we are in in these kind of things and how little some people do know. So I think it's trying to kind of educate them, but also maybe trying to see if you can get any of their peers to kind of come forward and feed in, so I did a session recently in that

community. And we're talking about mental health and well being and so I brought in one of the senior players to talk about his experience over lockdown, and how he's been maintaining mental health and wellbeing. And I sent him a lot of questions before and I said, you know, we're not going to go into like your mental health history or whatever. It's just a general chat. But the players seem to really kind of engage in that. And I think that was the most I guess they engaged in that session part of the session the most, when they were talking to somebody one of their peers about what's your experience of it rather than me sort of saying so you know, what can impact your mental health in a negative way? It would kind of be tentative answers, you know, where if when you've got somebody that's maybe they just see as that peer that seemed to go down quite well. So whether or not that's something to consider, I suppose. I felt like I could do that. Because I knew the player in question well, and he was up for doing it. So I guess you have to have willing people, don't you? But yeah, I think maybe just trying to encourage people to share their experiences, I think often you need a couple of people to sort of start things off. And then people maybe get a bit more comfortable. But maybe that's the route rather than it just being purely educational of me standing in front of you for an hour talking at you about definitions and things like that. Maybe it is trying to bring in that element of you know, rather than me just saying we need to talk about it more actually trying to demonstrate that and saying, you know, here's one of your peers, who's going to talk to us about it. And trying to maybe model that to make it more part of the conversation, I guess.

I: Yeah. Have you found then that athlete perceptions are quite receptive to learning about that, based on that experience?

P: I think they probably go along with it. I don't know whether it's something that if you said, What do you want to learn about this week? But don't know if they necessarily pick it out. I think they seemed quite receptive. I think sometimes it can depend how you put it across. And I think, you know, when I've been working in this, or I've been talking to a couple of people about what sessions were doing, and they've sort of said, Oh, you know, maybe if we frame it as like, player wellbeing, or whatever, rather than, like mental health, which I kind of, I'm kind of on the fence, I kind of think if it gets them in the door, and it gets them learning about it, then great. But equally, I kind of feel a bit like surely that's going to add to the issue of, we don't really use the words mental or mental health, mental illness because we're getting health and well being or whatever it is, you know, so I think it can be good to get people talking about it, but I think actually sometimes you just need to be like, we're going to talk about mental health and mental illness today and that's kind of it so I think they seem to have gone along with it fine. And they've attended sessions whether or not it's because they think it's gonna be, not lighter, I don't want to say lighter than it is, but I don't think it's always marketed as we're talking about mental illness today because if it was maybe they will be like, Oh my god, I'm not gonna not gonna do that. So yeah, but they seem to have been receptive from what I can tell.

I: Have you found that a specific age group is benefited most from understanding or education surrounding mental health issues?

P: It's quite mixed. So in, in that sport, in particular, it's quite a mixed age group. And you can do it from any – compete as a senior from any age. Trying to think really, I mean,

they're all kind of between 18 and maybe 35. But they seem quite receptive, I think, to be fair, from a coach point of view, they tend to be a bit older, and they seem to still be kind of receptive, I suppose typically, might be unfair to say, we always presume the older generation maybe a bit less comfortable with it, but I don't feel like I've particularly felt that. But again, it's probably difficult to say, because there is that sort of 18 to 35 age range, they seem to have been fairly receptive to it. But again, I guess, there's probably a difference between listening to the session and half engaging in it, and then feeling like you can actually then go and seek help or encourage someone to seek help. And so I think, yeah, on the face of it, they seem to be okay with it. But I suppose it's just difficult to tell whether that's going to transpire and then actually acting on any of these things.

I: There's quite a prominent research area which has suggested that athletes suffer with adverse mental health issues, or a common mental disorder during times of injury. So what is your opinion of well being and mental health support during times of injury for athletes? Do you think it needs improvements? Or do you think it's something that's already done well?

P: Um, I would say, I guess, being honest, I don't have a massive experience of that. So I probably can't give as full an answer as maybe some other people can. And I think just generally, probably everything to do with mental health, we could do better, or we could do more often, I'm sure kind of injuries, no, kind of exception, I think it's probably trying to make sure that, you know, if you are injured, or in this particular population I work in, it might not necessarily be injury, but it might be kind of illness that can be kind of all of a sudden, and then can be for quite a few months, I think it's probably trying to keep players connected with the team and making sure they are getting that support. And again, I think that probably comes down to the context, I think a lot of these things, I think sometimes I read, you know, recommendations of what we should do as practitioners, which is great. But then I think God, you know, I get two hours, once a month or whatever, with these guys, I'm never gonna be able to do that fully, or as much as I'd like to. So I think sometimes it's not so much maybe the fact that we're not trying to implement stuff, maybe whether it's over injury, but actually, do you have the capacity within your role? Do you have the opportunity? For me, for example, you know, if one of the players was out injured, they wouldn't come to the camp. And so it would be down to me to reach out for them outside of it, which I can and would do, but for example, at the FA, they won't acknowledge it as work and they won't pay you for it. If it's not in that camp setting. Which obviously, I guess you get into the debate of, you know, should you just do it anyway, but they're not being paid at the moment. But it's kind of one of them where I think sometimes it's not necessarily from lack of trying, I think sometimes it's the context that can be quite restrictive. So for me, you know, I then thought, well, I want to do more work with this player, like even over lockdown, for example, we've not had any camps. I've done some work with them over zoom, but I've done it and not been paid for it. Because we've been told, don't really do any work with them, because we can't pay you. And so I think it's more that kind of thing that restricts things. And I think things like injury probably come into that, particularly the settings where we're not working with them full time. Whereas I suppose if you're working in a team full time, and they're still in the vicinity, even though they're injured, you can probably work with them a lot more, if that makes sense, because it's sort

of still in that environment. So I guess just from my perspective, I think there can always be more that you can do in it, but I think it just depends on your setup, probably.

I: What have you found in your experience are athletes able to cope well, within their sport or without their professional sport during times of injury, or have you found any athletes approaching retirement, are they good at dealing with pressure? How have you found that in your experience?

P: I suppose the kind of easiest way I can liken it to at the moment is with this particular group, they've not been able to train at all this year since March, and a lot of them have been shielding as well, because they are severely disabled. So they're in a high risk category. And so, you know, for them, I suppose it's another element as well as they're para athletes. So a lot of them, it is kind of a, it's not necessarily a very new thing, because they have work and things like that, but it's kind of their get out, it's how they get out the house it's their social life. So I think, you know, similar, I guess, to professional athletes, you know, it means a lot to them, and from the feedback I've got from the community is that they've really struggled over this time, particularly, I guess, with things like motivation. Because again, I guess, you know, that sport gives you that structure, it's getting out the house, it's you training regularly and competing and seeing other people. So I think they've really struggled from a motivational point of view. And I guess, you know, with people being furloughed, and things like that, you know, not having as much to do, I think that has been really difficult from a mental perspective. And I think that probably does come down to identity and some of the stuff I've done with those trying to, you know, build your identity outside of the sport. Because, in times like this, whether it's injury or retirement or this weird situation we're in, you know, they're not able to, I guess live that part of their life, which for them, as para athletes, I think is considered to be even more kind of all encompassing, because that's their social network. So I would say they've definitely been struggling with that. And to kind of combat that, I suppose they've just been staying sort of in touch socially over zoom, and things like that, try to stay in the community as much as possible. And I guess we've been trying to do some sort of mental kind of like sports psych work with them to say, you know, you can't train at the moment, but try and work on these skills in the meantime. And so I think that's been helpful, because it's given them that connection to sport. But I do think, fundamentally, I do think that is an issue for everybody, isn't it? And I think sometimes I think it's probably just to, to kind of their role, you know, if you're a professional athlete, and it's all you ever do, and that's where you get your self-esteem from, and you know, you use social connections, and that's your driver, and then suddenly, it's not there. I think we probably don't do enough to encourage athletes in general to have more of an identity outside of the sport. Yeah, I think there probably needs to be more. I guess it's more balanced. And I think it's always difficult because obviously, coaching staff and people like that are always going to want to do as much training as possible and be immersed in it, which, you know, you probably you have to be to some extent, but equally, at what point does that then I guess, compromise your mental health when you are, you know, out injured or whatever. So, I think we could definitely do more in terms of just trying to get across the benefits of a little bit more balance for that long term health really.

I: Based on what you're saying there, what would you recommend needs the most improvement with regards to specific processes or strategies within those environments to help that development?

P: Um, I think that probably just needs to be an understanding of, or more of an understanding of things that can impact athletes' mental health and wellbeing. I think it's difficult because again, it you know, sport is fundamentally it's you have to perform, you have to deliver. And so I think it is always that kind of difficulty between, you know, I know, there's lots of talk about win at all costs, and that's detrimental to your health and things like that. But I think, you know, looking at things, I guess it's a bigger system issue, perhaps, you know, looking at how things are funded, it's funded based on your performance and your medals that you win. And I think, although that performance element is really important. I just wonder at what cost sometimes if things are done in a certain way, that means that there isn't very much balance. So I think probably such an expansive thing isn't it we could probably talked about it all day. I think probably just making people aware of some of the things that would help so encouraging athletes to have a bit of that identity outside of sport, be able to go and do other things and have relationships and friendships outside of that, you know, that your fellow athletes and things like that, really to try and help them with that. But I think fundamentally, I guess as well, it's just getting more sport psychs and people in that profession in these organisations because I think at the moment you know, certainly I suppose in my roles, albeit I'm early in my career, it's always been that consultancy, if you're kind of dropped in for a couple of hours here and there, you don't tend to get perhaps enough time with the athletes to have a real, long lasting effect. So I think probably just more of an awareness of the importance of mental health and actually, you know, looking after athletes mental health is beneficial to their performance. I don't I don't know whether there's enough of an understanding between that connection. Sometimes I think sometimes maybe coaches think it's of one or the other. You know, I think from, I guess, my perspective with the team that I've been working with, like I say, it's kind of I'm off to the side, and I go and do a bit of something with them for a couple hours. You know, God knows what I'm doing with them in a session or whatever. And then oh, it's back to training, because training is really important. And you're thinking yeah, but actually, when you look at like the tournament they did, was it their technical skill that made them come out on top, obviously, to an extent, but actually, was it this time, maybe the fact that they manage things mentally better? So I think it's making clear that connection to people like coaches, and I guess people higher up who want that performance that actually, mental health and well-being is part of that performance. And that's something that really needs to be taken as seriously as we take every other aspect of sports science, I guess.

I: Based on your experience with working with athletes and the range of sports that you've mentioned, what have they required from you as their support service? Have you ever found that well-being is disregarded in favour of performance? Or have you seen the opposite of that?

P: I wouldn't necessarily say I felt that it's been disregarded. But I don't feel like it's sometimes at the forefront of their minds, I think they probably come in thinking, you're purely for performance. That's what you're here to do. So while I don't think they've gone, I've never experienced someone saying, Oh, we don't do any wellbeing stuff, focus on

performance, I just don't think they're probably as aware that that's a thing that that's something that you would cover or should cover. I think perhaps more sort of in the power football community, there's more awareness of that, I think, because maybe they're just a bit more acutely aware of particularly over the past sort of year, I guess, nearly, you know, how their community would struggle from a mental point of view. But I would say sort of day to day in the sport that I've been working with, I definitely think there is that kind of focus on performance. And I think, you know, if I did go in there at the FA, and say, I'm going to do a series of workshops on wellbeing, although in theory, it's great. And it ticks those boxes, with the coaches be like this is a really useful, you know, a good use of your time, or would they be like, what are you doing for performance? I just think that probably is always that preference, focusing on performance and merit, even if it's not so overtly said, if that makes sense.

I: you believe athletes are more or less likely to seek support inside of out or outside of their environment? So what I mean by that is, essentially, maybe comparing and contrasting the experiences you've had working within environments where you've got the coaching structure and the team around job versus the the one to one client experience that you've had, have you found in those experiences, athletes are more likely to come and seek your support for a particular reason, within or without that environment, if that makes sense? bit long winded. Sorry.

P: Yeah, I think. I think from my perspective, I think people probably find it easier to seek your support or to seek support from someone else from a mental health point of view, if they are doing it more independent from the team environment, because I still think from my perspective, I think that obviously, must come from not always wanting to be seen to be doing it. And people not wanting to, you know, you're not wanting people to know that you're seeking that help. So I think there probably is an element. Now I've had someone, worked with them before one to one who was part of a team and a system that I didn't work with. And she didn't gel with the person, the professional who was in that team, but I don't know whether she would have gone to them really to try and seek help for the issue she was having. I think she did, but it didn't, didn't really go anywhere. But then she kind of came to me. And I think she probably liked the fact that I was outside of that environment because I think the environment itself was quite challenging for her. So I think in that case, I think she probably felt you know, you're someone who's more independent, you're not someone who's kind of embroiled in the system as such. So there probably can be a level of just probably feeling like, if you're going to somebody who's independent, you know, it's not going to, in theory have an impact on you in the team, no one's gonna know about it. Whereas I think probably when you are in that team environment, you know, especially like with us on training camps, you're all together most of the time. So if someone pulls you to the side goes off, and we have a chat, most people will probably see it, which obviously, to me, I don't see any issue with as such. But obviously, it's down to how they feel. And so I think probably people do feel it's easier to seek you out independently. That being said, I have had a couple of people that have just pulled me to one side in that environment said, Oh, can we have a chat? And they've been fine. I think sometimes it just comes down to the individual, doesn't it? And whether they're bothered by what people think, or whatever they think it's, it's something that they should or shouldn't be seen doing or not.

I: So, in your opinion, what do you believe needs improving the most in order to better prepare athletes for a transition out of sports?

P: That's an interesting one. I think probably like I've said already a lot about athlete identity, like having that athletic identity is such a major part of them as a person. And I think, you know, I know there's a lot around working with the person, kind of almost behind being the performer, you know. So I think, from my perspective, it's probably trying to just maintain that you're working with a person who happens to then go off and perform, and giving them that support as an individual throughout, then I guess just probably things like, supporting them more in terms of that, you know, that transition out of sport? What does that look like? What do they need support with? And I think, again, I've not personally experienced it, but I've read about, you know, things of, I guess, funding issues, and how long are they funded to have psychology support after they've left the system is it a month? Is it a year? I think things like that, because I think for all the will in the world, you know, you as a psychologist can think, you know, I really want to support this person, they're really struggling, I want to support them for the next six months, however long it takes. But if that system doesn't sort of allow you to do that, unless they come to you privately, which I guess they could do, I think the system, again, can be quite restrictive to it. So I think from my perspective, a lot of these changes need to come from an organisational level, I think, at least in my experience, at the moment, it seems to be sort of left down to those individuals. So depending on what you do as a psych, what you decide, is what then happens. And I don't know, I think that's not necessarily a bad thing. But I think it's better to have a bit more of a unified approach. And, you know, at the moment, I mean, I'm going to, obviously, my PhD is kind of similar area, and you kind of think you don't actually know what individuals are doing day-to-day when they're working with athletes. Do we really? What do we know about what anyone does? So I think probably just doing things from a more organisational level, making sure there is that support after they've left the system. And probably while they're in the system, trying to work with them more, I guess, holistically and trying to think, you know, we're working with people as well, so that that transition perhaps isn't as difficult because they've been able to have that identity outside of sport a little bit. They've been encouraged to go off and pursue other things. So that they are able to transition more effectively, I suppose.

I: Do you think then that is something that needs to be implemented sooner in their athletic lives, rather than maybe leaving it towards the end of their athletic careers, where it's obviously becomes a lot more daunting and a lot more, I suppose real in that way, doesn't it?

P: Yeah, I think I wonder whether sometimes I don't want to say it's an afterthought. And again, you know, I don't probably have quite enough experience with to say, this is what happens and shouldn't happen. But I wonder whether obviously, everybody's so caught up in the performance and you know, what's happening, whether it's an Olympic cycle or whatever, once someone's saying if I'm going to retire or you know, I'm injured, I need to stop competing or whatever. At what point do you then go, right, okay, let's help you like, is it actually well, I'm going to retire in three months time. So you've got quickly three months to go and do probably quite extensive piece of work with people if they are, you know, really obviously wrapped up in that sport. And I think again, it can depend, are they freely

choosing to retire or they retiring through illness or injury? So, they've not really chosen it, I guess that can make a big difference. Um, so I think just kind of laying the groundwork. And maybe it's just how we work with athletes kind of full stop really just trying to be a bit more encouraging, and getting them to build that identity and look at other things that they might be interested in. And I guess, you know, you can't have all of your time doing that, because there is that performance element. But I think that would prevent maybe that mad dash at the end, where we go, oh, gosh, are we then going to support this person, right at the end of the career? Whereas if it's just been a bit more balanced throughout their experience within the system, then in theory, I feel like the kind of exit from that system would be a lot smoother.

I: That's all my questions. Thank you very much. If you feel like you've got anything else to add, or you think we've covered everything?

P: Um, I don't think so I think for me, just kind of my main point, just from what I've experienced, is I feel like a lot of these things, it needs to be from that system level. And I think, you know, sometimes, I guess what, what I've experienced with my roles is just down to you. And I think that can leave us open to just different approaches, which I think is fine. But you know, for me, as an example, I've only been charted for like, a few months, I've been training for a couple of years. So something I might do with somebody from mental health point of view might be something completely different to what you do in 10 years time. And so I think if there can be just more of a system approach and organisational approach, I think it not only will probably make us a bit more unified as a discipline of how we kind of handle things as much as you can be, obviously, with everyone doing things differently. But I think it would just mean that we're more integrated, we're more embedded. And I think often it's trying to look to these governing bodies or these systems and go right, you know, what are you going to put in place so that we can do our jobs as effectively as possible? Rather than the FAA, for example, looking at me going off you go, and I'm kind of shouldering it all on my own. Yeah, so I definitely think, yeah, trying to get from that organisational levels really important to moving forward in my experience anyway.

I: Yeah. That's brilliant. Thank you very much. I really appreciate that.

P: Alright, thank you very much, I'll be sure catch up with you. And I'm gonna keep track of what your work is because it's similar to what I want to be looking at anyway.

End of Interview.

Participant 9

I: If you can start by detailing your experience within professional sports, so if you want to pick out any sort of teams and sort of any individual experience with regards to teams you've worked with or if you've done private work as well?

P: Yeah, sure. Um, so I worked four years full time within professional football, in that four years of full time, sports psychology support. I work primarily with an academy, so between the ages of nines – under-9's to under-23. I guess, as the years continued, that also started to incorporate the first team, and it was probably a unique role. In the club, I actually had a clear transition pathway between the under-18s, the under-23s and the first team, so the average age of the person was actually 19, which meant that although I was working with the under 23 age group, they then encompass a lot the first team as well. Okay, so although they fall within the youth development phase, they were actually playing first team football. So they had this, they were still part of the psychological support programme that I put into place. After my four years full time, within men's professional football, I worked on a consultancy basis, with first team players in the Championship. I've worked with an athletics club, their youth and senior athletes, both male and female, and that was middle distance and cross country. I've more recently got a role with a Women's Professional first team that's coordinating the delivery of sport psychology support across first team down to under 23s and down through their youth setup. And then again, on an individual basis, working with clients in rugby league, rugby union, and men's professional football.

I: So in that experience, and because you found certainly I male environments, female environments in different sports settings, have you found current or previous mental health provision that you've encountered or if you've encountered it at all is successful or useful in any way?

P: So I think it's a really interesting question you ask, and perhaps, because mental health is only really in the last five years or so started to be discussed and recognised in society, and it's still trickling to sport, I think across sport, there's a different level of acceptance, perhaps football's a little bit behind. But we've now got more players that are speaking up and opening up about their mental health issues. Perhaps some of the other sports are a little bit more accepting. I think, within professional football, first off, the EPPP, at the moment, is what most clubs would adhere to for their psych support for player care and everything else, I think there's very limited focus on mental health. It's more around support regarding psychosocial challenges or psychological challenges. So when I worked in football, some of the players did actually raise specific mental health concerns, sorry, if we're looking at mental ill health, they did raise concerns. And we did have a couple of players that were referred. At that club at that time there was no specific programme in place or intervention in place to say this is how we support flourishing – this is how we nourish the mental health of our athletes. And these are some of the things that might malnourish the mental health of our athletes, and this is how we not necessarily deal with it. But this is how we respond to those situations where this is what we have in place. I think we run a couple of PFA focused workshops around mental health. And we did have a guest speaker come in that was an ex-professional footballer who spoke about his struggles with mental ill health. I get again, I think the narrative around mental health in professional football specifically is really

negative, in that we view mental health as a negative construct, which I don't necessarily think is the case. Mental Health exists on a continuum and people can actually be flourishing people can be in an environment that nourishes them, and they do really well. And there's nothing in place at that end of the spectrum. So I guess what we're trying to do now is not necessarily prevent mental ill health, but we're trying to combat mental ill health, we're trying to provide support mechanisms, and we're not looking at the other end. So I'd say, Yeah, for my experiences, it's really limited. And practitioners aren't actually trained or educated in the appropriate way to go and deliver that kind of support. It has to be through referrals. Hopefully, that will change.

I: Yeah, do you think that's a problem then because I've had issues myself where athletes are reticent, or even will completely dismiss it? Because you're almost passing the book? They maybe feel like, Well, my issues are never really been addressed? Because it's always being referred potentially? Do you think that's a problem?

P: Yeah, maybe because I think the athlete so from my experiences, I've developed a really good relationship with the performer. And then they might start to open up about things that do become a little bit more clinical. And at that moment in time, I guess to protect yourself, you kind of refrain from the conversation, but that's the exact opposite of what the performer needs, over the period of time that the athlete's taken to open up to you about something that is so personal that is so sensitive, then to be passed on to somebody else might almost come as like, a massive brick in the face, if that makes sense. I guess the last thing that they need is to build up the courage to then say something to them be told, okay. Right. I'm not in a position to deal with that I'm going to refer you, but also for the sport psychologists, we do need to be mindful of what we are capable and what we're not capable of doing. So most, if not the most appropriate for us, it might be a little bit more challenging for the athlete. So I guess, do you have somebody a clinical psych that they do see every now and then or that's not necessarily that they see, but that's present within the environment? So it's not such an unfamiliar face? We just know that this is a broader part of the psych team. And for certain issues, they might be more appropriate for you to speak to.

I: Yeah, I take it because you're saying that, in your experience, I've never actually had the availability of a clinical psychologist available within that environment?

P: No, absolutely not. So in the few examples where I have had athletes present clinical issues, the first thing that we've done is gone to the club doctor, and then the doctor has sought appropriate support from there.

I: Right. Okay. And so what have you found has worked most in your own experience to enhance understanding of mental health issues within the athletes that you've worked with? So what I mean by that is have you found there's anything that helps them increase that understanding? Is there even a specific age group that you've you found works better than another?

P: So I think, I guess this is just my personal preference. But I think storytelling is really important when it comes to mental health. Because I guess the way in which we relate to others, the way that we learn to others is from hearing their stories, and it's sometimes only

from hearing other stories that we can start to make sense of our own. And I think for both of those two lads that both of which had ruptured their ACL, one had re ruptured his ACL. They both been out for a significant period of time, they were both really quite isolated from the rest of their teammates. And whilst I would say they weren't suffering from clinical mental ill health, I think they were certainly at the lower end of the spectrum. And it was through watching a video. It sounds ridiculous, and it sounds really silly. But um, so the guy Thiago that's recently signed to Liverpool, yeah, he ruptured his ACL a number of years ago and released like, a 20-30 minute documentary on his experiences. So his day to day life of work, and as part of a multidisciplinary team, with the physios with his psychologist. And I sat down with both of the players. And we watched that video and the difference not I don't mean in relation to their well being and I don't mean in relation to their mental health. But the difference in the way that they then viewed that injury, their approach to their rehab was significant. And I think it was because they learned somebody else's story. And they were more accepting that a top-level athlete or world class athlete, a world-class performer in my sport has been through this, these are his experiences and at times he wasn't okay. And so okay, that's, it's fine for me to feel that same way. What I do have my dip to motivation, it isn't because I'm dealing with this badly or when I do feel a little bit isolated. It's not my fault. Actually, this is a normal process. So it normalised their feelings in a way and gave them something to make. Help them to make sense of their own experiences.

I: Yeah, almost like a relatability as well as for them.

P: Yeah, absolutely.

I: Yeah, that's really interesting. I think them seeing that it's almost like they can organise their own thoughts in a way. It's like, oh, wow, he's world class that means I can definitely do that because someone who's at the top end of the game has been able to come through the other side.

P: I think just having somebody. So there was a recent clip where Gilly Flaherty have been in place for West Ham. She was an ex-International, and so she came out and spoke about her own mental health struggles. And I think that video for young girls who are experiencing similar mental ill health would be so meaningful, because if it's not out there, if it's not being talked about, if it's still a taboo topic, if we don't see those people that are role models, or that are inspirational sharing their own stories, then our story seems a little bit – I think our story seems, um, I guess, not invalid. But I think our story doesn't seem as relatable. Which is exactly what you said, and it might be more difficult to make sense of it and our experiences, then if we can simply look to a role model, and say, they experience – and it might not necessarily be for the same reasons, but they actually had a time where they felt like this. They maybe then they sought this type of support, which might create better buy in for mental health interventions.

I: Absolutely. I think that's a really good point. Yeah, I completely agree. I think as well, when you when you think about some of the circumstances, and almost like case studies, in a way with, you know, like the things sporting chance do, where they'll send retired athletes into clubs. I think that can create a sense of relatability. And not necessarily a warning. Well, yeah, sort of a warning, but almost like this is what happens when you go to the very, very

dark side of the sports industry, which I think does create that sense of almost relatability. Certainly younger athletes, I think, from what I've what I've seen and what I've spoken to about in my previous studies.

P: Yeah, I think so I think we have to, I don't think we're at a point yet. Or I might be naive here. I'd argue that we're not at a point where we should be intervening because I don't think we know enough about mental health. I don't think we have a great enough awareness and understanding of mental health in sport to be actually delivering interventions with athletes, because the argument is they should all be underpinned by theory. But if we don't even – how can we pick a theory when we don't even understand the concept? So I think, although doing little things like what he said, that sporting chance might do to just demonstrate, here's an athlete, this is the athletes experiences, mental health is normal. Let's normalise that discussion around people struggling or people facing challenges. I don't think we should be saying, right, this is an intervention to improve your mental health, or this is an intervention to prevent mental ill health because I don't think we're there yet.

I: Have you found that athlete perceptions and mental health issues are receptive when it has been raised? Or have you found that almost a bit of a wall up? Or are they just not interested in it? Because it's been talked about a lot with athletes, where if it's not performance related, they tend not to be interested. So have you found that within your experiences?

P: Um, I think, I think very variable dependent on the individual. I think the terminology scares some people. So yeah, I've had players that will come in, and they say, I feel a little bit down. And when you talk more and more about what feeling a little bit down means, we start to go along the spectrum of it and a little bit closer to depression. But if you mentioned the word depression, I think they will close up straight away. So the way that they phrase it might be, they're trying to say to you they've got a problem, or they're suffering from mental ill health, they just don't necessarily want to use those words. Because I think those words are associated with whether there's a stigma associated with those words. And so the terminology that they use, they might still be trying to communicate that point, but the terminology they use is different. I think it's the same with eating behaviours, too. You might have somebody come to you and say, so for example, I'm trying to lose weight because of this. And the minute that you say anything like disordered eating or eating disorders, that athlete will refrain straight away from the conversation and it's because those two words are essential. It would be I guess, serious. The nature of an athlete is that ultimately they want to perform. And when you start throwing words like depression, anxiety, post-traumatic stress disorder, eating disorders, my opinion is they think that will impact right around performance, their ability to perform. And so whilst they're trying to communicate the same message, they do it in a lot softer and more sensitive way.

I: Almost sounds like, based on what you're saying, because the definitions are there, it almost creates a sense of realism in them that there is a problem.

P: Yes, absolutely.

I: So there's quite a lot of prominent research available surrounding mental health issues in sport that an athlete is certainly more likely to suffer with or exacerbate a pre-existing mental health issue during times of injury. What is your perception of well-being and mental health support during times of injury for an athlete?

P: It's really interesting you say that, because a lot of my work, so when not necessarily when working on a consultancy basis, but when I've been embedded in environments, I've been very much integrated with the medical team as part of – so your injured athletes in the morning, they do an activation session, and we used to do a rota. So you'd have some athletes do an activation, one would be with me, and they'd start their treatment, and it would kind of go in that pathway. So I got a lot of contact with injured players. But I think that was because our head physiotherapist and head of Sport Science at the time. They both were well educated and they were very aware of the need to work as part of the multidisciplinary team. And they really bought into psychology. And so it was viewed as, I guess, a three prong approach to rehabilitation. It was about the S&C. It was about the medical side of things. And it was about the psychological side of things, and always with return to play. So we would never let a player return to play unless all three of us believed that it was appropriate, as opposed to them just being signed off physically, It's fine. Yeah, it was more It was a much more holistic discussion, which is Yeah, so that that side of things was really positive.

I: Yeah, it sounds, it sounds almost quite unique. Based on some of the experiences I've sort of been involved with myself with things like that. It's brilliant. So I suppose you you're targeting all necessary areas, aren't you before even an issue is arisen? You sort of almost pre-empting things by addressing each of those respective factors.

P: So it wasn't necessarily what those players that maybe had short term injuries, anybody that was out for six weeks or longer would have one to one support with me every week. But then those guys with the ACL ruptures, those that have fractured the collarbone. So that was one that was out with a hernia for a while, they will probably see me every time they were in. So that was nearly every day. And it might have just been for five or 10 minutes, but sometimes it was for two or three hours. And I think, so another way that we worked it really nicely was that when the players started to up their rehab and the first part of that was going out and doing some jogging on the pitch. And they used to hate it because they said it was so boring, like they're used to moving quick, they're used to high intensity exercise. So going down to like jogging at a snail's pace they found really frustrating. And I think it reinforced that they were injured to them. Because when they're in the gym, they don't necessarily, it's completely different to the playing environment. Whereas then when they start to transition between the two, and the first stages, all you can do is jog that to them is a significant reminder that I'm nowhere near where the other lads are. It kind of hits them hard. So I used to join in those sessions with them. So if there was one lad, in particular, so they do like a 30-40 minute jog session, and I just used to do that session and chat to them as we were jogging. Because it was so slow. And that offered a really nice way to do an intervention, because it was probably a time when they were at their most vulnerable because they were doing something that they didn't really enjoy. But also because they were on the pitch. They spoke more freely, as they were just jogging around. It kind of came naturally to have a conversation. So that was the way that I then. So I started

working with them very much in the office in a gym environment. And as they started to get closer to their rehab, I also moved outside with them. So I tried to kind of transition with them. And then when they were integrated back into training, I was present at the training sessions. So what we wanted to create really was some stability across each of the different phases by me being a present, visible character to know that they did have support, whether I'm not too sure what they thought of it, but I actually really enjoyed it.

I: It's funny, I think drawing on something you said before because you had such positive buy in and engagement from other members of staff. Do you think that was a really positive influence on you being able to do that and engage in those activities with them? Because you had such a positive support around you as well from the rest of the team?

P: Yeah, absolutely. Because, um, I guess, like, most people, or I guess, many sporting organisations, if somebody is doing their rehab, let's say they are really doing a 30-minute slow jog around the pitches, you wouldn't expect to see them doing it with the psychologist that the S&C coach to be out there blowing the whistle or whatever else. But it meant that they could say to me, right, let the player take ownership of the session. This is what I want them to do. You let them take the ownership. But just so that you're aware, this is what they should be doing. And that gave them some autonomy. It offered an opportunity for conversation. And it was quite interesting for the performer too and yeah, so without their support in relation to that it would have been a lot lot harder.

I: Do you think in terms of supporting mental health, and certainly addressing ill mental health in those environments, it is important to have that that buy in from other members of staff for you as the support provision to be embedded into the team? Or do you think it's better as almost be a separate part and then they can refer you? What have you found works better?

P: I think being embedded is better. I think that in relation to mental health literacy, because if you've got a culture that has a stigma towards mental health doesn't really understand the spectrum of mental health doesn't understand mental ill health. What you find is like staff are scared of mental ill health. Because a) they feel slightly responsible. If you've got an athlete that comes to you or that needs support in relation to mental ill health. The terminology might scare them, because they feel it something they aren't necessarily clued up on, they don't really know that much about. And therefore if that if I'm not embedded in the environment, the first thing they're going to do is refer. And that whole process for an athlete being like, I need some support. I know that the physiotherapist is a little bit scared of mental ill health. I know that the coaches are a little bit scared of the terminologies surrounding mental ill health. I don't really want to say it because if I say I'm no, I'm no, I'm going to bring up something that nobody feels comfortable in talking about. Whereas if we felt more comfortable, and it was more normalised in that environment, not necessarily normalise it will face mental ill health. But that talking about mental health positively or negatively was more normalised, I think it would be much easier for athletes to have that conversation.

I: Yeah. Do you think that it's then comes down to the athlete's ability, almost like the relationship you then build with the athlete and that level of trust, you can build them because you're embedded in the environment?

P: Yeah. And I think not necessarily just the athlete, but all of the different stakeholders. So if over time, you could create a culture in which all stakeholders understand the spectrum of mental health in looking at how an environment nourishes an athlete's mental health, right the way through to how an environment or how certain psychosocial challenges can malnourished and mental health, I think as individuals we might create, or we might be might facilitate athletes help seeking behaviours. Yeah. And that's ultimately what we want to do.

I: There's been quite a bit of literature surrounding the effect with and without a sport can influence and athletes identity as a person. And certainly within injuries, retirement may be transitions within and without the sport as well. How have you found athletes are able to cope without their sport when they are injured?

P: Um, I think variably again, I wouldn't say this group of athletes do really well and this group does really poorly. I think it is dependent on a range of different factors. Firstly, are they on a short term or long term contract because, three months left and you pick up a six month injury. You know, the last game you played was the last game you are going to play until you find out whether you're being retained or released. Likewise, if you're somebody that's looking to make the step up between, like, across the development phase. So from FP to YDP, or YDP to PDP or PDP to Senior, and the injury occurs at a period like that, I think you're probably more vulnerable to mental ill health. I think the environment in which you exist, if you've got any other, I guess a significant other as in like a teammate who has been through something similar or is going through something similar. So the two ACL lads very much work together throughout the whole of their rehab. And it was almost their partnership. And their, I guess the shared experiences are really positive. So having not only the right support from appropriately qualified people, but also having peer support is really important. On I think, it depends on the personal characteristics or the personal experiences, the history of the performer as well, because you might have one performer who has a really supportive home environment, he might well have been through something before that's a little bit similar. He might, just his own personal qualities might mean that he deals with it better. In contrast, you might have performer B that move club not that long ago, you might be in an unfamiliar country, he might not have the best relationships with the coaches, he might be a little bit isolated. He might be vulnerable anyway, all sorts of other CMD symptomology. And therefore, he's somebody that, for me, would be a red flag for potentially suffering from mental ill health.

I: Yeah, absolutely. Their social support network needs to be really effective for them to be able to deal with injuries, and maybe life without sport. It's almost like preparing them, isn't it? Do you think?

P: Yeah, I think so. And I think that support shouldn't just be within the club, it should also be outside of the club, in that if they have a network of individuals that they feel comfortable, if they have an identity outside of the sporting environment. If they're broader

than just the footballer or the swimmer or tennis player. I think that's always going to be a positive in helping them to deal with setbacks. And also at that moment in time, what they might do is invest themselves in something else. So I've been taken away from doing my day to day duties as an elite or professional athlete. During that period of time, what might I do, well retirement is maybe two or three years away? So what I might do is engage in certain CPD course. So it's, I think, while support, it's really important that support shouldn't just be from a psychologist, it shouldn't just be from a physiotherapist. It should be at a range of different stakeholder levels, both within and outside of the club.

I: I think that will certainly help them almost create a plan for retirement, and then one net for the transition out of sport, because they have that almost like that foundation that's pre existing years before they actually retire.

P: Yeah, I think more broadly, we've got to give athletes opportunities to explore and broaden their identity, right from the point of entry into sport, it can't be entry into sport. And that's it, this is me until I retire, arguably, we should be trying to develop well rounded holistic individuals with a range of different – we want to give them different experiences, we want them to have an enriching sport environment, as opposed to an environment that constrains their development, because it's all about a single minded dedication. And I think by doing that, right from the younger ages, will not only prepare athletes to deal better with transitions, and the potential impact on mental health that these transitional periods might have, will also draw in those moments in time an athlete will just revert back to I'm aware of, I've got all of these other identities, these are the exploration opportunities that I engaged in during this phase of my career or during this phase. So now what I want to do is this, so they'll be more willing and open to look elsewhere for their sense of fulfilment.

I: Based on your experience, and what have you found, needs the most improvement with regards to aid in athletes mental health and their well being throughout that journey in that environment?

P: That's a big question. I honestly think there's a blank canvas. I think we're at the drawing board. And it's good that we're having these conversations. But with regards to identifying one thing that needs improving, I don't think that's appropriate. What I do think is appropriate is saying we've got a blank canvas we know that sport, in general hasn't necessarily been facilitated for athletes' wellbeing for athletes' mental health. Can we understand more about why? What's the environmental influence? And then not a sports psychologist, but as stakeholders who work within sport. What is most important to address first off, and then how can we develop a more cohesive programme, and it gets a culturally bespoke programme because every sport is different, we need to be mindful of the socio-cultural context in which athletes exist. So I think developing culturally bespoke mental health. We're gonna call it interventions, although I don't want to say interventions that don't think we're there yet. Interventions needs us all to take a step back. And by taking that step back, we better understand the landscape in which athletes exist, we understand their lived experiences. And so rather than criticise or critique the support that's been delivered today, I think, for me more, it's about accepting that anything that's been done, or a lot of what's been done currently is probably based on guesswork. As opposed to a true

understanding. And I think the first way to improve that would be to get actual understanding.

I: Do you think that that needs to come from, as you as you say, the stakeholders within the club or even within the sport within the, that the NGBs? Where do you think that needs to come from? Everyone?

P: I think, yeah, I think everyone, I think a broad understanding could be developed to kind of NGB level. But I think, again, or sports specific levels, I think we need a sports specific understanding of mental health. I think we need a gender specific understanding of mental health. And I think we need age specific understanding of mental health, once we have those. So we might say think Women's Professional Football looks a little bit like this. This is what makes athletes vulnerable. These are the key psychosocial stressors within that particular culture, or within that particular context. For adolescent athletes, these might be some of the key periods during which athletes are most vulnerable to mental ill health. And again, let's say, a men's non contact sport, these are some of the stressors that will likely result in mental ill health. Once we have that broader picture, I think we can then start to say, Okay, how do we combat some of those challenges? Or how might we best support athletes through them? But I think, yeah, that has to come at a range of stakeholder levels. Not necessarily with them conducting anything, but they have to buy in, and they have to buy into the terminology with the athlete in mind. I'm not necessarily always looking at mental ill health, we need to look at flourishing – flourishing mental health too. We want to understand what are the pivotal moments or what are the critical moments that might foster mental ill health, but also what can we be doing to nourish mental health? What are some of the moments or what are some of the environmental characteristics that nourish an athlete's mental health? And therefore, that's what we need to be doing more of. I think we're very much focusing on one end, I think we need to focus across the whole spectrum.. But I think we need to actually understand it first off.

I: And I just got a couple more questions for you from you've actually pre answered a few. Anyway. So this is probably less questions than I'd planned. But that's, that's good. You beat me to it. So it's been brilliant. So just a couple more left. So during your career, what have you found athletes have required most from professional support services? Is it always performance related? Or is it well being related? Or have you found a mixture?

P: I think performance stuff a lot of the time, they can take care of that themselves, or it's minimal. And what you'll find is a performer might come to you with a performance-based issue. So I have loved that had a bit of dip in form, and he was really cheesed off about it. And he said, I don't really know why it's happening. Anyway, it turned out they just split up from his girlfriend, it was really messy breakup. And the reality was that the impact on performance was due to something a lot broader. And most of the times when my door opens, and an athlete or a player walks in, it isn't discussed being brought off after 65 minutes. It isn't to discuss missing a penalty, it isn't to discuss a dip in confidence. Or if it is those things, there's always something behind it. And it's those broader life issues. And I wouldn't necessarily say it's always the impact on their wellbeing. It's the impact on both. Their own goal's, ultimately, performance and so they're, they're highly bothered about and they're highly conscious of their performance. But I think hand in hand, they won't

necessarily say it because of the stigma associated with that conversation. But I think yeah, they, it's like it's bothering me how they'll term it. It's really bothering me. It's really cheesed me off. And the reality is okay, so it's having an impact on your well-being. Is that what you're trying to say? And I think that's what athletes are trying to say. They just don't really know how to say it.

I: Yeah. Yeah. I think that's a really good point as well. It's almost like, like a fear associated with that oh, it's a weakness. So I can't discuss that. And then it becomes a bigger issue by that terminology, and those definitions.

P: And I think like they'll say things, a common term that they use is I've lost my head. And I've lost my head is a term to say like, I'm actually really struggling or another one might be it's doing my head in this and like, it's doing my head in towards guys. It's just a normal term that we would use. But actually behind that, if you look at the meaning, and it's doing my head in and what does it mean, and I think most performers are saying that's not about...

[Break in Interview]

And so just one last question for you. And so, in your experience, do you believe athletes are more or less likely to seek support within their environments or outside of their environment? So, what I mean by that is, when you've been embedded in the team, have you found athletes are more likely to seek support from you? Or have you found when you're doing s client work outside of that, because you're almost an external part of that environment, you're more likely to be contacted?

P: Being embedded is a lot easier. So I always find the tension when you're working with an athlete externally, if they already have a psych in there A) Why aren't they working with that psych? B) that then that puts constraints on, I guess, my relationship because I don't know anything about the culture, I have no contextual understanding, because I'm not there. And so it's always really worse. There's obviously a reason why the athlete or why the player has sought that support, I think being embedded in the environment. And being there frequently, being present, being somebody that is approachable, that they get along with, is significantly better with regards to help-seeking, especially when it comes to mental health, I think, because you get the opportunity to have that dialogue, irrespective of where they're at. Whereas, you know, if somebody is, I guess, seeking your support externally, the likelihood is they're seeking that because they do have something that they want help with. So they're doing it for a reason. Whereas if you were embedded within that organisation, you can normalise conversations. Yeah, so they talk irrespective of what their current headspace is, or their mindset.

I: I think that the general consensus is being embedded within that environment and as part of a team's greater holistic processes is always more conducive to positive experience for them, isn't it?

P: Yeah, well, that's my experience, I don't want to generalise. I think that's, I guess some psychologists work better in different ways too so you might have some psychologists that prefer that distant approach, whereas I very much like being a part of the organisation. I

like being in there with them knowing everything that's going on. Yeah, so for me definitely being integrated is more positive.

I: Yeah, I think it's I was gonna build on that is interesting that people have already spoken to have got like a nice mix of people's experiences. Some people have had that really positive experience being embedded in so that's, that's been absolutely amazing. Thank you very much. I really appreciate you taking the time to speak to me.

P: Hopefully, I'm like, not just gone completely off topic. Everyone else has said. I'm just like some random anomaly.

I: No, no, it's been it's been really, really useful. Thank you. Thank you so much for that. I really appreciate it

P: It's absolutely no problem. Thank you for your time.

I: Thank you for your time.

End of Interview.

Participant 10

I: So firstly, can you just please detail your experience within professional sports or any notable teams or any notable roles that you've had?

P: So, working for the last five years, maybe five years, working as a sport psychology consultant with British swimming bits with British athletics, Birmingham City Football Club, quite an awful lot with hockey. So, with the Loughborough University, men's and women's teams, but also from the work with Scotland, and a couple of Wales hockey players and GB hockey players. And that's all in a role as sports psychologist and some bits with the NHS, but that was as a consultant with their management. So that's my working at a cultural level than anything.

I: In your experience, and if you ever found, current or previous mental health provision you've encountered in professional sport, was it successful or unsuccessful? I suppose what I mean is, if you've had any athletes come and address any issues that they've had dealing with depression or consistent low mood states, severe anxiety or stress, potential issues with maladaptive coping, or unable to cope with the amount of stressors or sports that's affecting psychological well-being, if you've encountered that, and how you've potentially dealt with that?

P: So, two athletes, track and field athletes, and with both of those athletes, I refer them on to GPs, to then go and work with clinical psychologists, because in my opinion, we are not remotely qualified to do anything with mental health. That is very much what clinical psychologists are trained to do, they've had a very rigorous three year, clinical doctorate to do that. And although we can open stuff up, we are not trained to close it down. And so to me, it's dangerous if we start working with people with mental health problems, you've probably got a couple of sports psychologists that are also clinical psychologists, but to me, they're the only people that should be working or qualified and trained to be working with that sort of thing. So certainly, when there are people with mental health concerns, I've just referred them off to GPs.

I: Do think that's a problem with the pathway of becoming a sport psychologist because it feels like it's a growing area, do you think there's something that should be implemented into the pathway?

P: I think it should. But it's two very different populations, in a sense that you're – I think there should be to me when you're working with somebody, obviously build up rapport and a bond, and it would probably be more helpful for that potentially, or helpful for them if they were working with someone that was trained across a spectrum of different things. But I think we are very, very far away from that point. If we could get to that point as sports psychologists, that would be a very good thing. That would be a very, very good thing. I think we're quite far away from that. Whether there's an appetite to train us, but by train I mean properly train, not just do a two day workshop on depression. Because that's, you know, to me, that's where you get in dangerous waters and dangerous territory is because two days you can't cover what you're covering for your doctorate. But I think if there to be a three year doctorate, where you almost had the combining of sports psychology and

clinical, they had that on them, then that would be a good route forward but that would need to be done properly.

I: So what has worked most in your own experience to enhance understanding of mental health issues within athletes? Have you ever encountered anyone who's maybe doesn't quite understand what's going on in themselves and have approached you to maybe find some clarity in that?

P: If it's anything to do with mental health I will just refer to GPs.

I: Immediately?

P: Yes.

I: Right. Okay. Is that in a sense that, again, you're drawing back on your own training that you feel like you can't even approach it. It's, I suppose it's off limits, because I feel like I'm not—

P: No it's not a feeling. No, no, my sister and brother in law are both clinical psychologists, my aunt's a clinical psychologist and very well aware of how they've been trained, what they are dealing with on a day to day basis. And I would know, to me, it's absolutely unethical for anyone to use and to pretend like you do you know something about – I think there is a huge amount there that, you know, there's a reason that I mean, a three year doctorate is just the tip of the iceberg. We've also worked with psych assistance and all this different work that I from, about other sports psychologists, but I've certainly not had that experience and so to me, it would be unethical for me to be I would be doing a disservice to whoever I was working with too, it's not my realm and doing more of a service to them, to refer them to someone that genuinely knows about that area. That's their specialty. They've trained in that for years. I haven't.

I: And what do you believe athlete perceptions are a mental health issues? I suppose any environments that you've been in? Are coaches aware of it, do they understand it, encourage discussions about it? If so, why? And if not, why not?

P: I think in society generally, there's more awareness of particularly with the Royals recently. So the Heads Up, the Heads Up campaign. There is more awareness in general about that, again, even in sports psychology, we are using labels that are just wrong. So when we talk about working with someone with anxiety, it's not anxiety, the way that clinical psychologists work. We work with worry, basically, people worry, but it's not anxiety. So again, I suppose a lot more stuff more performance.

I'll get back the question. I think there is more awareness. And there's more. And I think that's a good thing. I think coaches are becoming more aware of the multifaceted lives that athletes lead, and the other things that are going on in their lives just beyond the hockey pitch of the tennis court, or a football pitch, or whatever it might be. And that's a good thing. And it's creating an environment that people feel that they can be more open about these things, that there's less stigma attached. But also, more importantly, we are – it was

the head of psychiatry for the head of British psychiatry group, whoever that is, saying you've got all this awareness, we're now becoming more aware of mental health issues, but we do not remotely have the provision to you have enough people trained to deal with what's coming out. So again, it's just making sure that within sport is absolutely a good thing. And it's where we do need to move to, that people are more aware. And instead of just surviving in elite sport actually thriving in elite sport, and to do that, you know, the mental health has to absolutely be there. But I think we need the correct provision. If we're going to start talking about stuff, we actually need to be able to actually have that provision there to be able to do something about it has just been, you know, just talking about it. And these are things and then if someone then comes to say, I've got this, I can't do anything about it, then there's not too much to be used by an athlete there.

I: What age group Do you feel benefits most from? education, understanding of mental health issues?

P: Everyone.

I: Everyone?

P: So mental health is something that whether you are eight years old or eighty years old, everyone can – one in four people throughout a lifetime have a mental health issue. And so to me, there are probably ages where things get more exacerbated. So when you first go to university, that's when the first year of undergrad is, I think the peak time for people developing psychiatric or mental health issues. So there certainly should be more awareness when athletes are, you know, dual career going to University. But that's, again, the pressures of sport and different elements of sport, but also just as human beings to me it's not something that's just pigeon holed to one group. It's all genders all. All ages. We have to be aware of.

I: So, according to some research has been suggested athletes suffer with adverse mental health issues during times of injury are certainly more likely to. So what is your opinion of well being and mental health support during times of injury?

P: To me, it's, it's a lot of the work that I will do well, certainly, big chunks of work I'll do with people is when they're injured, because it's a difficult time you're, you're out, you're also literally out of a team. So it's keeping connected within the team. So what sort of role can you give to an athlete to keep them feeling like they're part of that team, you've got the isolation element of it and you've obviously got pain that they're dealing with. Potentially the grief process going through, so is a time, it's very important for a sport psychologist to be involved in that. And if it has tipped over the edge, then it's bringing in a clinical psychologist too. But to answer your previous question, just what I'm seeing, working with clinical psychologists, I've always been very aware throughout my practice, who the people who the clinical psychs around me are. So I've got very clear referral routes so it's not a case of passing the book or dumping, you know, to the GP. And in a month's time, you might have, I've always very clearly had that athletes are using referral pathways, and it's quite clear for them, I'll check in and we'll be working with that clinical psychologist, at their area

and of my area. But I don't know if most people work like that, they might do, but I don't know.

I: What's your opinion on how athletes are able to cope within sports and then without sport, because obviously, this draws on some of the things you were saying about being injured and that grief process as well as you think they're able to, to cope with that, as well as cope with stress and expectations within sport? I suppose it comes down to how are they managing themselves within that environment and be aware of that grief process to be aware of their own, I suppose self, their emotional well being? Is that something they've talked to you about in terms of I don't know why I'm feeling like this?

P: So for me. Absolutely. But if you're the kind of athlete that's going to a sports psychologist anyway, you're more likely to be aware of and able to talk about and express and have that vocabulary around your, the mental side of things. So absolutely. All athletes I work with and coaches that I've worked with, absolutely have an idea of what's going on and awareness of what's going on. But then you've got all the other athletes that don't work with psychologists that maybe we might do it, but maybe they don't have that awareness.

I: Do you think we need a rigid process in place to say this is a continuous educational process as part of your journey as an athlete?

P: Yep. So there's no, I am not seeking, like, from any form of authority here, because I don't necessarily know. But to me, I don't know what the provision is across the different sports that we should get to a place where, throughout the pathway, there is sports equality provision, but not just in a negative sense, also, in a very positive sense, you know, you don't go to the gym, when you're injured, you're always going to the gym, and you're always working on getting stronger. And it's the exact same with the psychology side of things. And it's, you know, we almost don't have any provision, when athletes and juniors and then suddenly sports psychologists are brought in, and we expect them to have a clue what to do with sports psychologists. But they've never they've never had that. So to me, it's something that absolute because to me, psychology is as important as physio, as S&Cs, all these other things, and there should be that proper creation of provision all the way through their journey.

I: And I suppose this leads into the next one, what would you recommend needs the most improvement with regards to aiding athlete's mental health, any particular processes or strategies or procedures you think would need implementing or improving on?

P: I think, number one, sports psychologists, if they are not trained in clinical psychology, need to be aware of how dangerous it can be to, as I said, anyone can open anything up, but we're not trained to close it down. People can leave our offices, worst case scenario, but people can leave offices feeling suicidal. And that's what I said, to me it's an ethical issue. And that's what I want. I'm not trained to work with that. And I'm not arrogant enough to think that I can. I don't have a clinical doctorate. So to me, there needs to be awareness of sports, even if you feel confident that you can work with eating disorders, unless you're properly trained beyond a two day or five day, you know, unless you're genuinely trained. And as I said, I'm not talking about five day workshops, but if you're genuinely trained in it,

and yes, engage with it, if you're not have a system in place where you find the clinical psychologists in your area, you know, set up an arrangement with them where you can refer people to them. And so to me, that's one thing. The other thing is more of a long term proposal. I don't personally think you do need to have sport psychologists to be trained in mental health, if you just have a really good streamlined system, we have a sports psychologist potentially working on the performance side of things, but you also have a clinical, I don't think you need sports psychologists to necessarily have to do absolutely everything, we're just needs to be provision, there absolutely needs to be clinical psychologists, absolutely embedded in the system. And potentially as integrated as sports, you know, probably as integrated if not more than sports psychologists, and there's just dialogue and work. You're working with each other. It's part of the team. Because to me, that's where we need to get to the heart of a psychology team, instead of just one psychologist working in isolation, actually having different areas of expertise, you know, clinical psychs, sport psychs. To me, then, that is doing more of a service to the athletes than what we probably currently have.

I: And do you believe stigma of adverse mental health is still prevalent in professional sports from your experience?

P: I think it's prevalent in society. I think it's not just in – if you look at the jokes that are made on TV or in films, it's probably becoming less the more that particularly high profile celebrities and high profile figures are talking about mental health issues have been normalised as in you, idolise whoever it is, they've had this this issue as well. That means I'm normal. So it's normalising different things. So, like, Stephen Fry's got bipolar.

I: Yeah, I think so.

P: So the different people talking about depression, and it's normal why is this different stuff? Based off that we do have some way to go.

I: During your career, what have you found athletes required most from a professional support service? Is it all performance related? Or is it a mixture of well-being and performance or is even well being completely disregarded for the pursuit of performance?

P: Mainly performance issues I will work with you to optimise your performance and produce consistently time and time and time again. So most of the work I'll do is around performance, but at the same time, there is the well-being element as well, because you cannot, no human can keep this level of consistency that, you know, there are ups and downs, and particularly when, I guess, that particularly helps people thrive. Because if you're, if you're just doing your sport, and then there, if you're injured, or at the end of an Olympic cycle, you then you know, people are on holiday, and they go off and do stuff if you don't have anything else. And that doesn't create a very content -minded, happy person. Which again, I think is the ethical side of things that, yes, we as sports psychologists should want performance, but should not be at the detriment of well-being. And to me, it's not an either or it's not either performance or well being. It should be both and I think you can have both. And I suppose that's what the EIS are moving to with the Thrive project. Yeah. Which is quite exciting to see.

I: In your experience, do you believe athletes are more or less likely to seek support inside or outside of their environments?

P: I can only talk about my own experience. So my own experiences, that people will come to me as they know that I'm the psychologist and have usually been at most training sessions. So that would be the first port of call. And then if a few athletes that have clinical issues going on, referred them on. But I do not know what it's like if you're in a sport without a psychologist. I don't know what they would do.

I: Well, just to give you a bit of context, in my first study. Participants waited until they retired. So they're struggling with issues for three to four years and opening up when they're retired, and then they felt confident. Why do you think they would do that? Obviously, it's a broad question because you're not the one dealing with this. I suppose it's just based on your experience, why would you think they wouldn't feel confident?

P: Again, I'll preface what I see with because again, all the environments that I've been in, they've wanted a psychologist in that environment. So I've always been in environments that are psychologically safe. But I would assume, and this is an assumption, that in other environments where maybe you don't, there probably are fears about are you going to be dropped from the team, as you were saying before, if you're treated the same as a, you know, if you've got something going on with it. I'm assuming it would be around stigma and fears about not being selected. And if your whole identity is that you're a professional athlete, then you don't want to compromise you're probably don't want to compromise your selection being picked week in week out. But it's really sad to hear that.

I: So just got a couple more questions. This one's got statements as well, sorry, previous professional athletes reported, they're more likely to speak to and discuss their mental state with a physiotherapist within their club. So it's just a bit of research I've come across. Why do you think these particular athletes are less likely to seek help from a trained professional with regards to their mental well being? And how can we improve this?

P: Well it makes sense that you would speak to physio because yeah, if you're an athlete, you just get injured, who's the first person that you've seen? Yeah, a physio, if you're getting a massage, or whatever it is from a physio, then you can be a bit more relaxed, and you do have a lot of those conversations. So to me, it's important as psychologists to work with physios that they are aware of the different issues that they are also trained themselves, and maybe how you if someone says this, how to handle it, but then also how to, you know, really then pointing someone on to. But to me that so, to me, as a psychologist, we're always the glue in the middle that can, whether people realise or no, everyone is doing psychology the whole time. And so to me, there's a role for us there to work with physios, to work with the different service providers that they are aware of, of what's going on maybe what to say and what not to say. But then also, what's the correct referral process on the athlete? Can they get the correct help that they need?

I: In your opinion, what you believe needs improving in order to better prepare athletes for the transition out of sport? So when they actually come into that retirement stage, and I suppose even leading up to retirement as well.

P: Having a wide interest outside of the sport, if all you've ever done is sport and all you have is sport and all your friends will be in training, and then suddenly you're not at training, you've now lost all your friends, how to keep up with them. So to me, the more identities suggest, Joe that the swimmer or Joe the footballer and a more rounded life that then means that when one part of your – I mean the way we talk about athletes when they retire, it's almost like they're dead. You know, like Stevie G *was* a good footballer, when we say someone was something it's because they died. So even I think we need to change our instead of saying it's all over, you know, they've retired, they've come to the end, blah, blah, blah, I actually know that there's a could be an even more exciting part of your life coming up. But for me, it's a lot of stuff around helping people to have that more rounded view of themselves and their life that then yes, one part is coming to an end. But then there's more exciting things coming up.

I: Do you think that needs implementing in an earlier stage in their development to try and broaden their identity as people?

P: I do. I think, again, it helps with a more prolonged career. So, look at Serena Williams and Venus Williams. Throughout their careers, Venus has done her fashion, Serena did acting at one point. And you know, if you look at their careers, Serena is 38 maybe? And she's still right at the top of the game. But she credits that because she went and had different interests at different points. Whereas Kim Clijsters, Justine Ennan both turned pro at 16 and full time professionals and then didn't do anything else. And then Justine Ennan was maybe 26 when she retired? Whereas Serena had that variation and it prolonged her career. I mean, but Serena very successful Kim Clijsters, Justin Ennan were also incredibly successful, so they're all examples of very successful people. Just Serena prolonged her career a bit longer.

I: I know there's a bit of a debate between multi-sports and early specialisation as well, do you think that's potentially something to do with it. There's football academies at the moment, I think is a massive ethical issue with getting younger and younger players into Academy systems. It just seems like you force them into an area.

P: And it doesn't. When you look at Andy Murray he was offered a scholarship to be a footballer with Hibs. He was so he was very good footballer, his grandfather played for Hibs, I think. They chose to go down the tennis route. When you look at it, he's got really good footwork. So you can tell that coming through. But so to me, it's a good thing if, if people play more sports also means that your identity is not hinged on Johnny, the tennis player who has to win week-in-week-out to keep his identity up. He also will know more people in different contexts and again, it will create a more rounded human being.

I: And just if you've got any final comments on that topic at all?

P: No

I: That's great. Thanks very much.

P: Thanks for thanks for coming in.

End of Interview.

Participant 11

I: So if you can just first detail your experience within sport, so any clients or teams of the various sports that you've worked in first please?

P: Yeah. So my main role at the minute is working at Harlequins Rugby Club. So I work mainly in like the women's section of the club, but also a bit of stuff in the academy and that sort of thing when, when they need a bit of extra bodies in there. And also work with TASS as well. So based in King's in London, so a lot of their London athletes and stuff so I work quite a lot with them. There's football quite a bit. Golf, tennis. I've worked quite a lot with student athletes as well in the past, which is quite cool. Like that dual career type stuff. Pretty much a bit of everything. A bit of everything. I think so yes. I was mainly at the minute is Quinn's and TASS.

I: yeah, how have you found that because it's like a team versus individuals in a way, isn't it? How have you found it working with teams versus with individuals on a one to one basis?

P: I think it's quite an interesting one isn't it really I think obviously, within teams you've got other people that can influence and you can sort of bounce ideas off. And also like for the athletes themselves there, they've obviously got so many other potential issues, like selections, quite a common one we find, but also, it's potentially one of their really close friends that they're in a selection battle with. So they have that sort of quite hard moral focus on them, because they really want obviously play, but at the same time, they're really happy that they're friends. And that's, that's probably the main one that's quite interesting between the two, obviously, with the individual athletes I work with, I don't really know too much about what goes on in their training or with all the external factors, whereas with the teams, you're pretty much involved with everything really, so yeah, I think. Yeah, it's really quite interesting from that perspective.

I: Okay, so, in your experience, have you found then any current or even previous mental health provision you've encountered in professional sport to be useful or successful in any way? Or have you even found that maybe it doesn't exist in some circumstances?

P: Yeah, I think, I think quite a lot of the time, it's, it's quite limited. I know from past experience of having to refer clients onto more specialist mental health providers, when there's, there's not loads that is easily signposted from the club's themselves. Which I think if there was like clear links to organisation's like Cognacity and places like that, where they can sort of go along the pathways, I think it would just make everything a little bit easier. Not easier, but easier, if that makes sense?

I: Yeah, they're more streamlined.

P: Yeah, exactly. Rather than me having to go away and be like, right, let me find you, I'll refer you to someone, but then they're sort of almost waiting. And I mean at Quinns we do have a sports doctor. So that's quite good, because at least between the two of us, we can sort of, I can ask them to speak to her and then she could assess them from a GPs point of view. And we can sort of come at it from sort of both ways like that. I don't think

there's too much to be honest that's, that's obvious, or that's out there. I know quite a lot of charities and stuff, obviously are starting to do things like, what they called? Sports in mind? Are they the one that will work with the young athletes?

I: Yeah, I think there's Sport in Mind and there's Sporting Chance that works in football as well.

P: And that's good, I think but it's just, it's almost I think, I think just everything in the whole of any sport just needs to have a clearer process as to you know, if you are struggling, these are the people that we have got a partnership with our link within you can just follow this procedure. I think that would just make everything a lot a lot easier and a lot, a lot better for the athletes.

I: Do you think that's then an issue I suppose because, obviously within your role, which is part of your responsibility to develop that relationship and that trust, you think there's then an issue of someone who's happy to disclose that information to you? And then it's almost because obviously, within your remit, you're then having to refer them on to someone else? You think that's maybe some sort of dissonance, I suppose in the process, all the procedures that are in place?

P: Yeah, I think definitely, I think obviously, the fact that they can open up to someone, whoever that is a massive thing. So then you don't want to do anything that would jeopardise them wanting to speak to you again, or we see a different player come in wanting to speak to because obviously, that's, you know, that would be but that's pretty much the last thing that you want to do. So I think it is that type of that type of thing. And that obviously, they they're coming to you because they trust you. And perhaps they know that maybe speaking to their GP or speaking to a doctor might be a better option. But actually, you know, a lot of the time they don't ever go to the GP a lot of the athletes I work with, they're obviously you know, super fit, super healthy for them. It's not, they don't have that sort of personal relationship. So I think it's Yeah, I think there's definitely quite that sort of disconnect between being open about it, and then actually, almost not wanting to be referred on but almost that sort of hesitancy of like, Oh, this person doesn't know anything about me, they're, you know, they're just could be, could be just a stranger to them. So I think it is like that middle ground almost where us as sport psychs need to have more clinical training so that we're able to sort of provide more support, like hands on the ground, or whatever it is, that needs to just be a much clearer procedure to follow so that everyone knows, this is what's happening. And it's not going to sort of take away your relationship from the psych you've got at your club, but it's actually going to just help you improve your own mental health and well being, alongside that, but yeah, and obviously, you get all your issues around confidentiality, and, and all of those sorts of stuff coming into play. So it's, yeah, it's, it's a tricky one. Definitely.

I: Yeah. So what have you found has worked most in your experience in order to enhance the understanding of mental health issues in athletes? So how have you found in your experience, it's that enhancement or an understanding or education of mental health has worked?

P: I think it's that last point is that sort of understanding of it. So we try and be really open, and try and facilitate conversations with everyone, whether that's from a mental health point of view, whether that's just you just want to have a cup of tea and a chat, like whatever it is, we try. And whether that's with me or a coach or an S&C or a physio, we try and really have that open conversation with people so that it's obviously trying to take away that stigma within the club. But obviously, it's down to people's own individual stigmas as well, especially if they might have had family members or stuff that that have gone through mental health problems, or perhaps they don't want to see that as a sign of weakness. And I think in sport, especially my experience, I think, if people are struggling, some of the first things they'll say to me is oh, can you not tell the coach because I want to play this weekend. And so they think that almost, if they acknowledge the fact that they are struggling with something it's like they think they're like less of an athlete, so we might not get selected, which I think in my experience, that's never happened. And like, I have no say on selection whatsoever, it's completely all done through a coaching perspective, but it's just, it's almost such a worry for them. You know, it's like them, it's almost their job, isn't it really, so it's their livelihood. And if they get told, oh, no, I'm struggling with this, oh, you can't play this weekend, and that is probably the worst thing for them. So I think it's, it's about that understanding, we try and do quite a lot of stuff in our centre of excellences. So a lot of our younger players to sort of let them know, just to have more awareness around these sorts of issues and not being like, this is what anxiety looks like. This is what depression looks like, but trying to like build it into more. Just so it's there in the background. So it's almost around like, Oh, this is you know, if you need to talk to someone, you know, if you need help with your, I don't know squatting, for example, you've got to talk to the S&C. If you need help with your passing, you go talk to a coach, or if you need help with your, with some of the thoughts and stuff that you're dealing with, or go talk to [Confidential]. So it's that sort of, we try and just build it in to the language and stuff that they use everyday rather than it being like, Oh, no, you know, you have to go to the psych's office now sort of thing. So it's, it's I think it's trying to move away from that and into actually having as much more integrated conversations within the club really.

I: Yeah, It's like you're removing this negative connotation and so it's sort of trying to integrate that into the multidisciplinary team?

P: Exactly. And I think, I think it's so important, as well, with the staff that you have around you, as well, I think it's such a big, could be such a help or hindrance. So obviously, if you've got a team of physios who are really open about it, as well, and they're, you know, talk to the players, when they've got injuries, for example, about their own mental health, it doesn't just have to come from me, it can come from anyone, as long as the players know that if they do need to talk about it further, there is I'm there or there is other ways that they can talk about it. So it's, you know, I think we work quite closely as a as a MDT (Multidisciplinary Team) about, you know, all of those sorts of things, which I think obviously makes it a lot easier. From my perspective, because I'm constantly getting information fed in from different people as to you know, this person might be struggling or this person's I know, they weren't great last week, but they're doing much better this week. So I think it's also that comes around, around, you know, all the staff, and the group that we've got as to, you know, we ask them how their days, though, of course we do, because, you know, there are people. So actually, if there was a problem, let's actually sit down and

talk to them about it, rather than just being like, oh, how are you? Yeah, great. Okay, cool. See you later. So that's sort of that sort of thing.

I: So what do you believe athlete perceptions are of mental health issues? Have you found that they're receptive to learning about them? Or have you found that they may be less inclined to, engage when it has been discussed?

P: I think it really does vary. You get some that are really open and very honest and very willing to talk about their own experiences or experiences with people that they know or that they care about. And that's quite good for facilitated conversations within the group. But sometimes you do have those athletes that are just not receptive, really, to anything, you can almost think, I think, from their perspective, as well, if it's not affecting me right now, then I don't need to think about it. Which I think can be quite hard, because you're trying to give them this to help them and to make them aware that actually, they've almost they haven't shut it down. They're not they're not rude, they're not dismissive, they're just not particularly engaged in what you're trying to discuss with them. So in larger groups I found mainly, when you get some on one to one, when you're having like a 10 minute chat with them or something they are, they do seem to be a bit more responsive to those sorts of things. But then this is my fourth season at the club now. So I've worked with some of these players for four years. So you know, I don't know whether that would have been the case, if I'd only just started in the role, you know, or only been in the role a year or so. So I think it really does depend on obviously the report that you've got individually with them as to how receptive they are like, obviously, we do screening and stuff with them. So we screen them at various time points throughout the year with different anxiety and depression screening tools and stuff and they do it but sometimes they're not particularly willing to follow up with you. That's the other one that can be a bit of an issue, someone scored quite low, you try and talk to me like I just had a really busy week, so they sort of brush it away. Which they might have had a really busy week, but don't get me wrong, that absolutely might be the case, but it's almost like well Okay, so I really need you to screen again. Because if you're just telling me that was just the one off week, and then it's coming back low again, it's almost like, right, I do really need to talk to you. So it's, it's that sort of, you know, you don't want to force them, obviously, but at the same time you're like, right, there's definitely something flagging up here that I need to actually make sure you are okay sort of thing. So it's, I think it's, you're almost trying to like, it's always a balancing act from, from what I think between can't force them to sit down in a room with you, but like, getting them in a room and actually trying to do it, like organically, so that they do speak up about these things when they feel like they need to, that's the I thing that's the sort of tricky, tricky part that you've got, because I think if you're trying to get rid of the stigma, and everything, telling someone, they have to come and see you at 10 o'clock on a Wednesday, or whatever it is, probably, they're probably gonna think they're in trouble. There's something wrong, which is going to build the stigma more. I think it's that sort of thing. It's a really fine balance between those organic conversations that obviously we're all searching for. And actually, okay, I'm a bit worried about you can we talk about this sort of thing. So I think that's probably more recently some of the issues that we've been having.

I: Do you think there's a potential issue there where athletes are more interested in performance over their well being, with regards to seeking that support? And obviously, just

sort of building on what you're saying, with, you're trying to chase them up, but maybe don't put as much value in the well being side as much as the performance side?

P: Yeah, and I think it's like I said earlier, they just don't want to think about it. I think if they can see something having like a tangible effect on their actual performance, and that's what they'll want to do because they want to get better, but I don't think they realise that actually working on these holistic things actually could potentially make them better athletes. I think that's perhaps we need to be more on that sort of element of understanding that actually, if everything, you know, holistically, you're doing well, and you're thriving, in a sense of the word, then your performance could potentially have a massive improvement. So I think there's definitely a lot more education that we need to do as an organisation on, on that as a as an aspect.

I: What age group have you found, maybe benefits the most from understanding and education on mental health issues?

P: I think, ideally, the younger, the better. But at the minute, we don't really have too much contact with them until they're sort of like 15-16, which I think is not a bad age, considering the fact that they're going through transitions, you know, potentially from like, high school into college or even into starting to play more adult rugby or, or whatever it is. But I think you almost need to run these sorts of things alongside their, like, natural development. So maybe like 11-12-13, that sort of age when they are developing physically as people. But yeah, I mean, the other thing we do is if we get someone that comes into the squad that hasn't particularly played at an elite level before. So they might be like a 18-19 year old, who's been sort of, scouted from wherever, whatever, we'll try and do some stuff with them as well, just to be like, this is like the understanding, but you'd always think, actually, if you can get that done much at a much younger age, then by the time they're coming into your squad at 18-19, they've got a more of an underpinning, so that we can almost just build on the things that works for them. So I think it's ideally, I think it would be better younger, but we don't really have the current scope at the minute for that sort of thing. So we're sort of picking them up around 15-16. And try to develop self awareness more than anything else. And a little education around what you can do if you are struggling, especially at the moment, with obviously COVID and everything, it's been quite a lot around but actually what can you do right now if you're struggling and you potentially don't want to talk to a GP or there's like a 20-week waiting list at some places for getting access, which is just crazy. What can you actually do right now? Yeah. 20 weeks... Yeah. So yeah, sorry, I waffled a bit then but like, Yeah, I'd say, probably around like 11 would be the ideal. I would say from my opinion.

I: So there's, there's been quite a bit of research surrounding the effects that long term injuries can have on wellbeing and mental health. And so it's been suggested before, that athletes tend to suffer with or become more aware of a mental health issue during times of injury. What is your opinion of wellbeing and mental health support during times of long term injury? Have you found it has worked well? Or do you think it needs improvements?

P: I think the part part our organisation needs to improve on is having more contact with them when they get injured. So that immediate couple of weeks, because we know that

obviously, that's when, you know, like depression stuff can be higher, and all those different things. So actually, if we can get have more contact with them earlier through an injury process, and I think that would help them out rather than they tend to pick up with them when they've had their surgery, or they've had their – they're starting their rehab process just from, you know, they're around more. So it's, it's obviously it's just easier, really to, to get in contact with them. But I think, yeah, there's absolutely stuff that that could be done better with regards to making them aware that, yeah, you have had a physical injury, but actually, this is some of the psychological things that could go alongside with it. I mean, like we do, will screen them before they return to training then screen before they returned to play just to give them... So we're a bit more confident in their psychological state before returning to play. But, you know, that could be sort of months down the line, right, some of them I think, it's, they don't like talking about injuries, either. That's the other thing. So I don't know whether this is the same with your experience and stuff, but a lot of them are, it's almost like superstition, they don't want to talk about getting injured. So it's quite hard to run an awareness type course with them before they get injured, because they're not gonna think about it. I think it's something that we need to do from our side a lot better is actually trying to have a, we've got obviously processes that we go through and all that, but I think there needs to be some more stuff that we can do with regards to just actually making them aware of some of the psychological aspects alongside the physical effects of their injury, but I'm just not sure how receptive they would be to that, if I'm being honest with you. Which is the real thing isn't it is actually how receptive are they going to be to what you're doing. But we try and get them in as often as possible and get them at training and get them like, so they might, if they're a forward, they might come in and do line up stuff for the opposition, or look at the review from last game. So we're trying to get them involved as much as possible to try and give them that focus. But actually, there is 100% more stuff that that needs to be done for, you know, if you are starting to feel depressed, or you are feeling restless, or whatever, and actually, that's very normal and natural. This is what you can do, sort of to counteract that or to improve it.

I: Yeah. How have you found the athletes that you've worked with? Is there anything there where you think they've maybe not got the tools to cope effectively in that sense of the other side of that? What are the ones who have coped well?

P: I think a lot of it is around they're sort of outside of sport interests. I think the ones that cope better with the injury have got potentially more stuff going on. So maybe they're doing some sort of studying or they've got external interests. I think it's all down to that identity piece, isn't it really, if your only identity is you're an elite athlete, then take that away from you, you're going to struggle. I think the ones that are closer to people in the squad also, I think, cope better. But then I've also noticed that sometimes they have real low periods, see, their friends are out playing or training, they can't, but I think they've got that extra level of support. So I think it's mainly those people that are around them from like a support point of view, but also those that have some sort of external interests. Even if it's like baking, like we had a player who was injured last season, who would just come and bring cakes in. And that was almost like their distraction, which was great for us. I think it probably maybe the two key ones. And also, I think if their physical rehabs going well, I think that helps them almost coping better. I think, without trying to put a timeline on that, I think if they are hitting their strength markers within a certain capacity, or they're aiming to

be backed by a certain game. And actually, it's looking likely that I think that gives them that extra motivation. It's the ones that have got those sort of niggles that never quite go away. But still, they aren't really hindering them. But obviously, they've been in pain, I think that chronic pain and stuff is the is the other thing that is quite difficult. And also, sorry, one more, if they have, I think when they have quite a clear diagnosis. So you've broke your leg, you're gonna have surgery, you're going to be on crutches for six weeks, then you're going to be able to start building everything up. I think for them, it gives them a much clearer timeline. And if it's like a ligament damage, because that could be, you know, we'll scan you. If it's a grade three, you might be out for a lot longer. But if it's a grade two, you might be back quicker. You know, and I think it's the clarity around their own personal expectations of their rehab.

I: Yeah, definitely. I think as well, because I think you make a good point there, it's almost given them that that clear direction, there's like an end point, isn't there with that timeline? So I think it almost certainly in their minds, it's like that, that tangible finish line for them. Like, you know, I definitely see myself returning to play by this time. And obviously, if you're improving over that period, that is it's even more reassuring for them, isn't it?

P: Yeah, we try not to give them an end date, though, just because of obviously, if they then have setbacks, it puts them back and back and back. So we almost try and give them their return to rugby date, for example, is almost like a month later than we sort of think worst case scenario, just so we've got a bit of leeway within that. So it's almost realistically, you'll be back in December, but actually, I say February and then if something does go, not quite to plan, hopefully, we're still going to be on the right lines, rather than just being like, you've got four weeks and you're back. But they always have a game in their head that they want to be back for. As soon as they've been told six weeks, and like right, that game. And then that's the focus, which does work well for them. But at the same time, if they then have a setback when they are returning to training, then it's like, oh, I want to play this game. Okay, so it's almost like you have to take them right back to the start again to build it back up, which can be quite disappointing.

I: What would you recommend based on your experience that needs the most improvement regarding mental health support or the processes or strategies that are involved? Do you think anything needs to be implemented or improved within those areas?

P: The main ones are giving sport psychs, so people that are working in the field a bit more training in the area. So whether that's done through your stage two or – what's your BASES one, whatever, that's whatever those are called, through those training routes, whether that's having to have a compulsory module or having to attend workshops or however that looks, I think that would be really, really beneficial. Just for everyone really working in the field. And I know, through my training, I did do a Mental Health First Aid course, which was advised through my supervisor. Just as like, this is good, you should probably do this might give you a bit of an idea of actually, I can't really remember doing too much else around mental health and specific, it was a lot more. It was almost like the background of the whole time, but not actually it wasn't like, right, this is necessarily what to do to, you know, if someone is struggling with those sorts of things, I think something like that would be really beneficial just for everyone. And then the other one, I think, I guess it's

going to be down to really the governing bodies of the sports but whether there is just a much clearer, streamlined process that we were speaking about the start around. Okay, this is what to do. This is who you've got access to, I know there are in rugby, we've got the RPA I think the rugby players association or something of that that's like a body that look after elite players, but they have to be a member. So you have to join. So perhaps something like that, but that's accessible to everyone would be, would be really good. I think it just make everything a lot a lot clearer from a streamline perspective. But obviously, then think about well, who you're going to get in and money and all of that sort of thing. So I think if there was a way to make even just signposting and stuff a lot clearer, then I think that would be would be a massive improvement.

I: So in your experience, do you believe athletes are more or less likely to seek support inside or outside of their environment?

P: I think it's quite mixed from that. I know we have players at the minute who are having counselling and external mental health support, which I have never really spoken to them about. So they've done that off their own back and have just let me know that this is what's what they're doing, which is good for them. If that's the route they want to take then great, they're getting the support that they need. So sometimes that that we've had cases like that, which is I mean, as long as we know that that's happening great. Like, absolutely go ahead and do that yourself fine. But then some on the other hand, we get, I've worked with athletes who won't want to talk to anyone else, they won't want to talk to a counsellor, they won't want to talk to the doctor, they won't want to talk to a clinical psych because they don't know them. I think it's a real split between people who would rather talk to someone they're comfortable with or talk to someone who doesn't know anything about them. So I've had, I think I've experienced both quite, probably quite an even sort of 50-50 to be honest with you, most of the athletes I work one to one with I only really talked to them about performance in sport. Obviously, at TASS they've got, they've got a like a helpline type thing that they can use if they need to. Which is great. But they've also got their life style advisors, so it's almost that sort of unsure whether to talk to the lifestyle advisors about their own mental health and things which is great or whether they just generally be Quite chill and fine and literally forward support. That's the sort of, I think the other, the other thing is obviously working within individuals. If you're not in that training bubble with them, you're not always entirely sure what's going on. So if you're very much reliant on them, telling you or having some sort of dialogue with their coaching staff or whoever just be like, right, is this going on externally, you know, what's going on, but then again, you'll receive confidentiality, and, and all of that comes in. Yeah, I think it's, it's pretty split, though. It just depends. If the comms are good, then it's good. Yeah, if the comms aren't very good. And it's almost a bit of a Okay, so you're speaking to this person? What have they told you? Are they giving you things to do? Do I need to support this alongside? Okay, so you're telling me now this like six weeks later, so everything that I could have done with you might have been completely going against everything that your therapist has been telling you to do? So it's that sort of, you know, making sure those things are in line.

I: So just one more question for you, in your opinion, what do you believe needs to improve in order to better prepare athletes for the transition out of sport. To provide context,

previous athletes from my studies have discussed the idea of a pre-retirement plan. So, what do you think needs improving in that system to help them transition out of sport?

P: Yeah, I think I would actually agree with that [pre-retirement plan], to be honest, of the athletes that I've worked with that have had a plan or retired on their own, almost when they're ready, have sort of coped with it better than the ones that have sort of been forced to retire from injury or, circumstance or whatever. I think, awareness that you might not feel great, while you're retiring, or a couple of months or a year or so after your retirement, I think there just needs to be much more common open conversation, whether that's athletes talking with each other, or talking to a psych, or just whoever just to have those conversations. The other thing that's quite hard, and that, you know, could potentially need some looking at as, obviously, we try and support the athletes through retirement, but there's only so much you can do. So, like up to the year fine that come talk to me, whatever, you know, that's let's, let's help you through this. But almost you're looking, if you look in like two, three years down the line, it's almost like without putting it bluntly, you're not paying me. Yeah, my job is to work with our current players, if you want to pay me and become a client of mine, and absolutely happy to work with you. So it's that sort of, it's almost that transition from the support stopping from the club or reducing from the club into right, this is potentially the new level of support or access to support that you can get, which I think, to be honest, is something that we need to look at, from our own point of view. But also just as a, I'm sure it's similar in a lot of sports, that there is that sort of almost that, you know, yeah, you're part of our team or part of our family. Of course, we'll help you in whatever way we can. But then, but you know, 10 years down the line, are we still responsible for that? Yeah, so I think it's that sort of, it's like, brutal, and it's harsh, but first, that's just the nature of it. So I think there needs to be a lot of understanding and awareness on retirement, and actually, even if it's like life skills, like helping them, you know, these are elite athletes for a reason. You know, so what can you use those skills that you've learned that discipline, that motivation, all of those sorts of things? And actually, how can you move that into a career? Or if you've got a career? How can we help you with those skills to better yourself in a career? So I think it's just that awareness that, you know, retirement might not be easy for everyone, or if you find it is great, but if you're not, then again, this is your immediate first point of call to get help. And from there, you could access different support in whatever capacity that looks like. So yeah, I think just a lot more open conversations around that and I think we are seeing a bit more in the in the media and stuff about people who are opening up about retirement like I saw piece from Robbie Savage earlier today actually talking about, you know, the fact that he now he now speaks to a therapist sort of every month or whatever it was just to help him with those sorts of things. So I think the more and more people we can get talking about it, the better really, from a media point of view or, or athlete point of view again, just to sort of remove that stigma around struggling when you're with retirement as well.

End of Interview.

Participant 12

I: First of all, if you can just detail your experience within sport, so clients or teams or just general sports that you've worked in and how you found that, please?

P: Yeah, I started work in 2004. I started just doing some part time consultancy stuff in football up at Darlington, back in the day, and then was there for a couple of years, then moved down here and did eight seasons in professional football down here, in Plymouth. And so yeah, I've had a good long run in professional football, whilst doing some one to one work with individual athletes and individual clients. But a lot of the foundation stuff was in professional football. And that was, it was a really steep learning curve. Because I was young, I was really quite young. And I was really inexperienced. But I learned quite quickly, and quite a few hard lessons in the process. I think it was a very good thing even though at the time, sometimes it was quite challenging. So predominantly was in football. And then after football, I just didn't want anything to do with football, I really needed a break from the culture. And the environment, I kind of left on quite a negative note. I went through lots of different managers and coaches. Because the club was in such a transition time. So I needed to have a clean break. I didn't even watch match of the day, which I used to watch religiously and be so involved in football and the psychology. So and then kind of moved into diving and did a lot of work with elite divers. And then into swimming. And swimming is kind of where it's kind of maintained. That's the majority of my work is with swimming, but then one to one works being done in quite random... Random sports are not random by a wide range. I guess 10 pinball is my most random, right. And the psychology of 10 pinball, both my random and probably the lowest point of my career, I went to the National 10 pinball and championships was not a highlight. In Mansfield anyway. So quite a wide range. But now it's kind of working with swimming. And the majority of my works been with adolescence, up to age 21, kind of from 13 to 21 has been the most common age range, plus or minus, obviously, some really mature athletes, ironman triathletes. I would say men sort of mid 50s hitting the point where then they want to be doing something that's physically demanding. And want to be the best. That's it. So So yeah, so a real eclectic mix. But yeah, I cut my teeth massively in football.

I: How did you find the differences? Because obviously, I mean, football is a completely different culture, I would imagine to working in swimming. So how did you find the differences between those in terms of working with the athletes?

P: What has come out is the level of engagement I've kind of gone from, from football, where they were told a lot of the time to engage, rather than the motivation to want to engage themselves. And then in swimming, there, there are a lot high achievers, there's a lot of high achievers academically. I do a lot of stuff with a really elite swimming scholarship school here in the Southwest. So they're really strong, high achievers, and then the demands and expectations placed on themselves. And the culture for high performance is really strong. And so it's almost like going from low motivation and engaging to make sure that the coach is not annoyed with them, to really intense kind of driven individuals within this environment, intense coaches and athletes and intense parents.

I: Were they aware of mental health issues in that environment were they considerate of them? Because that sort of sounds like a breeding ground for poor mental health to me?

P: I think the current kind of the climate in swimming, and as a sport in this situation I just explained, definitely, really high pressure expectation and kind of winning at all costs, but not just winning as in performing really well, but everything's got to be seem to be winning. And the exterior demonstrates that everything is winning, and is controlled, and a lot of it can, I can see quite a lot of that trickling down from parents who are very successful because there's this, you know, they're normally from very wealthy backgrounds. And in this particular example, so you know, the father is a hedge funder, for example. Now, he's only got there because that's the way to do it. It's all or nothing, regardless, despite, you know, so I think you're absolutely right, it's the well being is at risk, I think because of that culture, and then the inability to cope with disappointment, and managing those pressures and expectations can lead increased anxiety continuously.

I: Have you found that in that environment, that's really interesting, it's almost like a, you may be suggesting, in that sense, they're disregarding their own well being in favour of performance? How does that differ between those two environments? And did you find that within football? Or did you find that that's consistent within the sports you've worked in?

P: And I think the smoke screen is, is consistent. I think that in football, you would, you would be seen to be, you know, functioning all the time, as a lad as one of the lads. As you know, nothing can affect me, nothing can impact me, I come in and play football and live the life, you know, I've got money in the bank, and everything's rosy. And what you're saying to me, and how I've been treated as a commodity, not actually even as a human being, is just how it is. And I can, I can cope with it. So there's, I think that exterior to, to demonstrate at all times that you are okay with how things are, and because you kind of believe that that's beneficial, the athlete believes that that's, that's going to hold them in good stead that they're going to increase their career, they're going to develop their career progress. And all is going to be well, so I think that that is the case for both environments. But also, I think that there's less accessibility to mental health within football. I think there's more awareness of mental health in a swimming environment, for example. So the awareness is there, but I don't think that then the management is there. So it's kind of more awareness in swimming, than in football, because it's like, there's a thick, thicker layer to get to that awareness. That's not analogy from them, you know, intelligence-wise. There's, there's a thicker layer to get the awareness, right, because this is almost been for years and years and years and years built upon.

I: Yeah, it's almost like trying to break down their barriers first, isn't it before you even get to that point to be able to support them?

P: Yeah.

I: In your experience, and how have you found that the previous mental health provision you've encountered in professional support? Is it useful? Is it successful? Or does it even exist? So, is the first port of call the sports psychologist or is there a referral system in place?

As you were talking about earlier with mental health literacy is that even on people's radar, are they aware of it at all?

P: I would say that in football, and obviously it's been eight years since I've been in there but it's not a long time in the grand scheme of things. It wasn't ever discussed. At all. Even the two referrals that I had I can think off the top of my head now were not supported. And they were driven by myself and the doctor at the club, who I didn't really have that much – There was no multidisciplinary approach. It was very much that I reached out to him because ethically, I was very concerned about this individual. And one of them was linked to drug abuse, and the other one was linked to personality disorder. And who was, you know, really, really uncontrollable aggression, massive outbursts like, getting themselves into some serious trouble, very threatening physical violence. That was that was more outside of the sport than inside of the sport, but it did go into both environments. So it was me contacting because of the welfare of the athlete, and the doctor was very kind of nonchalant, go and do it, you know, here's a number, the Priory clinic in London, you know, contact, and it was me that went with the, the athlete, you know, to, to go and to do it. So the referral process, in my experiences, has not been successful. Both times it didn't carry on. One time they saw them and that was it, never went back.

I: Did you find that's become easier in your experience within swimming or in other sports?

P: I've have not had to do any referrals in swimming. I'm just trying to think... I think that there's no kind of setup in this swimming environment. That I've been involved in, for there to be like, this is the steps we take. So for example, this is a very fresh example. I know this is confidential. But, you know, if an athlete's self harming my first point of call is to inform the head coach. And the athlete knows that that's what's going to happen because they're harming so ethically, you know, the boundaries are set and the head coach then takes that information on I don't know what happens to it.

I: It just sounds like there's nothing there for the athlete. Do you think that then limits their willingness or their receptiveness to want to come and seek that support? Because of that process?

P: Yeah. I don't think it would. I don't think it would be a facilitator. And that's for sure. I think, you know, first of all, what is the right there for me? Second of all, is it going to be effective, third of all it going to have an impact on my career? Is it going to harm the relationships that I've got with a coach? Is it going to hamper my progress? selection? You know? These are international athletes. Yeah, you know, national, international standard. And when you're a young age, and you perceive the coach to have all the power. And that kind of 14-15-16 stage across the transition period, then yeah, I think that they'll just keep quiet.

I: It's almost the same as if you had a physical injury? Well, if I've got of a mental health issue or something, I'm just going to, if you try and hide it, or, or mask it, in some sense, it's not going to affect my ability to be selective then is it? Which is, I mean, it's not ideal.

P: I remember one athlete said into me as long as I can perform then I'm all right. So that value is placed on performance. The culture that perhaps lends itself to that, we'd never expected him to be wrong because of the swimming. So it's only when they're not performing, then the questions get asked, rather than when they are performing, the question should still be asked. And you should still be a level of care and welfare and interest to each individual, regardless of how they're doing.

I: It sounds like there's some sort of a disparity between the weight of well being and performance, whereas, realistically, the best environment to be in is integrating both. It just seems like it's almost well being versus performance culture, isn't it?

P: Yeah, and not together and, and for myself, I'm really keen as a practitioner to have that kind of holistic, mental progress with the athletes or with the people that we work with. Not necessarily athletes, but the people if they can, if they can progress and develop themselves, you know, they can become more self supportive and confident. And you know, have greater self value, self worth through the work that we do. Which starts off related to performance, but is very much alongside themselves as a person. And then within the age group, that I work with when a lot of them go off to university, and those skills that they've developed in the period after leaving University and through University really helps them with the transitions not just within sport, but you know, social elements in their ability to cope. And yeah, I think it's really, really important. And the feedback from them has been, you know, I'm really glad that we worked on developing these skills, not just in sport, but to be able to transfer them to have true confidence, not just confidence related to one particular element of my sport, but to have that platform that we love to talk about, you know, that kind of real solid confidence in every environment that you're in.

I: Have you found they are receptive to understanding and learning about mental health, and not just mental health issues, but the broader terminology of it, have you found that they are willing to engage with that?

P: I don't tend to phrase it as mental health. But that's way before I started my PhD, and whereas I think that it's about developing the key concepts of mental health such as positive well being such as self worth, which makes us able to cope and deal with stress, which makes us happier, I talk about happiness a lot with athletes, as you know, what makes you happy? And how do you feel when you're happy? And when was the last time you felt this, and just allowing them to be more positive in their daily lives, along with sleep patterns, along with nutrition along with bringing in sort of the whole package that then makes them feel on a daily basis, level, consistently level control. You know, they feel like they're in control of things. And then hopefully, that makes them feel happier. So maybe not the term mental health, but definitely the constructs that create positive mental health.

I: I think you alluded to it before, a bit of a misconception with the term of mental health as well, where I think people immediately go to the negative side of that.

P: Anxiety, depression, anxiety, depression.

I: Yeah, exactly. And I think there's still that stigma attached within sport where it is, it's associated with weakness or a fear element. Have you found that within your sport experience?

P: Well, yeah. And it only came to light in January this year when a footballer that I worked with killed himself. Well, yeah, it was tragic because, you know, he's 39. It wasn't a kid, he's 39 and he had a family. And was the typical classic happy go lucky. Always got a smile on his face. I'm shocked. Of course we are. Yeah, because that was the facade and you've done it for so long that he was an expert in it. He was the, he was a good actor. And, and it got to the point where obviously couldn't act anymore. And when you reach that point, there's, it's very difficult to go anywhere else. Yeah, but we only seem to talk about mental health, a lot of the time in a very negative way, or talk about when something happens. It's reactive, and as long as that happens, I'm always going to be playing catch up, we're always going to be, it's always going to reaffirm that association with negativity because it associated with suicide, suicidal thoughts, it associates with depression, anxiety, and now and real kind of, not nice things, you know, and they're not pleasant. They're not positive. And, you know, it's really, as long as we will we continue to be reactive. That will happen. You know, and people will pay lip service, and they'll put a banner out and hold the minute silence for the next person who kills himself. And they'll talk about for the next three weeks, and then died down and we just go round and round and round.

Yeah, because it's almost like there's a fear of tackling it, and this is what I'm thinking about. with mine is this is my box, and this is your box. And, you know, and you do your bit in your box, and I'll do my bit in my box, and we'll all work independently, when actually, that then we're skirting around if we open up the boxes and we all work together, we don't we don't pull this this is my passion This is your passion is definitely where I want to go with my PhD is kind of, let's lose that. Because it's not doing us any favours we can learn from clinical psychs, clinical psychs can learn from us, you know, we can we can help each other sports psych doesn't have to be performance based only we need to remove ourselves from that, or we need to not remove what we need to reduce the association we need to be of use. Yeah, so they think that we're not doing as much as we could to support these athletes. Because of these, you know, these boxes that we function in and because there's because there's no good, there's no system in place, and we could help create a system

I: Well, you mentioned it before about having that multidisciplinary team in place where it's opening those communication channels, isn't it in that sense?

P: Yeah. And not my role is better than your role or my profession is better is better than yours, which you know, as we know how it goes on, you know, now we've got to sport psychiatry. Now where do they fit in? I get really impassioned by it because we've got all these people doing all these titles. And what are we doing about it?

I: Yeah, it just seems like it creates this sort of confusion for support networks where athletes are asking where do I go? And then by that time, they've had enough.

P: And understandably, so because there is so much to do I think there's so much that we can do and that's, you know, really having these discussions about it and not just saying you know mental health is important mental health occurs in athletes but actually just opening

up discussions about it. It's really important. Get the ball rolling on it, because there's so many statements have come out about mental health and professional sport. And, you know, people are talking about it, but again, is it just surface level?

I: You're probably aware, there's quite a lot of research surrounding the effects injuries can have on mental health and the risk of common mental disorders. So what's your opinion of well-being and mental health support during times of injury for athletes? Do you think it's all right? Could it be better? What do you think?

P: I think I think it falls to two people. Whenever we've looked at injury, before in terms of mental health, the physio becomes the pivotal person. On quite a lot of occasions, the physio has come to me and said, I think you need to be aware of this, I think it would be really good for you to see the athlete, so the physio's referred them on to me. Or part of that multi dimensional team is really that myself and the physio, the last the last club I was worked really closely together with games together, we would be at training together not every day, but she would be but I would, you know, and, and it was a female, so maybe that is linked to with only two females in the club. And maybe that we stuck together, but we did get on, we valued and respected each other. She was very, very good at what she did. And she believes I was too. So we would work closely together. And sometimes, you know, we'd have a cup of tea in her room with athletes that she thought was a bit concerned. So when she would come in and be very relaxed and wouldn't be a you've got to go and see Melissa, I was kind of like, we were talking to the footballer, and we'd be working out together. It wasn't as if, you know, this is your role. This is my role. So I think what that and that became really quite successful. It wasn't all the time because there were some things that really the, the player didn't want to say to the physio. But when the player would come in and smell of booze, it was very obvious he was still drunk. So you know, they were drinking too much. This was on a regular basis, because they were so crushed by the fact they weren't playing. And what I did notice was when they weren't playing, they were of no use to the gaffer at all. So get out my way, get out my space. Get out the team, you know, you're now in this box, right? So you know, so they're now in this box, and they weren't getting any of the attention that would get before whenever scoring goals, and they were the superhero of the club. Then all of a sudden, bang, you're injured you're out for six months. Bugger off. Really hard for someone to take that. Even the strongest people, which a lot of professional footballers aren't in my experience, and You know we look at lifestyle factors, we'd look at mood states, we look at sleep patterns, we do it together. And it really worked well. And I think that the footballer felt cared for. So, you know, I was able to talk about moods and was able to talk about potential depressive symptoms, but not put the word depression on it, you know, to talk about feelings of anxiety, but then not put a massive label on it, you know, to say that actually, when I drink, I don't feel as anxious, or don't worry as much is what they normally say, because I forget about my problems. So, that's why a lot of people do drink to forget about their problems, so they use that and we're talking, you know, we'd have the gambling as well. So there's loads of time. So there was factors that they were doing, whilst they were a professional athlete, that weren't good for them. They weren't illegal, because they bet on horses. Just to clarify. And, you know, they just generally felt like they, they were able to talk and that support, I think, allowed them to get through that. And it did work on the whole, obviously bar that one occasion. The others did tend to recover. And were very grateful for that sort of double approach, if you like.

Yeah. It wasn't too cool. One for the head, one for the body. It was, you know, as a group thing. I always like to approach it from a team perspective. So we are a team and we're going to work together and get through this and it's not you in isolation, because when someone is vulnerable, they really feel alone. So it's kind of making them feel like they're not alone. And they do have support. Yeah, but again, that's just my approach. Yeah, at the time, it wasn't something that I followed. It wasn't a protocol. It wasn't system. And, and I, and I don't know if it's changed any up and down the country within football, and there's no physio directly related to the swimming. And the diving was only physio available for the Olympic divers.

I: How did you overcome that within the environments?

P: Well, you just have to go and pay for a private physio. That makes someone really feel valued, doesn't it? Oh, sorry. I'm afraid you're not good enough to get the service that you actually need when you're injured. And you're going to have to wait. My friends that are still in professional football in the Premier League. You know, they fly to Germany that day to get a scan in Germany, because that's where the best person is and they fly back that day. One of my swimmers has suspected broken, you know, whatever, this or that. They got to go to the hospital and they've got to wait in the middle of a pandemic. And then they get a referral. And then they've got a two week wait and then another two week.

I: How does that affect them then? When you're taking away what is essentially their livelihood for so much time? Have you experienced that with injured athletes, are they able to cope well with injury?

P: No, no, I mean, I remember one, one particular player just only coming to me when he was having suicidal thoughts. And he did his ACL, never been injured before. He was a senior, like properly senior player. And he was really thinking about the local bridge. And then he rang me and said, Can you meet me at a cafe? He didn't want anyone to see, you know, I was like, Yeah, sure. And he waited to that point before he reached out. And he was such a mess, he was really like, his wife was going to leave him. Because, you know, he really reached the point where he was drinking heavily. And we managed to, to kind of with baby steps bring him back, but emotionally scarred for the, I don't know if he's still scarred. But, you know, it was really, mentally he kind of really shocked by the whole process, and shocked by his inability to cope, because he'd never been challenged like that in his life before and didn't have the coping mechanisms, because nobody's taught him because it's not important until something happens. You know, so we don't do any preventative stuff on how to develop coping skills, we just wait for the shit to hit the fan. And then if you can get there in time, then you can do something about it, you know, and the week before his first match back, we're at the ground, but mainly I just wanted him to go from the dressing room, go through the whole thing, what its gonna look like and we're walking around the pitch, and he's crying. Like he's crying his eyes out, you know, you get to the point where he did his cruciate on the pitch, and he is in floods of tears. You know, so really emotional. And really kind of fascinating to work with him. We get to that point where then you're, why can't we be doing something before? I felt like I hadn't done. But how can you do something if you don't know better? How can you be supportive? And before something happens? I think you can be. But you're talking about the operation. And the rehab is so intense, and

everyone's around and they've got the highest equipment and nobody, nobody is looking psychologically at that individual. There's no psychological rehab for them at all. So you send them on the way they've got a year's rehab, and only with a point where they're actually drinking vodka at breakfast time, so nobody can smell it on their breath, they drive into work to do the rehab, they're gambling. The marriage is crumbling, then they fall. So where the fuck is looking out for them in that time period? Because I don't think anybody is and that's a grown man, that's not a 21 year old, influential person who's living alone. Yeah, is a man who's got a family who's a well-established professional athlete.

I: Does that come down to his own knowledge of what mental health is like, what his understanding or his awareness of mental health literacy, but in athletes, are they even aware of it? Or within themselves?

P: What are they experiencing? What are they feeling? Yeah, it's almost like they don't consider what they're feeling, they consider the fact that they shouldn't be feeling like this. And, you know, their ego, dependent on how big or small it is, or how, how influential the ego is, will prevent them from doing anything about it. Because I'm a big hard bloke, and I shouldn't be experiencing these emotions, you know. But yeah, I think you're right, the mental health literacy and the knowledge of what they're experiencing, what the thought processes are, what their emotions are, the management of how do I deal with them?

I: Do you think that's the sort of thing where you think we should start targeting a specific age group? So would you recommend integrating some sort of mental health education or well being education if we wanted to maybe rebrand it at a younger age group, or maybe just have it as a consistent process right through the age groups?

P: I think starting young, I mean, I like a lot of the work that Christian Swann and Stu Bell are doing the, it's been around for a while now, they're looking at mental health within males. And they're quite young males. What is it called? I forget what it's called. Yeah, so they've kind of they've been looking at mental health awareness within young male athletes. And I think that that's really good stuff. And I think if we start young, if we look at implementing it, it becomes normalised and it becomes something that is talked about, we can still implement it later on. But it won't be as effective as if this could have wanted to become part of the culture. Yeah, we can't just, you know, I think dropping in at the, the sort of like professional level might be helpful, but by then, they've kind of already set out their attitude, they've already been influenced for the last 20 years or 18 years of their life, that you've got to just get on with things, you just got to get on with things. And you just got to put things to the side. And that's how you become successful. You know if you've been exposed to that for 18 years, and someone coming in and saying, you know, this, here's our educational workshop, it's not going to be as effective as getting in at a younger age and bringing it in as part of the coaching,

I: They potentially don't see the value of it and do it because it's already passed them by?

P: Yeah, yeah.

I: What would you recommend that needs the most improvement with regards to aiding an athlete's mental health? So thinking about processes or strategies, organisationally, coaching?

P: I think that there is a level of awareness. At the moment, I don't know how deep the awareness runs, I think that it's surface level, perhaps. And so maybe allowing it to soak further than surface level. So that's hitting the target problem. It's like talking about younger, so parents, coaches, teachers, athletes, so that they're all whoever can be influential and whoever is influential in the athlete's life is also aware of what mental health, positive mental health what it actually means. Yeah, they're getting each individual to design almost and reflect on their own mental health. What does it actually mean to them? Because how do you look after your mental health? What do you do that celebrates positivity? What do you do that creates more self value and self worth in yourself? How you know, where is confidence? I think that all of those factors that come up, should come down from the concept of mental health needs to be embraced and considered. Yeah, because it is an umbrella term, isn't it? And it's an umbrella as a continuum, like you said, it's a spectrum. And so awareness, letting it filter in – I hate the word educate, because it's almost like, if you educate, it will work. But that's not the case. It's almost like educate, but remove the barriers, educate, allow the proactive building – talk about resilience, that mental toughness – two things I can't abide really like to be resilient. They don't create mental well being they don't, they're not good things. If resilience comes as an end product, fantastic. If it's a bonus that you are mentally tough, whatever that means. But if you can cope better, that's what we want. If you can be happier, that's what we want. So break down the term of mental health, because like we said, that current connotation is negative. The current attitude is that mental health is negative mental health. Links to only negative things or is seen to be. So do we look for an alternative phrase? We've toyed around with the term sport and exercise psychologist or performance psychologist. So, you know, it's not something new to us. We can make it work. And it's got to be for the benefit of them. of the athlete, but it is cultural. A huge cultural shift.

I: So just got one more question for you. What do you believe needs improving in order to better prepare athletes for the transition out of sport? It's another big issue within professional sports industry about retiring athletes and the potential implications associated with that.

P: I think my honest thought is, I don't think it needs to happen too much before I think that there needs to be a post at least six months to a year out of sport that there is support and contact, because there'll be a honeymoon period when they're out of sport. And then they might think, well, we play golf, a lot of athletes love to play golf. And you know, there's no finer sport. But then six, seven months down the line, you hit winter, you can't play golf anymore. The penny drops, the realisation kicks in, and no one's there. So, there can be stuff done in the lead up, of course it can about it's almost like bereavement in a way that you can think about death. You can think about death, but until it happens, not to you, but until you lose somebody. Only then do you know what it's like we can say, you know, oh yeah, well get yourself a lovely set of skills and think about doing a qualification. That is, that is good. Don't get me wrong, but it's almost like they're going to feel they've lost. And that sense of loss when someone is most vulnerable, and when they really are grieving for

someone that they don't have anyone. That's when, in my very small opinion, is when they need support. So can sport extend myself or yourself? Can we can we be extendable to that period of time? And if we are, then I think it shows that sport actually cares about the person. And, and not just when the contract ends, don't pay them anymore. Let's start paying someone else that they actually take that time to safeguard the people that have served them and their sport.

I: It's almost like this is the formal process. Now we've got a period almost like a grace period of support for you to address them issues? Is that you mean?

P: Yeah, I think so. Yeah. Just to further develop the skills. But develop them when you're going through the process rather than thinking, because a lot of the time they're thinking, Oh, yeah, I'll be fine. You know, got money in the bank, or, you know, I've got a lovely family. And I've got lots of people around me, that's great. So I'll be okay. But actually, then it happens, and they've got all those people around them, but they're the loneliest person in the room. So, continuing the work that is being done pre to the post period when they're actually in it.

I: Yeah. So they're aware that if there are any issues arising that this support is available?

P: Yeah, yeah, yeah. Yeah. And you just check in regularly. It's almost unconditional. Yeah. Any transition? Big transition period. You know, we know that that causes stress. But yeah, as soon as that transition happens, you know, same with the military. Like, I'm fascinated by military psych. And I, you know, any chance I get... Yeah. So that's what I would think would be a good thing to do.

I: Yeah, sounds great. And yeah, that's all my questions, actually. So, if you've got anything else you'd like to add, or there any other things you think, worth mentioning?

P: No, I don't think so. I just, I just hope that as a profession, which I just care a lot about. And I think that we have great value that we can do something more I think to not only in our role, but to support the athlete to facilitate progressive change with the athletes and the coaches and the parents and not just taking on and solving like as a sports psychologist that can solve mental health issues. I can't do that. I can work more than I currently am. I think we've got room to move. We can keep pushing the boundaries a little, you know, not, not, not over overly, but that we can be progressing in that. But I just think that we can facilitate, some, they know all the key players that are involved in professional sport around the athletes as the priority but not solely, I think the coaches really could do with support they're under so much pressure. I know as long as we're talking about mental health, as long as we're talking about moving forward and positively, we've got to think about the negative impacts of sport or mental health. Or we got to think about the fact that athletes are suffering, abuse. So if we're working as sport psychs we can't ignore this, but we can't pretend, you know, we can look forward and move forward and be positive, but we can also consider the darker side of sport and what can we do to reduce the darker side and bring it lighter.

I: That's all the questions. Thank you so much for taking the time to speak to me. I really appreciate it.

P: You're very welcome. You are very welcome. Indeed. It's good to see you.

End of Interview.

Participant 13

I: Are you ready to start whenever?

P: Yes, fine.

I: Brilliant. Okay. So, just first and foremost, can you just detail your experience within professional sports, so any sort of clients or teams and that sort of thing that you've worked with?

P: Sure. So my background's in sports psychology and counselling and therapeutic approaches to working with athletes in one on one sessions around early signs and symptoms to deal with mental health issues, but also to help support athletes going through a major life event. I've been doing that work for probably - private practice work - for about 15 years. While at the same time working as an academic, and research in the field of athletes' mental health, and more broadly in mental health in high performance environments. I also was a former elite rugby union referee and did my PhD working with international rugby union referees and that led to a role with the England rugby football union for 13 years, working full time as a referee development manager. Primarily looking at well-being support and psychological inferences on performance. Is that okay so far?

I: Yeah, brilliant. Thank you. So, within your experience of working in sport then have you found that the current or previous mental health provision you've encountered to be useful or successful in any way? Or have you even found that in some cases it might not exist and why that may be?

P: I think there has been a real shift. In the UK, within the last five years of mental health support for athletes. It has taken on greater recognition and significance. I think if we go back to, certainly the work in to professional football. I guess Tony Adam, former Arsenal captain I believe. Yeah, he set up SportingChance. He was the first player to really open up publicly about addiction.

[Break in interview]

P: The lights can go out... So, you get professional football. And then unfortunately, cricket, I guess. Unfortunately. Some tragic examples of completed suicides. And again, that started to raise attention and then some documentaries within athletics, then Kelly Holmes, speaking about her battles about self-harm. So, I guess, one of the things that happened in the fact was athletes post-retirement started to talk openly about the challenges they face and we started to get more of a discussion about a refinement of the duty of care and governing body to check out the athlete's mental health and I guess that's been, let's say Tammy Gray Thompson's baroness. And it's a competence report on care in sport. Shone a spotlight on the issues from a governmental policy point of view. And then just recently, it was the reports in the British cycling on Britain's gymnastics again, the refinement of the duty of care and a debate between elite sport-high-performance sport towards the podium at the forefront to neglect of ongoing psychological issues. I think the other thing that has happened is that, in the UK especially, is that as the training and development of sports

psychologists in the UK was split between both BASES and the BPS – British Psychological Society. Yeah, I guess I had an influx of – I come from a mainstream background – so influx of mainstream psychologists who have a, perhaps had a greater appreciation for mental health and well-being for undergraduate and postgraduate training in clinical psychology in the old days, it was just normal psychology. And I think that awareness for psychology in the UK has more broadly defined their profession to include issues not only around performance psychology, but recognising those issues that may harm the athlete. And so I think that's also a greater preparedness of sports psychologists to at least hold discussions around mental health issues so that athletes are in the right place to receive the support that they require. I guess the best examples of that being formalised is being UK Sport. And EIS yeah... able to deal with more clinical issues.

I: And so is basically just saying we've seen like a much greater development in the requirements of well being support, not just performance based approaches. And do you think that has maybe created a greater sense of I don't know about reliability for the athletes for seeing these cases emerging and, and other fellow retired, retired athletes discussing those issues?

P: I think, yeah, I think perks for time will stay a greater emphasis for athletes to access support. I still think there's a prevailing stigma, particularly with professional athletes to do with disclosing an issue with their careers. And it's absolutely still seen as a will that create a financial burden? In terms of, is this going to result in a deselection or I've lost a contract, and they can see me as a broken athlete in some way and therefore think that I'm not going to be the reliable athlete to show up for a free football match. So I think there's a stigma. Still, I think some teams, and some government bodies have been far better at accepting vulnerability within athletes recognise that it's typical vulnerabilities that population, but the normal population will go through. I still think we have a well-established professional sport environments. It is still seen as yeah a broken athlete. Essentially, most sportspeople were used or seen as a product. Yeah. Any recognition that you're broken in some ways to increase your, your worth? financially, unfortunately, yeah, for some sports, that still seems to be a significant drop. Having said that, some professional sports being very good – if you like – outsourcing or externalising that mental health support, so the Professional Players Association are good for their confidential hotline and their network of counsellors that will see footballers anonymously. Yeah, the RPA – the Rugby Players' Association has been very good in establishing these networks. And again, good charities. Charities that have been very good with retired athletes. Often have been championing services now. Yeah. So hopefully what we're starting to see are some signposting about these areas of support. That I'm guessing, I'm guessing that we're also seeing is cognitive psychology approach? So rather than just looking at crises, I think governing bodies have been introducing cognitive psychology within those academy structures.

I: I think it's interesting what you said there about that that stigma is always associated with with a weak – with like weakness in that almost a fear factor, isn't it? So do you think due to that then maybe athletes are more inclined to to maybe seek support outside of those environments, maybe then seeking support within the environment, maybe the designated sports psychologist or even through the referral system for fear of being outed, potentially?

P: Yeah I think with particular professional sports athletes will often access that support outside the environment, yeah. And quite anonymously. My experience with working professional football is that a lot is put on the relationship between the team doctor or the medical staff and their connections in the community mental health professions. So that if you'd like it's under the radar, to management to coaches. And I think that still prevails in certain sports.

I: It sounds like it's probably more prevalent within the team sport for the due to that inter-reliability of that team and of being driven towards a team. I think you can lose some sense of individual – individualism in that?

P: Yeah, I think so. A positive thing to look for is that athletes in team sport environment tend to display, apparently less experiences of loneliness and depression, than those in individual sports. The other thing I was going to say is what we do up in fields and team sports is unmask them through some self medication, externalising changes, so in those sports where there's always been a culture of drinking, often it's rooted in that mask of externalising behaviours. Taking on them squads where athletes can feel they've had no voice from the start and where that temperament comes from, it comes from a training session. I guess the other thing I've also come to learn in professional sport is that sort of team sport is that, again, it can be in volume in terms of the explanation given. You know they could say I've got a calf strain or something and the doctor can often buy themselves some time to get space away from that environment. But actually primarily for mental health. But they will display a physical representation to almost give them some time away from the training environment.

I: That's really interesting, because it's almost like the only acceptable way you're allowed time away. Isn't it is through a physical injury, which I mean, from a moral and ethical perspective is it is a bit questionable, isn't it?

P: Yeah, absolutely. Again it comes back to... I mean it's been really interesting the last couple of weeks listening to the debate in soccer over the long-term impact of heading. And its impact on life in general. First impressions of them, which again, you've seen from my career as well. We can have increases in unfortunately considered suicide rates. Some of these players post-retirement within their 40s and there's some suggestion that may begin much earlier. Yeah, so there's more pressure coming down and more awareness from national governing bodies that duty of care should extend beyond retirement as well. Long-term responsibilities from these governing bodies to support the player and athletes post-retirement.

I: So, what have you found in your own personal experience has worked best or been most effective in order to enhance understanding of mental health and mental health issues within the athletes that you've worked with?

P: So I guess there are two aspects. And there's just the one on one support and making athletes feel very well, first of all, giving them a safe space where for the moment they can dispense and that way we can manage their issues, remind them that they're not crazy, remind them that they will go through periods of vulnerability but also acknowledging

that they need some privacy but to show the population, they're going to go through periods of vulnerability across the lifespan, but also acknowledging that they have some pretty severe demands and stressors. And it's not a surprise that in some sports, can they actually be predisposed to that experience? Especially imposter syndrome. Think about chronic performance related stress, burnout, and post crisis response to critical errors in large competition and large matches. And so there are some really – demands – if that's what is making you aware of those demands. Yeah, how can you see them coping to liberate your mind to accept that you're not superhuman and stuff. And then from a mobile Mental Health Training in a Facebook programme I'm involved with, I'm dealing with productivity in sport ways where we talk to the performance staff. We can talk to their strength coaches, as well as their Sport Science practitioner, around Mental Health First Aid training with a sport-specific context. Just to give them the confidence to recognise the basic signs and symptoms and recognise what are the signposting processes within their particular sport with the governing bodies. And trying to get them to accept the vulnerabilities but also talk about early intervention? Because, again, we know from research earlier you intervene in these situations the more likely we will see more efficacious outcomes. The other thing that associated that with some projects I have been involved with where we are offering both offering Mental Health First Aid training as part of our undergraduate and postgraduate training of most sports. Therapeutic practitioner profession, so let's put some columns around rehabilitation students, instructors so that we're starting to embed in their professional academic curriculum an awareness. And trying to start a conversation way earlier. Now, academic development then supports practitioners and psychologists. I think this would be incredibly beneficial.

I: Oh, yeah, absolutely, completely agree. Have you found in those discussions with athletes that that they tend to be receptive to learning more about mental health in in a broader sense in our suppose more from a personal sense, or have you found that they can be guarded about it? Because of I understand the stigma associated with mental health is almost like an immediate shock isn't there from the term. And I think that's more of a societal issue than necessarily just an issue within sports in general.

P: I think what I found is once you give them the permission to talk about it. And you make them recognise the operation, actually the thing they do want to know is – or the do want to get more concrete information about it, they want to be able to understand. And again, because these guys tend to be – and perhaps in their early 20s that's when they're more likely to be diagnosed with the more typical issues in the world. Somebody like that at 16 to early adulthood from those to early adulthood phase. And so often, when we have conversations within yourself, are related strains and pre adverse childhood trauma and/or a strong family history that they've spoken about within the family, stockholders conversations and spoken, you know like, yeah my father used to sleep quite heavily and perhaps stress has built over the last five years or so actually, once they start to disclose and feel comfortable, they do want to have those conversations about practices, referring back onto the clinical sites for getting the doctor that athletes are more prepared to particularly in the modules and more severe representations to accept medication support. So I think that there's been a shift as well. Along with talking therapies, there seems to be a preparedness of athletes now to start the target medication as well. That helps. Yeah. That

helps them overcome these issues and think again, I'm not crazy, the same amount of support as an athlete going through a ACL tear for example.

I: And so with that, just drawn on a point, you said earlier about the, you know, the mental health literacy and sort of integrating that more across the, I suppose, the multidisciplinary team, and also even the players what what age group do you think is is more beneficial to start to implement that process? Do you think it's better to when they're a bit older, a bit more mature, and maybe have a greater appreciation of that sort of education awareness, or I just think it's better to integrate it as soon as possible?

P: I'd love to see it as part of physical education, physical literacy that we start in primary schools along with the physical literacy influencing childhood and adolescents. If we can start to introduce this cognitive well-being early on. If we think about the role of physical activity in sport, a form of buffering to the stress then actually we can start to discuss how to develop the life skills and social skills earlier on before they're athletes. And that's not to say that we don't want them to experience setbacks. What we're saying with the mental health literacy is it's about recognising that vulnerability is permitted and it is a typical part of real life. For those who are more predisposed to know that's absolutely okay and the number for schools to help develop resilience and use opportunities for growth. We can go through the various performance so yeah, the other parameters are always going to break down the whole competitive vulnerability. The opportunities to break down the whole conversation surrounding their first professional contract, their first interview experience building on screen in terms of as part of the retirement planning phase, start conversations and ensure that someone is holding them conversations and echoes its okay to be vulnerable.

I: Yeah, absolutely. Just something that you said that was really, really interesting. So right during times of injury and during times of transitions as well. So maybe jumping from age groups even like contract changes and being transferred to other teams, etc. Have you found then that athletes are able to cope well with those in your experiences in terms of, I suppose the best example is it is a long term injury when the sports taken away from them, their ability to cope – have you found that it is positive, or maybe due to that lack of mental health literacy received, there's more of a negative experience?

P: When athletes suffer from a major injury where there's thousands of terms of false termination. That's what we often see in the athlete experience. And guess what a typical population referred to as a brief bereavement response. We often see that psychological response in athletes. That emotional reaction that might actually take a significant number of sessions to just help them develop the words in response and giving them both time and space to work through that loss response and accepting and understand this is a typical response. And then most likely, that's been reinforced by athletes who are coping with those feelings of bereavement.

I: What do you think that needs the most improvement with regards to aid in that support? I suppose during times of injury during times of transition? Do you think that sort of falls back into the earlier point that you made where it is sort of the sooner it's introduced, the better?

P: Certainly the sooner the better from a broader perspective, but also fairly assign specific one on one support as well. Making sure it's clear that there are referral processes in places that everyone can engage with but also making sure the staff can engage to some extent. Whether that be a coach, or a sport science practitioner or the doctor, or a physio. Knowing to and having that confidence to go there and have them conversation but also knowing what those steps are for a referral process.

I: Did you think then this this was based on what you're saying? It sounds like the definitely is a need for this. But do you think then there's some sort of full-time clinical member of staff needs to be implemented into these environments, rather than as you mentioned before, about like the referral system? It's almost there for immediate support within that environment, or do you think that's something to do with the training pathway of exist in sports? I

P: I guess there's two aspects. One is to reproduce across all sports science practitioners make that a requirement to have to take that responsibility. I think that needs to be formalised in terms of referral from a qualified clinical psychologist so there are no conflicts. I know that particularly in Australia psychologists or appropriate specialists are on site more frequently. Think about high level sports. Soccer. They need that mental health education for coaches, but certainly having that psychologist on-site more frequently.

I: During your career in your within your experiences What have you found athletes seek the most or require the most from a professional support service? Are they more likely to disregard well-being in favour of performance or in your experience that tends to be a balance or any other issues you've found?

P: I think that's changing. It's been so performance focused that athletes haven't had an awareness or the skills or abilities to actually talk about mental health challenges and will not have the emotional vocab to go there and have these conversations. It just seemed to be recognised and accepted as part of a deal. If you like, at the higher levels it was to sink – a sink or swim mentality if you make it to professional football or rugby it's because somehow we'll make you tough, there's no mention of vulnerability if you like, it's tossed aside earlier and that's changing. As research has recognised athletes go through more setbacks early on. There's plenty of opportunities to develop the skills actually those efforts are more likely to go on and be successful in terms of performances but overall research has developed within this area that itself may change the culture. Mental health and well-being are beginning to see acceptance. There's still the typical vulnerable points in my work with athletes. Things like a deselection or a loss of form that's impacted on them. As well typical life experiences that may affect them like meetings, romantic relationships, conflict resolution. Homesickness is a strong one, particularly when athletes relocate because of a new contract or a new team. So, it tends to be those typical points around both life, typical life stressors, as well as some social and being an athlete.

I: Brilliant. So just one more question for you. Yeah, within the research, I've found that athletes typically tend to discuss the issues and maybe factors surrounding mental health and common mental disorders as they approach retirement and then subsequently retiring.

So in your opinion, what do you believe needs improving in order to better prepare athletes for that transition out of the sport and sort of building on something that you mentioned earlier surrounding their, I suppose their identity and how they understand the world around them, in that sense?

P: Yeah, so I think overall keeping a lifestyle management approach. From the moment they enter the more formalised High Performance Sports environments, all the way through. Development of other identities, but the best thing to do is for education opportunities, whether it's working with professionals who would be the professional players in the community for one day a week or we've had sponsors and business opportunities. So a far more formalised approach to planning that retirement from the moment they enter the sport.

I: Yeah. I've I think one thing I found as well, is that that, and maybe that pre-retirement plan, as it's sometimes termed, maybe comes a bit too late. So some of the people that I've spoken to often refer to this discussion that's had almost six to 12 months before they retire. And for me, that seems a bit too late to be discussing that when it's almost on the horizon, isn't it?

P: Absolutely. And offering them when it's not just a year out, it's not just something to think about this. There's time to think about, I guess there's two cases here. People think of athletes in terms of track and field, rugby players, and high level footballers attend operate on this four year cycle. So, Commonwealth games, Olympic games, or World Cups, so they tend to work in four year cycles. The World Cup's over and you're starting to talk about it actually having the conversations, raising events because issues developed in schools and prevented in increasing community networks. From the moment they come from that environment. Obviously, it goes back to the base of satisfaction. Yeah. The earlier you can enhance their sense of autonomy and voice over their career and their identity in and outside of the sport, and competence of these skills in schools and buildings outside of the school, you can start to do that from the early, early phase. And hopefully, that's gonna lead to better and happier outcomes.

I: And that's, that's all my questions. Thank you very much. I've really, really enjoyed listening to you. I think it's been brilliant. Really fantastic. Thank you very much.

P: That's really good and really interested to see how you get on.

I: Yeah, thank you. Thank you very much. I've really enjoyed that. So thank you for taking the time to speak to me. That's been brilliant.

P: No problems. Thank you. That's great. Take care.

I: Thank you very much. Cheers. Cheers.

P: Good luck. Bye now.

End of Interview.

Participant 14

I: First of all, if you can just detail your experience within professional sport. So, just giving a bit of a background in terms of your areas and the sports you've worked in, please.

P: My first professional experience when I was doing the masters at [Confidential] in sports psychology. So I got a placement at [Confidential] football club. It was supposed to be one day a week I ended up going in six days a week. And it was a great opportunity for me to get a bit of experience under my belt. So I ended up probably for a season at [Confidential] working with the coaches in the youth development phase there. And off the back of that I got the head of sports psychology role at [Confidential]. So my role was to kind of work with the under 23s, all the way down to the under nines working with players, parents, coaches, that was a full time job and I did that for two seasons, and came back and got a job as a lecturer at [Confidential] uni, started a professional doctorate at [Confidential] and then set up my own business about 24 months ago now. The idea behind the business was that I only got experience of working in football and I wanted to diversify a little bit. So I've worked with one or two private clients now across quite a range of sports, so, professional golf, rugby league, triathlete, triathlons, gymnastics, and then about, I think was about 12 months ago, 13 months ago, I signed a contract at [Confidential] to provide support to their professional development phase players, to the 18s and the 23s. And I do that 15 hours a week now. Alongside lecturing, alongside some of my private clients. I'm working with an Olympic athlete at the minute trying to prep her for Olympic Trials as well. So with everything that's going on with the Coronavirus, that's been a bit insane. But yeah, mostly football. Yeah, well branched out a little bit over areas as well.

I: So in your experience have you found that and any current or previous mental health provision you've encountered within the sport environments to be useful or successful in any way? So not necessarily just you, but anything that's pre-existing or if it doesn't exist at all as well?

P: I've had quite a few challenging cases actually and two of them were fairly recently, not in football, and I've had a few in football, I think working as part of an organisation – working, being on a consultancy basis for [Confidential] is a lot easier to access support than it is when you work in private clients. So you're not involved in the club. So the two cases I've gotten was an Olympic sport, I'm not going to name the sport as it would be too easy to identify the person, but the other was in the rugby league. So with the Rugby League and the Olympic athletes, I was providing private consultancy with them. One of them was a borderline case of depression and anxiety that was a bit like it was a very much a grey area for me, like a lot of sports psychologists would have referred immediately, I was very much of the opinion that it was probably not quite a referral. And he basically came to me and said, you know, you've been to see – what are the people called? Lifestyle advisors at the clubs or something? Basically, it's an ex pro who doesn't have any qualifications. He just talks about what he used to do in this job and that my client said that wasn't useful. And you know, he's also was studying at university as well. So went to see the mental health advisor, described them as being too textbook, didn't know anything about sport, and you just kind of read from a textbook and didn't know anything. So on the one side, you've got someone who knows about sport, who doesn't know anything about supporting someone. And the

other side you've got someone who knows about supporting someone who doesn't know anything about sport. So when he came to me, he was very much like, you get it, you understand sport, and you also you're a psychologist. So I'm going to, I'm going to speak to you. And I when I brought it up to him in my first meeting with him, it was like, This is my scope of practice their might be a case for me breaking confidentiality, if you fall outside that scope and I feel you're a threat to yourself or other people. He was like, if you refer me, I will not go. I'm not going to speak to anyone else. So I was in a position where I was like, This is borderline referral. If I see supporting this person, he's already said to me that he's not going to seek support because we'd built a good relationship. He was like, with all due respect, I would respect you if you said you couldn't work with me if it was outside your scope. But I've already tried two other people at this point, and if you refer me to someone else, I'm just going to not go, so I felt it was more dangerous not to work with him than to refer him on. So I was going through the supervision at the time. So I wasn't fully qualified as a sports psychologist at this point. So I'm consulting my supervisor and he basically said, If you feel competent and confident enough to work with him, it is a grey area. It's very much borderline. But yeah, just work with him. So but that was a difficult one because he basically point blank refused the referral. So it was like, what do you do in that situation? The other case that I've got was the wrestling one. She is obviously in a weight-orientated sport, so she during lockdown got down suffering with challenges around eating disorders, that the lockdown had basically triggered her bulimia again. So that very much falls outside my scope of practice. And that was a case of like she is potentially she's a threat to herself. So that was quite an easy one to know. Because it was a private client and she didn't want me to contact her sport. I had to basically contact someone who I knew, a sports psychiatrist and refer to him,. It wasn't someone within her governing body. It was someone who I made contact with in case my private clients needed a referral, and refer them on to him as a sports psychiatrist, it ended up that she met with him once and he didn't feel as though it was a case for referral, that point either triggered it well, then she'd been fine. And he basically supervised me rather than work with her directly, because I already had a relationship with her. So that's kind of the private stuff's more difficult because there's no one to refer to. If I didn't know that person, then who do I refer to? So it's up to me to then make those connections to the sport that the clinical psychs and sports psychiatrists, whereas at [Confidential], we've got three, four full time doctors. And they're very much the point of referral. So we go on to them if there's anything that falls outside our scope. Very recently, we employed a sport psychiatrist to work with our first team and are under 23s. He deals with anything that's mental health related. The challenges at the minute because of everything that has gone on with lockdown, we are struggling for money. And he's been the first person to go, which I found really interesting. He's the only person that can do that role. I mean, I would imagine he's probably charging a lot more than I am. That was probably the conclusion. It would save them a lot more money getting rid of him, basically. But I got a text from him two weeks ago saying it's been great working with you. But unfortunately, the club's not willing to pay me anymore. He was basically coming in to develop a mental health strategy for the club. So my case for referral now would be the doctors still. But now I'm not sure what would happen in that case, I think it might be an external that would have to come in on a case by case basis rather than having somebody who was always at the club like he was. Yeah, it's easier in organisations. But I found that really interesting the decision to remove him. He was the first one to go rather than anyone else. I guess that's my experiences.

I: I suppose that first example you provided I thought was particularly interesting where the athlete said he wouldn't go if you referred him. Why do you think that was? Do you think it's because he'd already gone between two people and maybe had enough?

P: I think he was fed up trying to find support. And he described it to me, you can actually read this. I published it as a case study. Alright, go back and read it for extra context you can do I'll send it to you. He said, you're my last hope, he was quite open. He was at a stage in his career, he was deciding whether or not he wanted to continue doing the sport. He didn't understand what it meant to him anymore. Lost a bit of purpose around it. He'd just managed to transition into the first team and kind of experienced a lot of deselection. He wasn't getting on coach. And he was just like, I just don't know if I want to carry on doing this. So a lot of what we did explored who he was away from the sport, because he was just an athlete. He spoke to people like that. So I was like, well, let's talk about who you are off the pitch. And at first he was like I don't want to talk about that, why does that matter? If your happiness is wrapped up in just being a rugby player, then that might be causing some of the things that's going on off the pitch. So it was very much just about within my scope, a lot of what – when I actually published it the editor of the, it was case studies in Sport and Exercise psychology, the editor came back to me and said, be careful because this is setting a dangerous precedence for the field by suggesting that you can be working with clients who were potentially got depressive symptoms. My response was, well, what what's the alternative? Yeah, I'm sorry, I can't work with you all the best see ya later. So it was an interesting case that I was very anxious at different points when stuff was going on that would make his well being plummet, so not getting get picked for a game, or get picked for a game and have a bad performance and then not get picked for subsequent game. He'd text me and be like, I need a session because I'm struggling again, and I'm like, wow, this is this is tough, but ended up having a good outcome. But I needed that supervision to kind of help me support that decision, I'd be much more comfortable now being fully qualified to work with that person. He was just like no I don't want to go see anyone else. And if you refer me I will not go see anyone.

I: It sounds as if it was always hanging on a thread, wasn't it? So based on his experiences, the selection and the deselection, it was like that was a lot for him. Put a lot of weight into those actions.

P: His well being was basically his happiness and well being was very much dependent on how sport was going. So we spoke when things were going well in terms of the session going yeah everything's great. My career is going really well. And I'm like, hang on, last week you telling me how down you were. We did a lot of work on the highs and lows of sport as an athlete, that the highs are very, very good, which is great. But the lows are very, very low. So kind of exploring. He actually came to the decision after about 12 months, I was working with him, to take a part time contract. Now we're, you know, plays part time still professionally. Part time, but has a job outside of it. He said, I've never played this well, ever. Because he has something else to focus. Yeah, he's able to switch off from sport when things are going bad. And focus on his new job. And it's much better for him doing that. So he made the conscious decision to do that, after kind of exploring who he was away from the sport, which I think was the biggest thing that helped him.

I: Yeah, that's definitely I think it's almost like his identity was broadened, wasn't it as a result of that?

P: That was the whole aim of it. Who are you when you stepped off the pitch was the whole aim of the intervention. Because I knew that was the thing that was going to help him.

I: That's great. So just moving on to the next question. What has worked most in your experience to enhance understanding of mental health issues in athletes? So, what I mean by that is, if you've come across any athletes who were completely clueless as well regarding mental health, what it is, how it affects them, or even education within the system, or the environment, and anything that you've come across to help them enhance their understanding of those issues.

P: I think people are quite, they don't want to talk about some of these things. Sometimes it's a sign of weakness, I think for some of them, especially for the lads of [Confidential], they're professional football players, they don't show that they're vulnerable, they don't have to show that they're weak. So there is a bit of resistance in seeking support at times. So for me, I think initially is about building relationships with those people, to make them comfortable just talking about things like anxiety, or low mood or sadness, and what those mean. What I tend to try and do is build those relationships in one to one setting, first and foremost, to get them used to speaking about things like this. But then I find group workshops work quite well, but only when you've got a small number of people. So what we've started to do recently is invite a small group of players, maybe 3-4-5 players into group workshop, and we've just recently been talking about anxiety in performance, for example. So if you tend to shape it around performance and how it's going to improve them as a player, you get better buy in, but you get players that come into the small groups that are comfortable with each other. There's a likelihood that they're probably going to talk about a little bit more. Small Group education has been working quite well. What I tend to try and do is find real world case studies. So the one on anxiety we talked quite a lot about Per Mertesacker who came out quite recently, talked about his challenges of anxiety. Michael Carrick has been quite open about his experiences and also Jonny Wilkinson has been huge about talking about his experiences of mental health. So by putting the pictures of those first team professional players/athletes on the screen and being like, this is what they were talking about. Can you relate to that? And the lads are like, that's exactly how I feel. Explore that a little bit more, so on the flip side of that is, is sometimes I'll put clients on I've worked with in the past, obviously keeping it all confidential, and be like, this is what he was going through at this point. Can anyone relate to this? Or what? what might be the thing that causes this person anxiety? And he's not being picked and the coaches and tell him why he's being picked. So have you ever experienced that? Yeah, I'm going through that now. It kind of normalises it for them. I think there's a there's a stigma around it. Because I think a lot of the lads think that they are going through it on their own. They think that they're the only people that are going through it and actually when you put these cases in front of them, they're going oh so everyone experiences this? And I'm like, well yeah. These are the top six things that players come to speak to me about, and they're like, I've spoken to you about four out of six of them. Yeah, everyone does it. And it's just this idea that it's normal and I just encourage my clients to be vulnerable with me. I think that's the main

thing. And I had a client the other day who basically came on the phone and was like, you just make it okay to be vulnerable., so I think it's just giving them a safe space to talk about some of these things, understand the needs of them. Because if they're not talking about some of these things, and maybe the education isn't going to be as relevant to them, but if, for example, every single one of the lads that I speak to talk about anxiety, then let's do something around anxiety. And let's talk about a little bit more. And then what happens is off the back of those workshops, the lads will generally text me and go, when you talk about that case study. I really relate to that. Can we talk about a little bit more? And then you go back into one-on-ones. So yeah, that's generally what I've been doing at the minute. And it works fairly well.

I: It sounds like they're pretty receptive to the type and the style of the education that you provide? Have you found any resistance though?

P: I don't think they would have been as receptive to me had I done that immediately. So to put this into context that was 12 months in the making, it was 12 months of being around them in training, going to games, building relationships, then getting to the point where you've had maybe 300 one to ones with the lads, and then go ahead to say I understand what your needs are. So that wouldn't have worked if I hadn't developed the relationships with them, first and foremost, and there's still resistance to it. So the under-23s, some of them didn't even turn up to the meeting. So even though they know it's mandatory, it's built into that session. So you wouldn't ever get them not turning up to an S&C session or not turning up to a training session. But as soon as the psychs put something on, it's a bit like, I'm not going to that. And the ones that do turn up have got the webcams off. There's still resistance to it, so I'm like, lads turn your webcams on, come on. You engage them in this session. So there is still some resistance, generally, what I find is that in professional football anyway, you can split a group into three, one of the very open about engagement support, the middle group of a bit like, I want to engage, but I'm not sure how to more I don't want people to know, the third are a bit like, I'm not going anywhere near it, so I'll say hi to them in the corridor. And they'll be like, nah I'm not even gonna say hi to you. What we tried to do is we've tried to work on that group one and group two. The ones that are engaging and the ones that are kind of sitting on the fence with the idea that I'm only working 15 hours a week, I can't, I've got 56 players that I'm looking after. I can't do that in 15 hours a week. So if you're not going to be receptive to it, I'm almost putting that down to personal choice, and I'm not gonna force you to do it. So if you are going to be receptive, I'd much rather put my energy into the people that are receptive and don't have that resistance with a referral pathway still there for those ones that actually might need the support but aren't going to be as forthcoming. So a lot of the work might come through stuff, as well. Especially being in lockdown at the minute I'm doing a lot of my work from home. On those observable behaviours, you miss out on the informal chat. So I quite regularly speak to the head of sports science and I quite regularly speak to the head of physiotherapy. And I'm like, what's going on with the lads this week? Who's injured? What's going on? Is there anyone that you think might need a referral? So working with the staff to facilitate a referral process has been key as well.

I: It sounds based off what you're saying there's a bit of a mixed bag in terms of perceptions towards that support? Or maybe the well being/mental health side? Have you found that

it's always mixed across the sports or it's more mixed in one sport than another and athletes are more receptive or perceptions towards mental health are a bit more open in one sport compared to another one?

P: I find that difficult to comment on only because I've only worked out of a professional organisation in football, so I can't really comment on that. The clients that I've worked with outside of football are generally a little bit more receptive to this idea of well being influences performance. Yeah, my experiences, professional football is usually quite performance orientated and a little bit less willing to go there with the other stuff. So my big belief is that coming from JM I'm sure you've heard this a lot. That idea that well being and performance. You can't separate the two. A lot of the work that I'll do as a sports psychologist is working with the person first and the performer second with the idea that if we make happier people, we're going to get them to perform better. So it was getting them to buy into that process initially. And I'll be very open and honest with them in my first session and tell them there's pretty much nothing you can't come and speak to me about. If you're struggling with moving into digs or moving away from home, for example, that's inevitably going to impact performance. So my job ultimately, is performance enhancement, but we do that via wellbeing. Some of the lads, they're not comfortable going there with me yet, but that just means I have to build a better relationship. And then on the flip side, I've got a lad at the minute who's playing 23s, borderline first team, he was sending me poems. So he's writing things down in a diary about what his experiences are and turning that into poetry and it's like the levels of engagement are vastly different across age groups, depending maybe on age and maturity dependent on life experiences. So you've got to cater your support to meet the needs of those people, if they're not ready to go there with you yet, can't go there, because they're not going to be comfortable. Whereas if you've got somebody writing poetry for you, then yeah, let's explore that a little bit deeper. It's very much dependant on the individual, I think.

I: Have you found certain age groups benefit more from understanding or education around mental health and well-being than another age group?

P: I think that the older the player, the athlete gets, the more challenges that they probably experienced in life, especially as professional sport becomes more serious and more challenging. So the ones that are on the brink of the first team, they're not really playing for 23s, but they're also not really playing for the first team. So they're not really part of the squad. They're not really part of the team, they're not getting picked. So they're actually they're in a good position, because they've made debuts for the first team, but they're also experiencing huge challenges. They're also more self-aware and more articulate, and they have greater self-knowledge. So they're able to explore some of these concepts with you in a little bit in more detail. Whereas if I'm working, the youngest I work with is under 18. So if I'm working with a 17 year old lad who's experiencing not being picked in the team, who perhaps can't articulate his emotions, feelings, thoughts around that, as well, as someone who's a little bit more self-aware. So that immediately makes it more, it makes it easier for me to work with that person, because under 23s can articulate what they're experiencing, and we can have dialogue, which is what my support is based around whereas a 17 year old might find that a bit more challenging. So I'm like, how are you feeling today? I'm a bit frustrated, why, and they're quite quick responses whereas talking about your experiences

to an under 23 or a first team player, they can talk for 30 minutes before I've ever said anything else again. So I think that level of self awareness and self knowledge means it's more difficult for younger people to discuss these things, because maybe it's the first time they've ever experienced it before. But the flip side of that is if you can educate the younger people earlier, they can potentially navigate some of these challenges themselves later on. Yeah, it is a balancing act. And there are some who just are not ready to go there with you because of their age, and that you just have to wait for them to become a little bit more articulate, I think at some point.

I: According to research athletes tend to suffer with adverse mental health issues or depressive symptoms during times of injury. So what's your opinion or perception of well being and mental health support during times of injury for the athletes? Do you think it needs improvement? Do you think it's good as it is? What have you found in your own experience?

P: Yeah, I think the most recent piece of research I've read on that is Gervis, 2019. Professional footballers, it was the percentage of people who had contact with injured athletes at different stage of rehab and it was like physio therapist 100% in all stages. S&C increased the closer they got to return to play. The doctor was involved like 60%, and the sports psychologist was involved by 33% of the time. Like a third of players it was saying get access to a sports psychologist during rehabilitation. My experience is that injury is the most difficult point. So there's a sense of isolation, which can contribute to feelings of loneliness helplessness. I do a lot of my work around the injured players and physios are quite hypersensitive to referring players that have long term injuries. So I've got a player that I've been working with, since I started at [Confidential] that hasn't kicked a ball. And I've never seen him play football, because he's ruptured his ACL and he's been out, he's been injured. So especially now we've locked down. All kinds of players, there's a sense of worthlessness because he can't do the thing that he's been working towards trying to do all his life. He only sees one physio every day, he doesn't get to interact with people. He lives on his own, he's an international player who's had to move from another country. So there's not a lot around him. So you've got this sense of worthlessness and I think the higher you go the professional sport you seen the more of a as a commodity if you can't contribute towards team performance. And you can't be an asset to the squad then you're no good to me. So come back to me when you're better and I'll speak to you then. So there is definitely a sense of isolation which I think contributes towards increased prevalence of mental health challenges in injured athletes.

I: Do you think then there's a strategy or a stricter procedure or process that needs to be put into place to support those people? Or have you found it exists already, but it's perhaps needs improvement?

P: I think there's a referral process in place. But I think it tends to be very reactive rather than proactive at this point. So it's like, well, the player's been injured for two months and now we're realising that you're struggling, therefore, I'm going to refer to sports psychologists. But can we put something in place before that point, even before the players get injured to where we educate them around some of the challenges that might be experienced during injury. So they're aware of it anyway. So there is a there is a referral

process in place, I think part of my job at the minute is trying to turn that from a reactive thing so it's more proactive. The challenge is time for me right now. Time. So the processes, I've got, like I said, I've got 56 players to work with, and it's very difficult to be proactive in these circumstances. So I think that good support to be put in place for any athlete needs to be more proactive than reactive at this point, definitely.

I: And so do you believe the stigma of mental health issues is still prevalent within professional sports? Have you found there is a difference across sports as well?

P: Yeah, I think there's definitely still a stigma there. We do a lot of work, well I try and do a lot of work as part of my philosophy about this idea of being authentic. First and foremost, do you know who you are? And then what extent are you comfortable being who you are? And a lot of the lads, a lot of my clients will say to me that Yeah, I know, I know I am. I know who I stand for. But when I go into this environment, I just put a mask on, the person you see the behaviour you see the conversations I have, that's not me, that's not the real me, I'm just hiding, hiding part of myself in a way to try and survive this environment. Because this environment can be really challenging. And sometimes if you show weakness is perceived as being vulnerable. I'm obviously trying to change that. I try to make that apparent in every meeting I ever have, that being vulnerable is actually where change happens. And change leads to improvement and change leads to improved performance. But I think the stigma still definitely exists. What I am starting to see though, is that, that those groups of threes that I've talked to about when I was at [Confidential], when I was at West Bronx, and when I'm in [Confidential], the first and second group is slightly larger. I don't know if that's a by-product of me becoming more experienced and potentially better at engaging with the lads or whether or not there has been a slight cultural shift. I'm not too sure what to put that down to. But it is slowly getting better. I think the clubs have now introduced player care officers who facilitate education sessions for the lads, things like sporting chance coming in and speaking to the boys about things like that. So I think the culture is starting to get a little bit better, but it's still nowhere near where it needs to be. Like I said it's difficult for me to comment on other sports because football is the main one, Olympic sports that I've worked with, probably similar to be honest. I thought they'd be more receptive to it and in my experiences that they haven't. Rugby was very similar to football in the sense that they think point blank refused the referral anyway. So I haven't seen much differences across sport, but I haven't got enough experience to make any comments about general sports. If that makes sense.

I: During your career, what have you found athletes required most from the support services around them? Have you found well-being is disregarded in favour of performance? Or have you seen the opposite to that?

P: I mean, if you're looking at the staff, it's very much a huge divide at [Confidential], between performance staff and wellbeing staff. You've got your coaches, your physios and your Sport Science, who are in a department called elite performance, and then you've got your well being, safeguarding and education part of the well-being-performance-lifestyle strategy. So it's very much a huge split and a huge divide between those two, I think a lot more work needs to be done about understanding how those two people work together. You've got people that like, head of coaching, coming and going, I think psychology is a load

of bullshit and the well being side it's a load of bullshit, if all it is lads kicking a football around on a pitch and you're just like, how are these people still working in professional sport? If I was to give you a bit of an insight into what the lads come speak to me about, normally there's a referral process even they've referred themselves or they've been referred to see me for what you would deem to be more of a performance related issue. You're doing a needs analysis with them and you soon realise that that performance issue is underpinned by something well being related. I would say 90% of the stuff that I work on with the lads is about who they are off the pitch that's impacting the performance on it. And 10% is probably direct performs based stuff. So that performance and well being divide is on a 90-10 split for me. Life away from sport on the well-being side of it is huge, massive, but still, there's that divide there between the lifestyle staff/wellbeing staff and the performance staff, which can be challenging at times.

I: It sort of sounds based on what you've said, they're not 100% aware that it is a well being related issue. Is that something that you'd agree with? Might be a lack of education or awareness of their own selves?

P: Yeah, 100%, there needs to be more education of the staff about how well being and development of the person impacts performance. So I did a staff CPD event. I think it was during the first lockdown when we were doing it, we did it on performance profiling. So one of the questions in the profile was, to what extent do you feel as though you can switch off when away from the club? And that categorically, across all the lads was the lowest score. People were going Oh I never switch off and football. And all I do is think about the sport. So I fed that back to the staff and said, Well, what do we think about this culturally? What, what impact is that going to have and tried to frame it around how their lives would look if they never got the chance to switch off and all the staff started opening up to me about the fact that they couldn't switch off either. Or they didn't think about it, and it wasn't good, because he didn't sleep and how it impacted wellbeing and come in and he wouldn't be as fresh and I was like, so take that experience and relate it to the lads. All they do is eat sleep, breathe football six days a week, the day off is based around doing reflection on performance analysis, and then its seven days a week, think about that impacts wellbeing. And based off what you've said about your own performance in your own job. Think about how it affects their performance on the pitch and they immediately got it. But then then the issue is the club furloughs everyone and you've had 3 months away and come back and they've forgotten that conversation. It just doesn't seem to stick with them. So even though they can empathise with the lads, and they can explore their own experiences of it. So that doesn't seem to stick because the culture of professional football and sport is that it needs to be needs to be done all the time, every minute of every day. And yeah, you come back in and you say, remember what we spoke about before lockdown about switching off? Can we look at the schedule? Because this is ridiculous how much time they're in. Where's the chance to actually switch off. They don't need to switch off. They need to be training more. And I was like, oh, my God. As a role of a sports psychologist, when I talk about being proactive versus reactive, the only way I think I can achieve that is if I stopped working with the players as much and started working with staff, in fact, by taking an organisational approach, and started just working with the physios and started working with the coaches about some of these concepts and challenges, but again, that's not what I'm employed to do. So once again, I see that that's needed. They're not employing me to do that. And also, I

don't think they're ready for that yet, there needs to be a level of readiness to receive that type of information. Now, maybe something in my role develops down the line, I think, and that's the only way it's going to be achieved.

I: Do you think that's something that a top-down process is needed? Because based on what you said, it sort of sounds like it's starting from the middle, isn't it? When perhaps it should come from the top?

P: Yeah, I'm not so sure who's really in charge of overseeing sport psych support for professional football. I've never met anyone who's gone what you doing, what's going on? I just, I'm just left to do it on my own. If it wasn't for my own supervisors, I wouldn't really get that support elsewhere. So you get like Premier League. I don't even know what they're classed as. You get, like a little team of people coming into the club to oversee things, not to look at like the category status, but just to see how things are running. So how's the Sport Science do this, what additional support might they need and then come in, they've got a physio, they've got sport sciences, they've got an analyst, they've got a coach, and then they won't have a sports psychologist there. Now, I've sat there ready to meet the people that are overseeing sport psychology, like well, what can we talk about this is the work I'm not that excited. Nobody even knocks on my door. I don't really know who's given the advice to the Premier League and all these governing bodies about what sport psychology needs to look like. So category one status from the Academy, you need to have a full time sport psychologist to get your category one status. So a lot of clubs might just tick a box by employing someone. But all it says in the EPPP document is you need to do performance profiling, there's hardly anything else in the document about what our support might look like, for example, so I think that definitely needs to change from the top down. Needs to be more experienced psychologists within sport, disseminate what a sports psychologist should do within these roles. The idea that an organisational psychologist or sport working on organisational level, could have benefits that actually needs to be filtered down from the top. And then when you look at, like, for example, the player care role, which has just come into place, if you read the player care role, I'm doing that job. Well, that's the job of a sports psychologist. So then what are they doing? Where does the role boundaries come in? Our player care officer basically works with parents. I'm having conversations with them and saying your title is player care officer. Why are you working with parents? So he would regularly text me and be like, Nick have you spoken to this player is everything all right. He's never really engaging the player themselves. So there needs to be more role clarity, I think, and what sport psychologists can offer within these environments. I don't really understand what the player care office is supposed to do. I've spoken to quite a lot of sports psychologists across different clubs, and they're like missing what ours does. And that sounds very different to what he does. And sounds different to the next club. So there seems to be very little clarity around it. It's a bit confusing. I don't know whether or not they're trying to build a system in the in the Premier League to mirror the EIS to have a performance psych and a performance lifestyle advisor. And it's very much split while being performance. They're trying to do that with the player care officers, I'm not too sure.

I: In your experience, do you believe athletes are more or less likely to seek support inside or outside of their environments?

P: In my experience, if you're not wearing the badge, if I haven't got the kit on, then they're more likely to come and see you. If I've not got the kit on, and I'm turning up in a jumper and a pair of jeans, and I'm removed from the club to an extent, they're more likely to come and see me. I had a big conversation at the start. So, basically the academy manager gave me a blank piece of paper and said we want to employ you, we want you to write your job description. Okay, fantastic. That for me is a dream, you're giving me autonomy, I get to take in whatever direction I want. And the first thing that I thought was improving performance and well being of the players. Then the head of safeguarding came back and he was like, well-being's our job. And this was the thing that I was getting, I was like, it shouldn't be, it's everyone's job. Well-being is everyone's job. But that highlights the divide between performance and well being, you cannot separate the two. Here's three case studies telling me where performance starts and wellbeing ends and all that sort of stuff. And you're like, yeah, I get it. So yeah, I had a battle with them about that. And then I had this conversation around do I wear the kit? So a lot of the safeguarding and well being officers, they don't wear the kit, but the performance stuff do. So I was a little bit like, do I wear kit or do not wear kit? Because if I wear kit then there's going to be a perception from the players that I'm in with the coaches and if they think I'm in with the coaches then they're potentially going to be a lack of trust there. You've come across Mark Nesti at John Moores I suppose?

I: Yeah.

P: You might have heard this phrase before, 'part of, but apart from' is the one of the things he talks about quite a lot. So that's exactly how I would describe my role at [Confidential], I'm a consultant who still wears the kit, but he's only in part time. So with locked down I'm a little bit more removed. So I'm still part of what's going on as the coaches and the staff will come to speak to me and refer to me but the players are aware that I'm not really fully a part of it. Yeah, I am apart from, so the lads I think are more receptive to me because of that. So I think they will be more comfortable and the lads talk to me quite a lot about that. They'll even do things like they'll get their own physios. The physio's not doing what they think they should be doing the lads are like, I'm going getting my own. Some of them are paid a stupid amount of money so they can just go and employ someone outside the club. So yeah, I would definitely say they're more likely to seek support outside the club than in. And private clients generally comes to me for that reason, because I'm not part of their club. So the client I've gotten, the Olympic athlete, she was like, there's no way I'll be speaking to anyone in the club. She's like, because you don't know the coaches that's why I've been speaking to you. Same with the rugby league guy, you're not part of the club. If you were part of the club, I'd be more anxious to speak to you. That's why they come to see me because I'm not part of the club and I don't wear the kit.

I: Do you think that's a fear associated with the possibility that you might then feed back to a coach and say listen, such-a-body is struggling and then that gets back and it creates this issue for them of deselection or extra anxieties and stress?

P: Yeah, 100%. So, if they if they think any of this information is getting back to the coaches or if the coach sees a player coming to see me, the player might be concerned or the athlete might be concerned, but even just them knowing that they're seeing me causes this idea

that there's something wrong. So in sports psychology they think you only see a sport psychologist when something's wrong. If a coach sees an athlete coming speaking to me, they're like, should I pick them or not? And the player will say, please don't tell anyone that I'm seeing you. Don't include it in your activity log for that week, because I don't want anyone to know that I'm seeing you. So 100%, so that's why from literally minute one everything we talked about is gonna be confidential. And my job in those first sessions – I remember the first meeting with one of the under 23s, he came in, and he sat down like this to me, he went, so you know, I've been referred to see you, but I'm not going to tell you anything. I was like, excellent. That's a good start. So, after explaining confidentiality to him, and kind of trying to build that relationship, my job was basically to gain from doing this to doing that and just be a little bit more comfortable. And he was in the session with him for two hours. And at the end, he was like, I didn't realise that I was going to speak to you about all those things. But the fact that you told me it was confidential was like the most important thing. So confidentiality is literally my biggest strength as a sports psychologist. And I would never ever breach that. Because if you do, then pretty much you become useless in that environment.

I: Have you found any key differences in terms of your role with regards to working at the other football clubs you've worked at compared to now?

P: Massively yeah. But I'm not sure whether that's changes in the club or changes in me. Fresh out basically, halfway through masters at 21 years old at [Confidential], so really young, very, very anxious myself going into that environment, then given the head of sports psychology role at [Confidential], I was like, I am significantly out of my depth at 22-years old. So again, it was an anxiety around that. Having come out of it, doing the training and becoming fully qualified and come back into [Confidential], I've got a level of competence and a level of confidence in myself where I'm happy to write my own job description, I'm happy to engage in these things. And so my competence has increased hugely over the years. So there's a major difference now. And I think I'm perceived differently, I'm perceived as being someone who, without meaning to sound arrogant, but someone who is an expert in this area. He's the only person that can deliver this kind of support. And there's a level of respect between me and the staff. So the staff will call me up all the time, asking me questions about things. And there's a level of expertise there being a consultant as well, I think adds to that. So there's definitely differences, I'm a lot more confident and competent in my job now. Which means I think I'm a bit more effective in this environment.

I: I know we've sort of touched on it a bit before with regards to identity, you know, having an identity within and outside of sport. But there's a lot of research that suggests that there's a major issue with transitioning out to the sport. So as we come into retirement and a lot more athletes a lot more receptive and open about discussing their mental health issues once they've come out of the sport. So essentially, what do you think needs improving in order to better prepare athletes for the transition out of sport?

P: I think there needs to be more preparation for it in the sense of not just understanding that this is important, because it goes on, not just understanding this is now we're doing this so that you make your transition out of sport easier. If you frame that to a 23 year old, professional athlete, all the work we're doing now is for when you're 35 and you can't do

sport anymore. They're going to go, well why am I listening to this? 12 years from now, I've just got my contract, everything's going really well. I don't need to listen to this. If you frame it around, this is actually now, I'm going to improve your performance by doing this. Immediately they'll sit up in the chair and start listening a little bit more. So those two things don't need to be separate, in my opinion, transition out of sport doesn't need to be delivered in a way that isn't to do with performance enhancement right now. If you do both at the same time, you'll get buy-in. At [Confidential], we developed from scratch a performance-lifestyle programme. So we did topics like communication. So they'll explain to the lads obviously, by improving communication, your performance is going to be better. Also, how much do you communicate off the pitch? So we had a lad who's 16 and made his debut and the thing he was most anxious about was doing a match of the day interview. In front of millions of people on the TV so I don't want to do it, I'm fine about playing absolutely no anxiety because I know I'm good enough. I don't want to do the interview after. So we did things like interview prep, and the lads would come to me and like, it's really improved my performance on the pitch because I feel more comfortable communicating now. And then I was also going you've also developed communication off the pitch, you're able to do an interview a little bit better. So yeah, while you are preparing for life after spore, but you frame that around performance enhancement. So for me, that's, that's the best way of doing it. And I've gotten really good buy-in from doing that. Support needs to continue beyond when the players transition out. You've seen the lad recently at City. It shakes people when you hear stories like that. I'm sure there's so many other people that are struggling who are making transitions out of sport. And for me, the support needs to continue. The issue is you can't. [Confidential] won't justify paying me to go and work with somebody who isn't on their books. There has to be specific job roles included for players who are in those positions. One of my best friends and another sports psychologist works for a company that specifically focused on helping athletes transition out of sport into business. His job is basically like a transition specialist, he will work with athletes who are coming towards the end of retirement to help them transition into a business somewhere. That needs to be a role within itself to help people transition out of sport more successfully, I think. There needs to be a recognition that this is an important part, our responsibility to these people just because they're not athletes anymore, doesn't mean they're worthless to us. And also, we need to consider the conditions under which they would [go through] the transition, usually it's a forced transition. Usually, it's something you're not good enough for. Yeah, ACL is just gone, all the best. It's an abrupt end to the career and they're not ready for it. I think the retirement is potentially a little bit easier. It's still not easy, but it's easier because you know it's coming, plateauing performance may be a dip in performance, and you think physically, perhaps not quite as good as they used to be. And there is a level of preparation for that. But if it's an abrupt end, like with the lad at City where you're just told no, so you're not getting the contract it is difficult to handle, especially at those ages. But I just think you don't get buy in from the performance side of it. If you're just working on lifestyle. Why I made the conscious effort to frame performance around lifestyle, because it's all about performance. But person as well. You can't separate person from performance. So just keep reinforcing that message to prep for them for being better players. But being better people ready to go into the real world. Yeah, absolutely. You know, that's,

End of Interview.

Participant 15

I: First off, can you just detail your experience working within professional sports, so the roles and responsibilities you've had?

P: Okay, so, I guess for completeness, I'm a consultant psychiatrist, my specialist areas of expertise are working with adults that's working age adults, 18 to 65. I also recognise as a forensic psychiatrist, and I'm one of a new wave of experts who would be called sport psychiatrists. I come from a professional sports background, and I played some professional rugby, one of the Premiership rugby clubs in the late 80s to the mid-late 90s. And for the last 12 years, I've been running the sports division at Cognacity, which is a privately owned partnership, if you like, provides mental health services to a range of individuals, teams within sports, teams or organisations within business, specifically in sport for the last 10 years or so we've run a 24-7 confidential helpline service for a number of different sports, it sort of changes year to year, depending on funding but basically rugby players, cricketers jockeys, Football League managers, people who are working in competing in various Olympic sports, so swimming, hockey, Water Polo, rowing, a number of athletics. Yeah, we also now provide a wider range of services to clients, which include one of the Formula 1 race teams, the European tour, and then there's individual athletes that will come and seek our support from senior ranking tennis players to golf players, etc. That's it in a nutshell.

I: It sounds like a really diverse portfolio of sport, how have you found requirements or requests from those athletes? Have you found it varies from sport to sport? Or is it just always done on an individual basis with regards to their requirements or their needs from the services you provide?

P: It's a very good question. So I mean, everyone is different in terms of their mental health needs, but you get some common themes coming through from athletes that we see. So quite often you're dealing with the players, or athletes in transition, maybe coping with injury, coming into a new level of performance. So making it through into the national or international stage, changing club, geographical relocation, dealing with bereavement or other changes to their social network. And, and so we can kind of say that on an individual basis, you just get common themes across the different sports, that the work we did there was are some differences that you can pick up with the sports in the early stages that were that we was all reactive so that meant we were waiting until people developed a mental health problem or a mental health issue or a mental disorder, and then we were being brought in to help them with those difficulties. In more recent years, I'll come back to this in a second. In more recent years, that work has become much more proactive or preventative so it involves resilience training. As well as mental Health Awareness education, involves improving people's general understanding of picking up signs and symptoms of mental health problems, at an earlier stage in oneself and others, helps to help them. In terms of the differences with what we see, I mean, you could probably say at a broad level. If you operate within a team based sport, where you're performing as a team on the field, there is a little bit more social support within that network, sometimes unfortunately, those cultures can be counterproductive and can be more challenging. Whereas individual athletes, that performance is very much about themselves on the day that we give them time. Within certain team sports, you've got individuals that might have a particular performance related

psychological concern. So, penalty kickers in football and in rugby, people who throw the ball out in a line-out in rugby. So those sorts of technical skills, if you look at cricket, it's a very peculiar blend of individual and team performance competition. So within the team, each individual member is in effect performing as an individual. If you're a batsman, or bowler or wicket keeper or a fielder. So you're, the scrutiny to your personal performance is much higher. And that seems to be one of the reasons why the incidence of mental health problems in cricketers is always sat at a higher level, both in terms of research in terms of statistics on completed suicide, and our clinical experience of the numbers of referrals that we were – we don't look after cricketers any longer but when we were managing them as a cohort that's what we would see.

I: Have you found then because they may be approaching you with performance related issues, but they're unconsciously aware that there's a deeper issue with regards to their mental health or their mental well being, that's possibly at the core of that performance issue, do you think?

P: I'd say the vast majority of people we see are coming to see us because they or someone else is concerned about their mental health, it's moved beyond the performance issue. But there will be a small number of people that we see who present with a concern to do with performance, and often they're pointed in our direction by a manager or a coach, or someone who works within the sort of support setup at the club or organisation. But actually, when you get to talk to them, it's a much more fundamental issue. And the reason that has come to light is to do with confidentiality. So the challenge that faces health professionals that are employed by a club, in terms of their sort of potential conflict of duties, you know, loyalty to employer versus loyalty to patient, etc. And there are some, you know, I've heard some challenging tales over the years of doctors in particular being put under quite explicit pressure, to, you know, to look at interventions, but also to look at what's happening for individuals and in more than one sport. I've heard examples of club doctors, who would basically tell the manager that the problem their player is off with is a physical injury, when it isn't, when it's a mental health issue, because of that manager's lack of empathy and understanding for the kind of, you know, the need for mental health support. One or two famously say, No, if they're broken in the mind, just get rid of them. So not having any capability to understand the kind of resilience potential and the potential for bouncing back recovering and performing just as well. In some cases, if not better, and prior to someone's difficulties.

I: Does that then feed into some of the more proactive work that you mentioned earlier with regards to the education and the mental health literacy is educating the coaches as well as the athletes?

P: Yeah, 100%. So if you take that Formula 1 team that I'm working with at the moment, as an example, they've got a head of human performance, who is a former Olympic athlete understands this really well. And the brief to get involved with them was to do a screening programme for what the mental health of their race team is like. So this is the 80-100 people that travel around the world supporting the drivers in the car, and then to look at the outputs of that to understand whether any particular challenges within the culture or the demands of those various roles because people have different roles within that team,

and from there to look at a further more detailed pre coaching assessment programme for people in particular roles as well as some performance coaching, for example, the pit crew as an example of a team that are a sub team within that group. So there the interest is in how can they proactively boost people's resilience and the intervention that we offer at the moment can't be face to face because of COVID. Generally speaking, we're talking about webinar based interactive discussion and education around loosely the concept of cognitive and behavioural neuroscience, and understanding our cognitive arsenal and thinking responses and shortcomings, and our behavioural protections of our well being. Specific areas that one would look at in that kind of context would be sleep jetlag, crossing time boundaries, and how people can set themselves up for more positively to manage that.

I: So it sounds like you're then enhancing their self-awareness regarding emotional intelligence and behavioural intelligence?

P: Yeah, that's fundamentally what we do. And you won't make any progress in terms of improving performance based on psychological input unless the very first building block is a good level of self awareness.

I: What have you found that worked best to help enhance an athlete's understanding of mental health issues? Because obviously, it's a spectrum. So it can deviate, and it can fluctuate depending on environment and variables, conditions, etc. But I've certainly found, in my experience with my PhD, there tends to be an immediate sort of negative connotation associated with the term. How have you found in your experience that to be?

P: It's changing. So when we first started on this journey about 12 years ago, we used to deliberately hide or avoid the term mental health and mental illness because of the kind of the stigma that was around in those days, our approach was always to tackle this from a performance enhancement approach, looking at well being and performance. Actually, that has shifted hugely and particularly so this year, because the focus on mental well being as a result of people working from home, and the impact of COVID, and all of those things going on, in our view has been a really positive thing. So we don't get quite the same level of generic or general resistance to that. But then there will always be individuals who, for a range of reasons to do with perhaps their background, how they're being raised, how parents have talked or not talked about mental health issues, some have maybe seen and witnessed and relatives struggling with this, but not had the language or not, there's not been the open communication in families to help people to understand that they get frightened of it. Those are all factors. But I think one of the biggest impacts in a positive sense to drive people towards being more comfortable with looking at this aspect of themselves, has been the very brave testimony shared by individual athletes over the years for how they have struggled with their mental health. So when you get a Michael Phelps, or when you get a Frank Bruno, there's many you could you could name standing up and saying, this was my experience, I struggle with this. I wish I'd saw someone earlier I wish I'd spoke to people earlier, it does help to just weaken the strength of that stigma that is there.

I: Is it that sense of relatability that helps athletes open that door? Obviously with your professional sport background, do you maybe get a greater sense of empathy or relatability for the people you're working with?

P: I think yes, it's very interesting. So within our practice, we've got a number of practitioners who work within the elite sport domain, it's definitely the case that if you have worked and performed yourself in those environments, you are able to relate to the concepts that are being discussed very, very deeply. So you get it straight away. That's not to say, good quality clinicians, who haven't had that experience can't reach that stage. But it takes a little bit more time in terms of building that empathy and that trust. You know, within the team, we've got former cyclists, we've got a former football commentator, we've got former England schools cricketer. So that helps definitely because you're kind of speaking their language and understanding the way that they're putting things across. And it's not a hard effort for them to have to convey what they're dealing with.

I: So what's been your perception of how athletes have been able to manage or cope during times of injury? Have you often found that's when the majority of your referrals occur, is during those times? Is it post injury or even post retirement?

P: I think people cope with injury in a range of ways that are dependent on many factors. You can't just single out the actual injury itself. What stage of their career are they at, what is the nature of the injury? How long are they likely to be out for? But really importantly, what is their mindset about this, because we not infrequently see people who maybe have had some kind of trauma based injury, who recover from a broken bone or torn ligaments or some other form of physical injury. And then they hit the buffers on the return because of anxiety, about getting back into a situation where they're having to do the action or the activity or the contact that led to that in the first place. And that's quite a specific sort of anxious – sort of a phobic anxiety response. But it's really hard to generalise the one area where you can, so I mentioned transition, I think all forms of transition become unnerving for human beings. You know, our brains have evolved to love consistency, predictability, and lack of change. And so, uncertainty in any way, shape or form is a very common theme for athletes who struggle with their mental health, which is one of the reasons why when you look at the research into the impact of retirement on athletes, there's a really good studies on whether the professional players Federation about six years ago, and they got about 1000 footballers, cricketers, rugby players and jockeys. And they found that the first two to three years was the biggest challenge for these athletes. And that was irrespective of success in career earnings today, financial status, age, everything else, it was just the change that was the big problem. And we don't have any robust factor analysed data on this. But I would certainly say that one of the major drivers for this is the difficulty that many athletes have in terms of managing their self identity and self esteem because the two are tightly linked around their identity as an athlete. And so if they haven't done much in the way of planning for retirement planning for life after sport, planning their next career post sport, the impact is definitely worse. And that's what made the very valuable work of the player associations. Professional Cricket Association, Association CFA, in providing education, networking and career planning opportunities for athletes from even a relatively young age is really good because it gets to the heart of that transition based anxiety by upskilling people and giving them a very clear understanding of the fact that the sorts of skills they developed as an athlete are immensely transferable; leadership, teamwork, communication, dedication, routine organisation, all these things, you know that they are not at a level as commonplace in many workplaces, as would be in the next sports domain. So they've got

stuff that they can offer, it's just very important to help them to see that and to understand that they have as much value to offer to society as a retired athlete as they did as an athlete.

I: What would you recommend needs the most improvement with regards to aiding athlete's mental health literacy, awareness, education, processes or strategies? It's quite a broad question, sorry.

P: It's a very, very good question. So if you're if you're saying I had a magic wand?

I: Yeah, exactly.

P: I could kind of make one change to the way in which elite sport looks at this issue? I think that you would drive the biggest impact by... Let me just think about this... I think you would develop a programme within the clubs and the competition arena, which is very similar to what's now very popular in the world of corporates and big business where they create a cohort so everybody would have some form of mental health awareness or literacy training. From which a cohort of individuals would do more than that. So they might get something like the equivalent Mental Health First Aid, or an augmented form of training and then a small cohort of mental health advocates would be created. So these are the people who are happy to have volunteered the kind of, you know, a person to speak to a person to talk to someone who is identifiable and named. And ideally, let's just pick a kind of football club that would go from top to bottom. So you might have a few players, you might have a few of the support staff, you might have a few of the people that work in admin. So in other words, there would be people from different areas of the club available to have those conversations to anyone that needed it. Because quite often, it's easier to talk someone who isn't necessarily shoulder to shoulder with you day to day. But knowing that these people are skilled up to do that, but being very specific in terms of their training, or their role is simply to ask and listen, and then signpost someone to the right kind of help. We're not talking about creating counsellor networks within these settings. Because come back to the point I made before about the importance of confidentiality, help placed outside of an employment kind of contract line management setting has got a much better chance of a) enabling the athlete to be completely honest and open about what's going on, but also b) accessing it in the first place.

I: Yeah, so you're almost creating a much more dynamic system where everyone is significantly more clear in terms of who to approach, when they can approach them, general literacy is improved and enhanced throughout that process, then?

P: Exactly. But I wouldn't want that to be segmented away from any of the performance psychology or strength and conditioning kind of work that goes on, it would need to be presented in a way that it just has parity, it sits side by side with these other supports and interventions, because everything is at the end of the day is integrated, right? Yeah, you shouldn't be having it as a standalone.

I: Who are you more likely to see; Is it someone who's maybe more willing to approach you on an individual basis or someone who has been referred through the system? And just to

give you a bit of context behind the question I'd spoke to athletes previously, maybe weren't as comfortable discussing issues within their club, so would more likely seek support from an external source without the club's knowledge.

P: Yeah, I mean, the starting point for us is we are external to most of these organisations. With a few notable exceptions, and in those circumstances, I would say that where we see the most players would be where we have a relationship with the player Association, who have members of staff that work closely with the players, I think they sometimes call a player development managers or player development agents. And those people being around the club are in a position to pick up concerns and signpost people to get help, we see more athletes that are directed to us or choose to come to us rather than those in crisis who reach out, you know, to use the helpline out of hours.

I: So I suppose having that helpline is maybe the first port of call for those individuals then?

P: I mean, it's, I think a lot of a lot of the organisations that would bring that into their range of offered services, do it knowing that it won't be very often that there is a crisis situation, but they want to make sure that I guess from a risk perspective, reputation, both in terms of you know that they're standing, but also in terms of their asset, their athletes, they want to know that if the shit hits the fan, there's someone to go to immediately, but in reality, it's mostly other people encouraging individual players and athletes to see us, whether that be fellow players, fellow athletes, members of staff at the club, or as I said before, the player development managers working on behalf of the player association to refer them.

I: What age group do you feel would benefit the most from education or awareness around mental health issues? Do you think maybe a more mature age group as they've hit senior level sport and they can appreciate it a bit more? Or, do you think it's something that needs integrated as soon as possible?

P: I mean, the schools are already on to this so most young athletes come through school education systems where this has been provided, which we think is fantastic. I think in football, we have large cohorts of kids coming into Academy systems where their education is then moved away from the regular statutory support. I'm not sure quite how effective or consistent that is only because I don't know, I'm not saying that it's not done. That would be definitely one area to look at. And then I think there's definitely a need to target all of your active athlete population. But also, people kind of an age, I guess, who are perhaps mid 30s, to mid 50s, who grown up in a different generation where stiff upper lip approach was what was done in sport. And of course, we know in sports, many people are going to management, coaching, etc, have been athletes themselves. So I think that it's that cohort of slightly older individuals who have got quite kind of, you know, fixed ideas about mental health, mental illness, etc. that are the ones that need to move furthest just to remove some of these blocks to people seeking help, as early as they can.

I: Do you think that's the same with regards to what we were discussing earlier in terms of preparing athletes for retirement, maybe helping them broaden that identity over a longer period of time, rather than perhaps, giving them the last 12 months of their career and then maybe struggling or rushing find something?

P: Yes, I do think that's the case. And that work is certainly undertaken by some of the player associations very, very effectively, course, the problem is you can provide this but there's no guarantee of uptake. So that remains the challenge. How do you get a good cohort people, I mean, I've seen some great stuff done in football, cricket, and rugby, where, you know, they take a club, and they'll go and spend a day on a trading desk in London, or they'll go to a, you know, a baker's or a new coffee outlet somewhere to understand what the different steps of a business development plan looks like. And I think that for a lot of players, that's kind of, there'll be some that will just go along for the ride. And there'll be a bit of a laugh, but actually, for those who are, for whatever reason, more mindful of the limitations of their longevity, it's a great opportunity to get them thinking outside the box.

I: I think to be honest, everything you've said has been absolutely fantastic. It's really interesting as well listening to you. So thank you so much for your time. I really, really appreciate it.

P: No problem, Tom. I'm glad your persistence paid off.

End of Interview.

Participant 16

I: If you can just first detail your experience within professional sport, so any notable clients or teams or anything that you've been involved with, just to draw on your experiences?

P: Yeah, I guess I've been working in professional sport for 20 years. Much of my work has probably been within football and golf, professionally. Of course, if I add in Olympic and commonwealth athletes, they will probably come into that category as well. Of course, there have been other specific athletes in athletics, tennis, probably a range of sports, actually. Probably too many to mention here, but it comes to quite a wide range.

I: Have you found any of the current or previous mental health provision you've encountered within professional sports to be useful or successful in any way? So essentially, what I'm asking is, if you have encountered any mental health provision in a professional sense, or if it's been always informal, or you've had to refer?

P: I suppose there's been a few different things. One is that sometimes work with clients would involve team working with psychiatrists or a medical doctor, or maybe clinical or counselling psychologists, as part of the team. Usually with an identified issue, that would typically happen in larger support and professional teams. So even around one athlete, I guess, if you can afford the provision, you would have a larger team. In the professional organisations?. Yes, most, if not all of the years, I would say. I know more recently for the professional footballers, they have a referral system as well. And my experience of that is that the provision is provided immediately and has been done. You can see exactly the timeframe. But that would be typical in there. There is within most of the clubs, there would be a mental health professional identified. That person might, would be working with within the health sector, either full time within the club or on a part time basis. And it would be a trained mental health professional. Yeah, so they fall into a few categories. I guess within the professional football clubs, at least, the provision was specific and quite detailed. Much of the referral system or process went through the medical doctor who's typically the lead in the team. It's all I guess, I probably had a quite a good experience in terms of who can provide specialist support and the type of specialist support that was available. I could only speculate about why that is in those clubs.

I: Yeah, I was I was going to ask did you always find that was always readily available within the environment itself. So you never had to externally refer an athlete?

P: So a few other times the referral would be the clients coming from the clubs would wish to remain or wish the information to remain confidential but to provide a referral, that was not recognised by the club. There were two things for the clubs that I've worked with. They often wanted an off site support system. So I have my own private clinic within that private clinic. There are other providers of services. See Cognitive Behavioural Therapy, counselling, psychology clinical, so referring was quite an easy process. They're coming to the same building. And referral system would work between the staff who work there. So, essentially, we had rooms and any referrals that were required were captured within there as well.

I: Right. Okay, brilliant. So what have you found has worked most in your own experience to enhance understanding of mental health issues and athletes? So have you found athletes tend to be very aware of mental health issues in terms of education, processes or even interventions available to them?

P: Yeah. I think there's variety here. The majority of the clients I would have seen over the years, tend to have a quite an open engaged way with learning. So if they were interested in a topic, they would be, they would typically read about it, search for information, question, and so on. Again, that person and not for all, but their information was often self driven. While the organisation's generally had some provision, or awareness, the majority was left to the devices of the athletes within it.

I: So in that sense, would it then be down to you to refer them based on what it is that they're giving you?

P: I did a few things again, in there that I guess the definitions of... Mental health, ill health, poor health and so on. I guess it's more obvious to us, less obvious, generally, maybe within the sporting community, and what counts as something that ought to be addressed. And for any of the referral systems that we run, these are a negotiated consideration with the, with the client about what's available, the type of service, the mechanisms of that therapist, and so on. And, of course, this is I guess, part of the open system, within some football clubs about how information is recorded, medically for all players. And with the psychological therapies that we were providing. The information remained confidential. And clubs that again I've been working with were happy for that to happen, and the referral process would happen within. And they were filled for the hours. They didn't ask for detail. It was based on a trust system that the players were attending, and then there was recognition and confirmation of that, but no discussion, no one divulging what the information was.

I: Did you find that was a major component for them maybe opening open admitting that they did have any issues or anything? Obviously, it's that trust element?

P: Yes, a few things there as well that the club were offering and providing that support for the clubs that I've worked with provided that support. It remained anonymous, information is held confidentially. There was a flexible system that was attending either face to face or online or over the telephone as well over the years, and that that system of support was adapted to the needs of the client. So I guess in terms of what we were doing that performance and well being element of the service provision was clear. But part of the intakes that we were doing were, were general. So they were kind of I suppose capturing historical data, family, relationships, social, then we would look at sleep hygiene and food hygiene. General well being. That's probably a standard of our intake as well.

I: Have you found that athletes' perceptions of mental health issues are quite receptive, are they quite open to learning about them?

P: I guess what has changed and it's not just that it's changed over the years, but there's those people who have come through our doors have always been willing to attend that it has been their choice. So I guess we're assuming a level of self determination, yeah, after

either something wrong or we can learn to do better. And those, perhaps those who were the more open, engaged. And I guess I need to put another part in there as well, because we all I always go through what are called pre-therapy questions. Where we are assessing the suitability, and the fit of the work we were going to do together. And, so that might be questions about how do they see change happening? How would they know if the change had happened? What they think the time involved would be, and how and what the demands would be upon them and me as a service provider, so we would be at that stage before we would begin any of our work, or suggest somebody else that would be suitable. And that was partly what our idea of the clinic was, was that it there was choice within it about who to see that it wasn't just this fixed choice. That's the person that's identified. And everyone goes to see them.

I: So, you're assessing them based on individual needs?

P: Yeah, that's right. It would be, that assessment needs is typically 90 minutes or so. But we would have to, well the pre-therapy would be a kind of a general introduction, but after that we would go into the specifics, so I guess the people that were coming to see us were aware generally of what we do, but perhaps not specifically. Part of kind of what I normally did at that stage was to provide information about, you know, who I am, what I do, and the general services available in sport and exercise psych.

I: And then you've sort of found that they are very receptive to that, once you have gone through that pre therapy assessment?

P: Yeah. Yeah. You'd have been kind of conscious about how suitable they were. And for us to work together, which probably wouldn't always be typical, if you know what I mean.

I: I've sort of had similar experiences myself in depending on the type of sport and maybe a bit more receptive, depending on what sport they're involved in.

P: Without question. And, you know, I'm working in football, and golf was two examples. Because they are the most receptive in my experience. You know, the employment came because they requested my help or our help. And that has been consistent over the past, well, 20 years. People who have been requesting help. As managers, Chief execs, and so on, we're very clear that they understood what psychology had to offer, that the support of their personnel was clear. And whatever it cost was, was what it cost.

I: Have you found, I suppose any particular age group or certain age groups, maybe in youth phases, or even senior professional phases are more understanding or have greater knowledge of mental health issues than the other?

P: Yeah. Well, I guess partly, what we're interpreting would be one what is mental health, two, what is the issue, three, what are the support services, etc. And there are several levels in there because even us as practising professionals would have quibbled over for what counts and what doesn't. Now, to somebody who doesn't have the scheme out for understanding psychology or psychological literature, you know, and I'm talking really about psychological literacy, even the words, phrases, assumptions that we made. So I guess we're

coming in at different levels, but the mechanism is often through their sport. So that what we are doing, the type of therapeutic modality we're using like person centred or CBT, or REBT and so on, would often affect the dynamics board and relationship with the personnel working in the club, that you're working with and the clients that come to see you. So what I mean by that is that often the interpersonal relationships in a sports science team meant that it was easier for the players and the football team or squad to come and see a psychologist who they assumed was approachable, understanding, aware, warm, unconditional, supportive, practical. And from that point of view, so I'm not sure which comes the right way around. Whether it is the psychologist who is open, approachable, and available that brings the footballers in as an example, or the players in or whether it's the other way around, you know, what are the services available? I'm not really sure, but there's something and I want to find out. So I'm sure there is some element of curiosity there as well. But fundamentally, I think, in my experience, it is the seat of the personnel for the psychology personnel for the environment.

I: So were you integrated as part of a team? Have you found it more beneficial as an external within that environment, which makes you more approachable?

P: So yeah, so there are two parts. As in for both the club they've worked with the service provision has been off site. But it wouldn't be unusual to see me on site or around the grounds or at the well, in their training complex. So I'd be there. Okay. So they would see the face. But the majority of the work would happen off site. And that was in relation to training availability, where I worked, afternoon, evening times, and so on. There's quite a few things in there. But the association and role with the coaches meant that if the coaches valued the services and support, then it was the recommendation, there was a strong recommendation, if there are any issues raised then this is who you should speak to. So I guess I that's probably coming away from mental health. But in a way, what I'm saying is that the welcoming, or the more welcoming the influential people within the club, the more likely it was that the athletes within there, were going to seek help and support.

I: So it's interesting that it's almost sort of then coming from the top, isn't it as then we've got a nice process from the top and everyone sort of signing on to that then.

P: Yeah, yeah. And for the clubs again, that I worked with, it was paid for. It was available, it was accessible. And recommended. Now, there were plenty other private clients who were coming privately without any knowledge from other clubs. Because it was much more difficult to be open and expressive about what might have been going on. So I guess my experiences that I've been invited in to places that were seeking support, I might say, is their climate, psychological climate in there was probably better. So you might get that effect as well.

I: So there's quite a bit of research that suggests that athletes tend to suffer with adverse mental health issues during times of injury. So what is your opinion or perception of well being and mental health support during times of injury for professional athletes?

P: Yeah, I guess I could give you the typical system that I would have encountered at the beginning was treat – depends on again on the injury and the timeframe – was treatment,

but exclusion, but not intended exclusion, but the athletes or injured athlete depending on the injury was away from the training ground and sometimes that was just where the treatment centre was, away from – but again, depending on the severity of the injury, as time has gone on, and the surpluses and the just the stadia, but the training grounds have changed. It's much more integrated. So I guess those psychologically informed environments and buildings being that there is a greater sense of integration. So the injured party is at the training complex, they are being treated, seen, included. And from that perspective, that means they're around, especially in the last five to 10 years, they were around. So one of the issues that came up a lot in the past was about exclusion. And, of course, that exclusion might have been just determined by the physical environment. And probably we're trying to do over time has been to the involve the player, the athletes, in as much of the normal everyday activity that they could be attached to. So again, that probably depends on one, the environment, two, the personnel, and three, their orientation towards the health and well being of the players. So I guess at an organisational level, that is critical.

I: Yeah. Have you found that athletes are able to cope well without support?

P: Yeah, this certainly varies depending on the type and severity of the injury, and the support systems outside of that, for them to travel and so on. Perhaps one of the things is that time are the estimates of recovery, is the issue that derails most athletes, especially if they're talking about three, six or nine months off from playing.

I: Have you found the ones who are out for longer found it more difficult?

P: Yeah, it's certainly a loss of purpose. Roles, identity, you've been feeling time, you know, the, undoing of their natural processes in their day, especially at the beginning. As time goes on, depending on again, on the length of time of the injury, they start to adapt to a better understanding of their daily processes, their treatment, treatment requirements, but I guess I'm saying this, because a lot of the athletes we support as well, when in the squad if they were injured or not, we received them twice a month. So there was always things that were going on, as it were. But then again, that was the system I had set up at the level of support for athletes. So that it would be twice a month, of course, there was availability beyond that, but across the year, regardless of their status playing or not, injured or not. They would receive support. Now, there's two things to be said about this as well, is that one is that we were, again, giving them the choice of whether to attend. They were attending. So I guess we're assuming that their needs were being met inside those sessions across the year. Again, that's an assumption. And whether that's a fit with me, some of the other personnel, or just the nature of what we were doing. I think we were attending quite strongly to their needs. So essentially asking the question, what do you need? Or what do you want? And then working towards that for each of the individual players.

I: Certainly a good indication if they're continuing to attend throughout that, which is obviously a difficult time for them.

P: Yeah, which we found surprising actually, because I suppose reading the literature and speaking to other people, there's a kind of a drift why there might be initial interest as a drift over time. But yeah. Again, it might be just the nature of the therapeutic modality, the

way of working with them that suited them. I guess I was keen to find out what it was they wanted, how they wanted to receive that support, and what it would comprise, so it was psychology in action, but perhaps they wouldn't know it.

I: I suppose that comes down to the individual approach as well that you've employed.

P: Yeah, yeah. So, I tend to use what's called an assimilative integrative approach. And that means that I'm using whatever modalities are available, we are fitting those to the needs of the client. They're informed, there's a methodology and ontology to the approach, to the nature of the information, the knowledge we have, the setting we're working in, there's quite a bit in there. But fundamentally, it's choice. You know, and so I guess, yeah, this system, or the experience I've had has been, maybe not an anomaly, but certainly different to others.

I: There is quite a consistent message where there's a level of disengagement or a lack of interest after a certain period of time, it almost becomes like a threshold that once you've reached that athletes tend to then regress or come away from the support, which is interesting.

P: I guess what we would have across the year, would probably be, well on those occasions where 10 months, maybe, well, nine months, maybe 10 months of support. That was, you know, and it was time in between, but often for the holidays or their holidays, that would be time away. So the maximum number of sessions is between 18 and 20. Now, some had more and some maybe had slightly less. But overall, that's essentially what was there. I think, personally speaking, that you're trying to meet them at their level and their needs, which takes a real sense of adaptability at the beginning. So that, how they are, to where they are, is completely accepted. And I think that's the expression of our professional skills, our professional way of being that that fits for them. You know, I'm constantly checking in. Does this work for you? How does support you and what would work better?

I: And what would you recommend needs the most improvement with regards to aiding an athlete's mental health? So what processes or strategies do you believe would need implementing or improving? So essentially, in your experience if there's anything you encountered, consistently bad or consistently negative?

P: I think there's a few things in here. One of the things is that when we're practically useful to an athlete, it demonstrates our value. And in mental health terms, they might use the umbrella term, they may not understand the specifics. Might guess at those. I often feel that you're doing your work without the typical psychological labels that we're used to. So when I practice, in a person centred way, there are no labels, there are no assessments, there are no formulations, the interventions are part of the process. So then, in my experience, they are sitting down with somebody who is wholly invested and interested in them. So the assumption of what is mental health or the assumption of mental health strategy, or even the issues of what might be labelled as conditions and so on, probably never comes up. But they start to understand what's going on between us. So, we often talk about process and content. So processes, you know, the information, well content is what they're bringing, but the process is the relationship between us, between me and the client. So much of our work

is done there. And what I think is that if we are sidestepping perhaps the stigma, possible stigma that's attached and that's changed over time to what is necessary and needed by the client. And sometimes what they need isn't what they need. There's certainly a mix up there. We can develop working therapeutic relationships that are to their benefit. And, like I give you an example, at a local driving range, golf driving range, people come in, they hit some balls, they play a round of golf, sit down and they'll chat. And we might say there are people of all ages. Now, if we label that as a mental health awareness, or come here to have a chat, they would start to reorganise what it meant to be there. So we're drawing attention to things that don't need attention drawn to it. The fact that they're there and meeting people and being active is wonderful.

I: It's almost putting up a red flag by labelling it in that way?

P: Correct. Yeah, as soon as you do that, you're drawing attention to it, and not just attention. But you are saying something, that statement is partly about you about the things that you do and so on. And I think the more we can be, as it were, without having to be something. It's almost like you get to develop your professional skills and your teaching. And that's kind of what I do as well, on both sides. And at the doctoral level, if we want to learn all these things, and then practice as if you couldn't see them.

I: So, a level of autonomy there?

P: Yeah, because you're sitting here talking and listening majority this thing in a way that allows the other person to speak, and to be held in regard and, you know, in an empathetic and genuine way. And they don't know this, they just feel this. So I guess what we're trying to do is yes educate and understanding will follow. So there is a way of doing that as well. There's multiple outlets and multiple ways of doing that. But the other side of things is noticing already what's good. I think there's so much good already there that we just don't notice it. You know, how people are they might go for a walk or they might be talking, somebody's chatting, they might be online, they might be, you know, it's how they construe that. How they make sense of it.

I: It's sort of making them more, I suppose, unconsciously conscious, if that makes sense?

P: Yeah, that's fine. On that process level, yeah. I mean, that, you know, that stream from, you know, unconscious incompetence, right up to unconscious competence, you're trying to get to a stage where people don't know, I mean the people do know. I guess, is that much and many of the strengths that they already have, are missed. So I have this one problem. One issue, one ailment, whatever it might be. But much of what's missed is everything else, that strength-based approach to looking at the same person. And it's not dismissing mental health in any way at all. In fact, it's just saying good mental health is this is a process-based way of looking at ourselves and other people. And I often wonder if a club that I have been to have had that as their ethos, that they are strengths based, and whether that's through the managers and coaches, support staff, Chief execs and so on. So it was implicit or inherent in the environment.

I: So have you have you found then in your experience, certainly within these environment—

P: I guess they are probably and maybe this is where they are joining what they had already wanted to do with service. And what I mean by that is they were eager to develop and psychology misses as part of that development. A detraction. So I guess, what would I say? I'm making whiskey in the in the whiskey distillery, you know, I've been invited in I've been encouraged, supported. I think it might be very different for people who are in the other organisations or in older spheres, where that hasn't been the case.

I: Yeah, I was gonna say that it sounds like the people who you have worked with to recognise that performance and well being are two sides of the same coin. So they're trying to enhance both sides to ultimately create a more holistic process?

P: Yeah, I would say that would be typical. Yeah, yeah. Of course, I've seen plenty individual athletes as well, who haven't had any service provision or support. One of the things that I often think as well, is that not that psychologists are show people you know, but their confidence in themselves, their skill set and their profession, it can be the best process in the entire process. Because we are there representing, say, for example, I am a sports psychologist, I have never chosen another term, I've always been confident in using that needle to describe what we do or what I do. I'd be confident in what we've learned or what psychology can offer. I tried to make that adaptable and accessible and less threatening. And show how simply and easily it's weaved into our lives. And I guess whether I'm meeting a chief executive coach or anyone else, I think that's on display. So I'm not saying that this is the only thing you can do, or this is what has to be done. I'm just saying here are the options. And I believe in them.

I: Have you found that in your experience, that there is still a stigma attached to mental health issues? Are people reticent to approach and discuss them in that sense?

P: It's interesting, because I guess we spend our lives in here. We're aware of the dichotomy. But I suppose I see what I do. My own basic assumptions of my practice and my professional philosophy are about human potential and development and growth and learning. And I wear those quite easily as it were, because that's what I'm coming with. So I'm listening to other people, I listen to their perceptions, their understandings, and so on. But I'm also presenting my own assertively, I wouldn't be pushy about this, I'm just saying, here's what works, or here's what research shows this will be beneficial. And that means, again, that there is a service provided that those who are, I guess, employing us are happy for that service to be handed over. So it's not that it's a problem solved, but it's a strength gained. You know, that's another step in the right direction for us. That's what I again, that's been my experience, but I couldn't tell you, which comes first, my eagerness to help their need for somebody to help.

I: I suppose they need to go hand in hand really, don't they.

P: I guess so, that makes good sense. Absolutely, makes good sense.

I: So just drawing your attention back to something you mentioned before, I know you sort of drew on the topic of identity and how injuries can affect that. A lot of the literature discusses the effects that retirement can have on effects in athletes identity as well, sort of similar experiences, aren't they really, with not being involved in sport. So, in your opinion, what do you believe needs improving, in order to better prepare athletes for a transition out of sport?

P: Well, what is quite intriguing as most of the, in fact, over the years, most, if not all, of the professional players that I worked with, have raised this as an issue somewhere in the work that we've done. Now, many of them were actively approaching their retirement looking at, you know, if they were studying, studying online or in university, some were engaged in coaching. I think the examples, I prepared quite a few famous examples, there was Vincent Kompany at Man City again, because it's business degree, but lots of those that would have said, you know, somebody else sees another profession ahead of them. So, why there are lots that are not preparing, I think many are and that's probably less well known. And I know it's encouraged within different clubs about where your career is going. That this is one part of your career. You know, the playing element might end but the next part of your life continues. What I tended to find is the most agile, psychologically agile, at preparing for the next stage, but it's often in line with their personality characteristics. They will be quite conscientious, quite open minded, quite intent on doing other things as well. So partly you know, shaped by the environment they've been in but the keenness for their own personal and professional development as well.

I: So it sounds like people you work with have already found that dual identity, they recognise that they've got a life outside of sports as well as.

P: Yeah I was actually surprised how many had been considering and these would be people even from 28. Well, some a bit younger, so maybe 25. Looking at what the prospective – speculating about the next 10 years, various sports and so on. The one group actually who I haven't had much, well, discussion during their career would be golfers, because we see it going stretching long into the future. But, you know, sometimes their careers are curtailed, because performance is dropped, etc, whatever it might be. But the awareness of that definitely is growing, I would say in the past decade, players are much, much more keen and much more aware of the role of their careers playing in their lives. You know, I think the healthier, more adaptable perspective they have on this, the better it is, and the faster the transition as prepare for it.

I: I was actually going to ask you, if you if you'd see any major differences from when you obviously started with your experience and how that's changed over time?

P: I would see the big difference probably would be that the athletes were even the ones that were financially secure, very fine, that very much secure, were keen to understand, you know, the rest of my life part, you know, even the mid to late career still intrigued by that, about what they've done. Partly, I think it was family systems as well, married, children, or at least having children, contribution in their lives, a place to live. So it was kind of a sociocultural and personal development process. Where they were trying to choose a place

to live, you know, who they were living with, the context of the life for the, you know, for their family.

I: So it's really interesting that they've made sort of, it's almost like a retirement plan, isn't it?

P: I was amazed by how many of them had considered the next steps. And I think one of the things that constantly comes up, especially about taking football, as an example is the injuries that are career ending. And they're keenly aware of those. And because they are, it prompts them, because there are moments of change and they are planning what to do. And I think those are, yeah, and a regard of, almost the club and the status of the players.

I: Yeah, that's really interesting. I think that's all my questions. You've actually pre-empted me on a couple of them as well.

P: Yeah. I think the thing about this is that, like, it's a fascinating topic. If I said in general, is there support for mental health? I would say yes. And no. I would say if they can afford it, it's there. That's been my experience. And is it accessible? It is. I think the big issue is the fit of personnel to support the athletes. And I think the flexibility of the people they go to see and it would be good that they recognise that somebody else might be more appropriate. You know, as service providers or service professionals, we need to be able to see who might be better, who might be more suited. That's better, who's more suited.

I: Avoiding a one size fits all thing?

P: Yeah. Like, I often ask sports psychs, how many clients they have well I don't want to say turned down, but recommended or suggested that they go elsewhere. And that number is usually tiny or non-existent. And that doesn't make sense to me. Because there must have been plenty of occasions where there wasn't a fit either for them or for you. You know, and they don't because it does happen occasionally and again, depending on the services they're providing, and how do you provide those services? It's nice to do to work in a team, because you can suggest other colleagues as well, without any loss for you in that sense.

I: It's a really interesting point, as I suppose. I don't know, is that maybe to do with ego?

P: I do think there is this assumption that because this is the work that I do, then I can do all of this work. And while you can do most of it, I've no doubt. I'm not sure about the 'all' part.

I: Thank you very much for your time.

P: Yeah, no problem at all. And I hope it all goes well for you.

I: Thank you very much. I really appreciate you taking the time to speak to me. That's been brilliant. Really interesting. Thank you.

End of Interview.

Participant 17

I: First, if you can just detail your experience working within professional sport, so any new sports teams or athletes and roles that you've had working in the industry?

P: I'm a chartered sports and exercise psychologist with the BPS and registered with the HCPC. I suppose notable experiences have probably spent three years working with the [confidential] rugby team that was primarily in their Academy at the senior Academy level so full time players 18 to 22 but also kind of dipped down a little bit into the younger age groups and also up into the senior squad given that our players in that senior Academy age group were pretty much first team players and as well I suppose that gave me a bit of an insight and experience into to supporting senior athletes and currently work with [confidential] across their franchise. So primarily in their academies setting but working more with their first team players also working with the [confidential], the female rugby league team, and also [confidential] netball and those I've picked up recently. And then also supporting [confidential], the national team, the [confidential] team and also with the [confidential], so kind of the elite group of full time referees that officiate Super League, Challenge Cup finals, Grand finals and international matches as well. So that's kind of me also worked with some individual athletes kind of through my training and my chartership.

I: How have you found the differences between the franchises and the organisations? Have you found that they are relatively consistent in the processes and their approaches? Or have you found any differences between organisation or maybe the club level?

P: Yes, I think there's definitely differences. I think working with female athletes even though that's probably my newest experience, is they just inherently more open about things. And so like, you'll start to talk to them on an individual level or talk to them at a group level and they're much more open with thoughts, feelings, emotions, which again is probably a little bit societal and kind of their socialisation, kind of the women or women are probably more it's maybe more accepted to talk around thoughts, feelings, emotions than it is for men. Yeah, there has been some differences so with the [confidential] the players in the senior Academy were also members of the RPA and that's the Rugby Players Association, so basically their union so they could access Cognacity through the RPA. They will receive funding if they needed support. At Leeds rhinos we're really lucky that our player welfare manager is also a trained counsellor. And I think most rugby league clubs, have a player welfare manager. I don't know if they all have to have a counselling background. But there is someone that's within the environment that specifically that's their role, but I don't think that the rugby league players have a union or have anyone like the RPA that's potentially providing that kind of support. There is the state of mind rugby league charity, but again, it's a charity, it's not something that you're necessarily signed up to as a member and you know what access you've got, and can get. And so I think there's definitely provision within most of the environments that I work in. I think that provision just looks different. With regard to comparing rugby union to Rugby League, again, the women's and the netball, netball is a brand new team. And the women's is almost, it's a very new sport, not new sport but the franchising of the teams and the creation of the women's Super League is new. So therefore, I don't think they get paid. I think it's still kind of maybe amateur/professional, but with a professional badge in a professional kind of League and

stuff like that, a professional looking League, so I don't know what their provision would be for psych support whether they'd be able to access it through [confidential], sorry that's our player welfare manager at [confidential]. Whether they'd be able to access that through him or whether they will just have to go through, you know, the normal GP/NHS route? I'm not sure.

I: That's interesting they've structured it like that. It's almost like non-professionals within a professional setting.

P: Yeah, it's definitely. So the Super League got involved with the women's game a few years ago and branded it as a Super League and clubs are now moving from maybe an amateur team to a professional team in the sense of like, you've now got St. Helens, you've now got a Wigan, you've got a Leeds. You've got Castleford, a Wakefield, whereas previously Wigan used to be Wigan St Pats, which is an amateur team in Wigan. But now, Wigan Warriors have taken over that team and put that branding on it and stuff. So they're moving from like these amateur clubs, where they've been based for a number of years, and coming under the banner of professional Super League teams. But it's not professional.

I: That's really weird.

P: Yeah, it's just the state of the sport and where it's at, at the minute. It's great that it gets – so, being a Super League affiliation. I think that affiliation, gets them loads of exposure, gets them on Sky and stuff like that. But the sport itself isn't professional. And it's like, there's almost, there's not been that organic growth of the sport to get to a point where it's ready to turn professional. It's like, we'll put all the branding on it but actually, the level of competition is probably somewhat behind it.

I: So what have you found that in your experience worked best in order to help enhance understanding of mental health or well-being within the athletes that you've worked with? So have you ever found that athletes are even really aware of their own mental well being? Do they understand what mental health is, the sort of the positives and the negatives? And what have you done to enhance that?

P: I think they inherently do know, whether they're able to articulate it is another thing. So they will probably know something doesn't feel right, or something's wrong within themselves, but being able to articulate this is what I think it is or this is the effect it's having on me. Probably not. And again, I think thinking more of the male dominated environments, what probably also stops that is that willingness to speak out, I guess, which is something that's, that's pretty common and pretty well documented. I think what's helped that is, or helped that in the environments I work in is, I suppose a bit of education. So that coming from someone like [confidential] at [confidential] as a player welfare manager, doing lots of work with a group around mental health and mental health support. Myself and a colleague, a guy called [confidential]. A very busy man, I think but he's based in Leeds or it was based in Leeds and I was lucky enough to make contact with him and almost have him as a bit of a mentor and a bit of a touchstone for some of this stuff. So working with individual clients, and you kind of going, I just need to run this past someone really and get an insight into like, what are the red flags I need to be aware of? And so it's good being able to have someone

like him where you can touch base with his level of experience and an almost, yes, that's fine, kind of proceed. Proceed with caution or no you probably want to be looking to refer that on. As well as probably just giving me a bit more confidence in supporting people. And when it kind of moved out of the sporting realm, or maybe is a little bit more grey than clearly sport. And I suppose Me and [confidential] delivered this session around mental health to the senior squad at [confidential], so around mental health as a performance factor. So basically, we consider physical health within that. So why don't we consider mental health as a performance factor and then just kind of getting the lads to talk about it a little bit. And almost like what comes first, mental health or performance and just starting that conversation really. And then I suppose during lockdown at the start lockdown delivered a few sessions just around well being to some of the younger age groups, some of the academy players to the netball Academy and just trying to help them articulate I think, maybe why this was impacting them. And recognising that a) it's okay to be impacted by it and b) here's some of the reasons why, here's some of the side effects and the effects that you might be feeling and, and just starting that conversation. And here are some coping strategies that you can potentially kind of put in place and use and trying to start to elicit stuff from them. So what some of your experiences have been, why do you think this might have happened? or Why do you think you might feel it this way? And how do you think you've coped with it? Is probably some of the stuff I've done from one to one level. I suppose it's just been, again, supporting athletes within my competencies. And also being able to have that that touchstone of someone like [confidential] that you can talk to and say, am I going down the right tracks? Can I proceed with this? Almost getting supervision, I guess, which again, just makes you feel more comfortable and more confident in supporting that person without just going immediately. Almost saying right, I've got to send you off to get some mental health support. And, again, that's not me trying to say that I'm necessarily qualified, but when it kind of sits in that grey area between sport and kind of well being mental health, just having the confidence and the supervision to support that.

I: Do you think that's, that's potentially an issue within the pathway to being a sport psych?

P: Yeah, yeah.

I: Do you think there's maybe not enough focus on that well being and that mental health factor within the training to be a chartered sports psychologist?

P: I don't... From my experience of the stage one, the Masters. No, probably not. But again, I did my masters eight years ago. So yeah... We had we had some, but it was more like, it was more kind of the exercise side of things. So yeah, I was like, Oh, yeah, exercise and mental health go together. And then there's sports performance. But again, I sound... This is only from kind of hearing what other people are teaching and kind of modules on different universities, it will seem like there's maybe more prevalence now. Again, when I did my training, I think that the BPS route way is so unstructured, there's no requirement for you to do any kind of formal training in the area. I think that will definitely be beneficial to practitioners. Again, I think you'll become more confident as you start once you finish and you start to do maybe CPD in a specific therapeutic approach. So I started going, kind of doing CPD solution-focused therapists and colleagues are doing ACT, or CBT, go into those trainings where it's, it's not sports specific, it's just general, maybe gives you more

confidence. And again, probably more competence with regards if you trained as a CBT therapist or an ACT practitioner. Actually, I can probably delve a little bit deeper, I probably can support a little bit more before referring on. But I think the thing that misses in the training is like, not even necessarily that the therapeutics, but the fundamentals like the risk assessments, and things like that. So being able to risk assess a client for the potential need to refer and things like risk assessing suicide, and I know that's a really extreme case, but it's not something that I was ever kind of exposed to until I'd come through and pretty much finished my training really before learning around risk assessing and things like that.

I: So it would make sense to integrate some of that, especially as you said, it's such a growing and developing area. It's changing all the time. So it seems reasonable to me to want to integrate something like that into the pathway system maybe?

P: Yeah, definitely. I think there's definitely improvements that could be made with that. I suppose I look back when I started my training, and whilst there were these accounts of players who haven't experienced mental health problems, I think it's exploded in seven years since I started in 2013. I think it's much more in the public eye now and public consciousness with regards to the demands on elite athletes and the mental health challenges that they potentially face for a number of different reasons. Whether there's been an uptake with regards to education at masters level around mental health support for or mental health in athletes and mental health support for athletes. But again, I'm not necessarily seeing any of that in the formal training. So it kind of keeps – I know BASES that their training route, where there is kind of mandatory workshops around mental health and counselling skills, but kind of two one-day workshops is that going to be enough? Ultimately, the aim of these qualifications is to become a sports and exercise psychologist, not a clinical psychologist. So it's kind of enough training to be competent to maybe assess and support low level subclinical things and then enough confidence and support to be able to understanding of how to refer a client to an appropriately trained practitioner, if that makes sense.

I had a client referred to me from Cognacity, so it was a rugby player. And it was, it was before I started at [confidential], but it was a [confidential] player. So Cognacity referred because it was Sport-based, it was sports-related anxiety. And this lad's 19 years of age, suffering with, yes, it's manifesting itself in sport, but it was probably close to full blown, well not full blown, but he was a very anxious individual. And he'd been pushed around from pillar to post a little bit. He had to go down to London to be assessed by Cognacity. So, you're asking someone that's really anxious to get on the train to London and be in a massive city to find somewhere he doesn't know. He then comes back. It gets bounced around a couple of people and people aren't taking him. And then it gets referred to me and you're just like, a) this kid just needs some consistency. He's reached out to try and get some support and is clearly really struggling. And the support network was meant to be there to help him, not to make things worse. And he's getting really frustrated by it because he's getting pushed here, there and everywhere. And so that was part of it for me. And again, getting that support from people like [confidential] and people like – so I used an REBT approach. So I kind of touch base with people like [confidential]. Got some supervision with regards to applying that approach to practice. And ultimately, we got some really good outcomes from it. But I suppose in my in my mind I'm like a) this kid needs some consistency, b) Yes, it is sport, but there's probably lots of underpinning factors then. Okay. I

think I'm probably competent to do it. But I need to make sure that I'm getting some really good supervision around that. So supervision with regard to the approach I was using to make sure I'm still working within my competencies from a clinical perspective.

I: Just building on something you said earlier about when you were developing the education and working with athletes, did you find that they were receptive to learning about mental health and well-being? Or did you find that maybe they were they were just more interested in the performance settings?

P: I think they will always put more focus on that because they're in a performance environment. And developmentally, they're striving to make it to they'll really push themselves hard, or they're in a performance environment and they recognise that a lot of it is about performance. And I think sometimes it's also recognising that inherently elite sport maybe isn't the healthiest place to be at times. And I suppose a) being able to recognise that and b) being able to maybe accept that a little bit. But no generally they were really open. So off the back of the session that myself and [confidential] run with the [confidential] first team, a couple of players actually came up at the end and actually ended up working with him for a little bit. And, again, I'm not sure what about specifically, but it was good to see that actually that prompted even a couple of people in the squad to take action. And I think the workshops that we've done around well being at the start of the first lockdown, and then at the start of the second lockdown, within the session the engagement was good. But again, everything was delivered online, I've not really had much interaction with them since. So it's difficult to know whether that's really been taken up and taken on. But I suppose this was kind of a workshop within a series of workshops. So then, reflecting Two weeks later and asking them for their reflections on the previous session, they were still articulating some of the things that been talked about in the previous week. So checking in on mates, how to manage the stressors that they were facing, or some of the stressors that they felt they were facing. So yeah. If you've kind of looking at impact and engagement from a retention perspective, there was at least some retention over a two-week period. Hopefully, it's had some impact. But I think for me, moving forward is maybe little and often it's maybe opening people up to being comfortable to have these conversations and not just delivering it, and then never talking about it again. Then it comes when there's maybe consistent conversation.

I: So it becomes a regular process for their development?

P: Yeah, definitely. And I think a lot of psychology can be that or a lot of sports psychology can be that as well. And so it's trying to get to a space where you can start to have these conversations because once you start talking about it, it then potentially opens up the avenue of being effective in a performance and bought in from a development perspective. Okay, we've got a better understanding of our thoughts, feelings and emotions, we can apply that to our self and our health. But we can also apply that to ourselves and our performance. Once you open up those conversations and start them, you can take them in many different directions, which is always going to be beneficial.

I: What do you feel then in terms of age groups, and the different groups associated with moving into senior level support? Who do you think would benefit the most from this

education or training and development? Do you think it's better to wait until they mature and maybe understand it a bit better? Or do you think it's the sooner the better, and we can start it almost as soon as you come through the door?

P: I think inherently I would probably say the sooner the better, because then you can a) potentially going to promote more positive behaviours and positive approaches versus waiting until the senior level and things then potentially taking a serious turn already if they've not developed appropriate coping strategies. But I think, again, it's just always been developmentally appropriate and level appropriate. And I suppose the challenge within both rugby settings rugby union and rugby league is that we probably have a lot less contact with players than say, football context. So Rugby Union, they only really come in they only formally start the academy at under 16 age groups. And that's one night a week, moving to two nights a week around some festivals. Similarly, in super league, in rugby league probably start under-15s and start a year earlier. And again, probably two nights a week. And then the under 18 age group probably going to four nights a week. But if you think football starting at what? Under-9s? By the time they're 15-16 that's pretty much full time. So I think it's making sure it's developmentally appropriate. And also, how does it fit within the context of the time that you have with them. Because then it becomes really that pull between coaches wanting to be on field and in the gym, and rightfully so versus actually, we also want to deliver some psychology and that might be sports psychology, or discussions around this. Within the Academy, within [confidential], our academy manager was really good at getting external speakers in and probably on, every once a month, once every two months, part of the session would be around having someone talk. And that's not even that wouldn't be me as a as a member of the group would it be someone from state of mind someone from Barclays Bank around finances, someone around sexual health, someone from police/fire service around car, drink, driving, safe driving, [confidential] came in and did one so he has some of his story. And he lost his son to drug addiction, unfortunately. So he comes in and talks around the parents experiencing drug addiction. And so, I think the academy manager at [confidential] and the academy staff are great with regards to trying to provide a broader experience for the players and start to open their eyes to some of these things. And obviously, there's loads of connections between drugs, alcohol and mental health. Sexual health as well in can definitely have an impact on mental health as well. Whilst it might not have been a conversation directly around, here's some sessions from a mental health practitioner, but actually starting to maybe help players connect the dots and see how all those things probably or might impact you.

I: It seems to be when almost you mentioned mental health, in some settings, there's an immediate disconnect. I think there's a lot of misconception regarding the term and definition of it, where it immediately has negative connotations. So it's really interesting saying it's almost like under the veil of mental health, but not specifically talking about it.

P: Yeah, definitely. I think you talk about well being, don't you and that's very similar. I think the session that we delivered to the first team, I think one of the first slides was mental health versus mental illness. And when people say mental health, actually what they mean is mental illness. Being diagnosed, being diagnosed with depression or anxiety, or whatever it may be, versus actually mental health is something that we all have, and we all live with on a spectrum of being really, really good, but potentially really, really bad. And just maybe

helping them recognise the difference between those two things have been really explicit with regards to talking around mental health. What we mean, intuitively, what a lot of people mean is that bottom end of the spectrum, this is actually what we're gonna do is we're going to talk about it with regard to the full spectrum and that being a diagnosed mental illness.

I: Do you think there is still a stigma within professional sports, you think it is still perceived very much negatively? Or do you think it is starting to change? And it's becoming a lot more positive?

P: Yes. So I think there probably is, I think that there is changes and steps. But I think again, everything happens slowly, doesn't it? I do think there is a greater appreciation of it. I don't think it's ever going to be perfect, because and this goes back to a conversation I had with a client yesterday that is that's maybe struggling with a few things. And their Mum's really unwell, and she's got uni. And club training and international trading. And she's like, I don't want to tell people because I feel like that's going to put my place at risk in the national team, and I'm not going to tell them that. I'm friends with people who are in the same position as me, and I'm worried that they might use that against me. And I think as much as you try to convince people that this is a safe space, this is something that we can talk about. Sport is inherently competitive, it's built on competition. And there's always therefore going to be that uncomfortableness around talking about it, simply because of the context that we're in. I think we can always make it better. But I don't think you're ever going to get to a space where people are really open and honest about it. And it's a interpersonal risk, isn't it? Going back to talking with the [confidential] players, so then the male players around wellbeing and thoughts, feelings and emotions we used mentee so they could just text the stuff in and it comes to the screen and whilst a) increases engagement on a web session, because Good luck trying to get anyone to say anything. Also, I was conscious that it also made everything anonymous. So you couldn't tell who sent that in because obviously, a 16-year-old lad talking around actually this is really impacting me is a massive interpersonal risk for him, or it will be perceived as an interpersonal risk. Because what if this impacts my standing in the group? And part of that is just the stage of their development. At 16-year-old you're massively peer centred aren't you, with you're standing in the group. And that's just through natural kind of development and maturation. So then asking them to talk about something that's really, really personal and really, really difficult. You're always going to get that resistance because they're just like, I'm not going to take the interpersonal risks, and potentially put my standing in the group at risk because of the plight they're in with their maturation. Someone more senior, someone, mid 20s-30s might feel more comfortable in themselves more comfortable where they're sitting in a group more comfortable with their career today to actually say, you know what, I am struggling. I don't think you'll get it out of the younger player and adolescent player in in a group setting, you might get it in an individual setting.

I: So just slightly off topic. According to quite a prominent research area, it has been suggested that athletes tend to suffer with a common mental disorder or adverse mental health issues during times of injury within their sport. So what's your perception of mental health support and well being support during times of injury for athletes?

P: I think it's probably very ad hoc. In a sense of, if we're purely talking around the psychological support for athletes during injury, it would very much depend on whether that organisation has a psychologist of some denomination either sport or clinical, or counselling. Anyone that could support mental health for that player to access when they're injured. And I think more broadly, it's then the experience and the knowledge of the practitioners that you're working with in the sense of physios or S&C coaches. Are they experienced enough? Have they ever worked with psychologists themselves in different settings and therefore may be able to support that a little bit better if they've gone and done their own CPD because they think it's important and are able to support them better? It's completely understandable that athlete would experience poorer mental health during injury given the fact that they can't be what they define themselves as, yeah, can't be an athlete. Because they didn't do that. I think from a provision perspective, it it'd be very ad hoc, and it isn't something that's necessarily consciously considered so we've got physio and S&C and then you dependent on if that club or organisation as a practitioner to support the mental health side of things and great, if not, then you've just got to hope that the physio and the S&C of a competent and conscious of it in order to support.

I: you think then it needs may be great a parity between the two staff members to maybe work in cohesion with each other and create a support system if and when that does occur. So you get into both sides of physical and mental rehabilitation?

P: Yeah, I think that'd be that'd be really useful again, it all comes down to whether there's a practitioner in the environment to support that. I suppose I was working in the organisation's I've been in with, especially [confidential] working closely with physios and S&C is to read our players and support that process and manage reinjury, anxiety and confidence and things like that. And also talk to players who ended up leaving us because they just didn't want to get injured again, but spent too long injured, and they just needed someone to talk to about that. And they were feeling guilty around, you know they want to leave the academy but, what are people gonna think. And I'm giving up my dream, but I just can't go through another 18 months of shoulder reconstruction, or knee reconstruction. And so yeah, when the support is most effective, it's when it's connected and collaborative. But ultimately, for me, that's great. When you can do that, that's great. And that's probably the best practice but a) Is there someone in that environment to do that? If not, are the physiotherapist and S&C coaches sufficiently aware of the impact of injury on mental health? How to talk about that in order to be able to support it, and I think that from a physios perspective, is that they probably have the most access, and most time with a player. And so some of my work was actually supporting the physio being able to have those awkward conversations. And sometimes mentioned this, I said this, what should I do? And you're just kind of, don't worry about what you say, and then some concern on their part that what if I say the wrong thing? What if I get it wrong? What impact would that have, and then just trying to support them and feeling comfortable in having those conversations, and then they'd be me picking them up if they felt less confident, or less sure or felt that it was maybe moving beyond their realm of capabilities.

I: How have you found athletes are able to cope, within and without the sport? What I mean by that is within the sport dealing with the day to day pressures, and maybe speaking to yourself about those or any concerns that they might have. And then alternatively, during

those times of injury, or even when they're approaching retirement, their ability to cope with these major life events.

P: I think for me, a lot of it is when I've seen athletes being able to cope with challenges more effectively is having that broader sense of self. A broader identity beyond just being an athlete. They might have a side business, then I just attach more meaning to other things in their life, family life. Kids. It could be anything, really. But it's not just an identity beyond being a rugby player or an athlete, which allows them to shift a little bit and be flexible when maybe you are injured for say nine months with an ACL. That nine months isn't my entirety that isn't all my identity, I'm able to focus on other things. Yeah, definitely find that can mitigate stuff. And again, I think athletes tend to... One way of coping is to put things into perspective or to see the positive in things or coming back fitter and stronger. Yeah, that is a pretty common one. Approaching retirement is a) is having something else and trying to support them in that where possible. And sometimes just having enough time to have those conversations with players. I remember speaking to one who was actually quite successful in his other life and his other business but kind of saying elite sports is unfair like I deserve the contract. And I think well you might do but if the unpredictability of elite sport isn't... It's not too much, but isn't something that you want to partake in anymore. Like you do always have the choice to leave, you aren't held there with a gun to your head. But if you want to be an elite athlete, you need to be able to accept that there's a lot of unpredictability in short term contracts. I think that those are things that you aren't willing, not willing to accept but, don't want to have to deal with in your life, which is completely acceptable then, maybe elite sport is no longer for you. Being able to accept that choice and I suppose understand what your priorities are in life and then be guided by them with regards what you choose to do next.

I: What then do you think needs the most improvement in terms of that mental health provision? And I suppose the processes are strategies from the club have or even from the organisational level?

P: That's a really tough question.

I: I know. It's the biggest one, I promise.

P: Again, like, it's difficult to say across the board, because I've probably got, whilst I'm somewhat experienced, I've probably got fairly limited contextual experience being in three or four different environments. And I'm sure some environments do really, really well. And I think for me it would be making sure that there is a first off making sure that there's someone in the environment that can deal with that, whether that's a sports psychologist, that'd be awesome if every club employed a sports psychologist. Or if a counsellor or someone that the club is connected with that can support that. And they're able to maybe take a lead on that. And players knowing that that access is available. So a lot of the players at [confidential] speaks to [confidential] quite regularly, just around life frustrations, and even if they're just having a bad day. So his office is in the middle – he's kind of got a segregated office, everyone else kind of sits in a communal office. But then he sits in his own office, which is good for privacy, obviously. I think players just knowing he's there and knowing it's accessible. And having that relationship is fundamentally the most important

thing, like you can have all the bells and whistles on things. But if you don't have someone in that environment that's identified as being able to support it directly, as a counsellor, or someone who's a sports & exercise psychologist that he's able to understand and therefore support and are referred to as appropriate, then I don't think you're going to get very far beyond that. And I think, again, education support for athletes, and that, for me probably starts when they come in and making sure it's developmentally appropriate. So obviously, not what you talk about with a senior first team environment probably gonna be very different to an under 16 environment, but it's just starting those conversations and that awareness. Helping them to develop some of the coping strategies that they'll need. I think helping them to develop a broader identity to beyond them being an athlete and that's really difficult because a strong athletic identity is really motivating and really drives engagement and commitment to sport. But it's a double-edged sword and it's great until it doesn't work anymore. Because the opportunity to be an athlete is maybe gone. And so being able to support athletes to develop that broader identity I do think [confidential] did that quite well and I think it's potentially the power that private schools have in rugby union to dictate stuff but did support by a more of a holistic development there's still a very strong focus on academics in school. We had an education advisor come in every so often to talk to the lads around further uni choices and kind of education beyond 18 and I think we did help support the players to develop that broader sense of self

I: Sounds like that's the key area for prevention more so than just treatments I think it's really important.

P: Yeah, definitely because like I said I think having a broader sense of self and a broader sense of identity, it allows you to be more in essence flexible I guess, because if I have been injured or I'm deselected or things just aren't going well at the minute it doesn't become the be all and end all and it doesn't become the kind of chain around your neck that's dragging you down. Whilst it is still going to be difficult and there are there are still gonna be days where it's not great. You are able to see life and see yourself in other things. From a prevention perspective is really important and just helping players develop coping strategies because like I said, elite sport is inherently probably not created for our mental health at times and recognising that and supporting players to be able to cope with those demands that they're going to face. Like it's not an if it's a when you're going to face the challenges, especially in things like sports like rugby, where an injury is pretty much guaranteed.

I: Have you found in your experience, athletes are more or less likely to seek support inside or outside of their immediate environment? So have you found that people are more likely to approach you on an individual basis to say, listen, I'm struggling, but I don't want to speak to people to my coaches. Or found the opposite, where people are happy to open up and discuss these issues within their immediate environment. I know you sort of touched on it before, but I thought it was it was interesting to maybe come back and discuss a bit more.

P: It really depends. The [confidential] have just finished our season and got some feedback from them. One of the questions was around, How did the support help well being in any way? And actually, a lot of them were coming back, when we got it, it helped. On a scale of zero to five, it was like a three or a four. So some improvements or benefit. And a lot of them were saying, because you understood the context and the environment, and what the

demands were, but you weren't separate to the coaching stuff. And so I think, you're kind of internal enough and external enough at the same time to be someone that they can trust. So you've developed a trust, but then then you're also external enough from the environment to be able to just support them as an individual and not necessarily get back to the coaches, or be related to performance. So I'd class that as being internal, it's someone who understands the context, always within the context, but still external enough to be seen to be independent. So you have the balance between trust and independence. But saying that some athletes will just want to have someone completely external to that, and I know, there's those players again, [confidential], whilst he was seen in the environment occasionally, I will probably say he was someone that wanted to be completely external and didn't answer to the club in any way. Quite a few players went to see him at different points. And whether that's because they're just wanting someone who's completely separate from the environment. And that's what was best for them at that point in time, then. And that might be the best thing for them. But I couldn't tell you that there was a defining factor or a defining reason why someone will come speak to me versus going and speaking to someone completely external. I just know from my experience and feedback I've got is, is that the psychologist within the environment, or with an understanding of the context is able to provide, has the trust from being known but also the independence that they crave with regards to knowing this is going to be a private conversation.

I: So that trust is a huge determining factor for them to be able to come and disclose that information to you?

P: Yeah, well, yeah, it was for the ones that did, but it's a bit like I don't, for the ones that didn't come to me and went to someone completely external I don't know because they didn't come to me. That was clearly a factor for them that meant that they wanted something completely removed from the environment. I can completely understand why but I can't necessarily give an explanation for the reasons but for those that did come or have spoken to me or the [confidential] that I've been working with, the reason why it was beneficial to their well being was because there was trust, and independence.

I: So in your opinion, what do you believe needs improving in order to better prepare an athlete for the transition out of sport?

P: I would probably say some support earlier, I suppose maybe going off on a bit of a tangent, at [confidential] we were really strong getting players doing University and rugby in that senior Academy. So once they hit 18, we really tried to support them doing rugby and uni. Now in a lot of cases that fell flat on its face, and it actually made things worse rather than better. Because they're trying to train full time and break into the first team and tried to get to university and doing neither particularly well. And whilst it came out of the best of intentions with regards to supporting these players, gaining some academic qualifications, which means that they've got another choice, another option, either, if they don't make it at 22 or don't get another contract then they can potentially keep that ticking over until we get to the end of the career, and then that might be something they want to pick up again. But actually, it just made things worse, because we just put two massive stresses on them at 18. And they were transitioning into two different environments, trying to get to know two different types of contexts. And with two competing schedules, it just didn't really work.

And now for some of those players, they stuck with uni. And as they progressed and made it to 20 and were starting to see that their opportunities would decline and by that I also mean, the Rugby Club was declining. So it's just gone to complete shit show basically but as they started to focus, maybe more and more on university versus the players who started to progress and make it into that first team and now kind of in the Premiership uni got sacked off. But I suppose that's also now caveated with one player that I've still kind of have some contact with who's playing first team, professional rugby in the Premiership and also completing a degree part time. But again, from his individual characteristics mean, he's very conscientious, he's very organised, he probably has the personal characteristics to be able to do that. And has been doing that for a long time. So he would travel up from South Yorkshire. So right at the bottom of Yorkshire, you're probably looking at a two hour journey to [confidential] for him and was also an excellent, exceptional cricketer. And so at one point was also playing cricket at county level. So he developed the skills to be able to manage lots of demands from a young age. But others hadn't. And therefore, when we put that on them at 18 everything just went to shit basically. And that's going to be one of my key reflections is like did we make things worse? With the best intentions we probably made things worse rather than better.

I: Maybe needs to come sooner doesn't it? Already at 18 it sounds like they've got this very narrow focus.

P: Yeah, and the thing is, it's recognising that they will do and try to convince an 18 year old that's on the cusp of becoming a professional player and with his rugby career ahead of him to actually you also need to focus on your academics, course he's going to fuck off. He is really trying to do both even at 18 is really hard but I do also completely agree it needs to be before the last two years of someone's career, because that's not enough time to get a really strong plan in place to be able to leave it and move into something else. I think two examples, obviously the RPA seems to be doing more and more with regards to supporting players to develop a retirement plan or another idea earlier. I know clubs like Saracens I've seen it a couple of their ex players have actually gone and done internships for some of their sponsors now Saracens have got massive sponsors like Allianz and MSNBC and these really huge companies, but actually they're then supporting players to go on to do internships with Allianz, if you want to be a banker or you want to work in finance or MSNBC if you want to work in television and stuff like that, and potentially different ones as well. I think Saracens also support their players with regards to supporting those other opportunities, there's a couple of ex players have started a coffee business, there's a couple of ex players that started a brewery, ex players that started selling CBD and whilst that's maybe not fully appropriate for a professional sport, something that's not currently on the list of approved substances with regard to batch testing, the club still actively supports them in developing their future careers and future ideas. Now, obviously, there's a caveat with that as Saracens have been done for massive salary cap breaches. Which maybe makes you a little bit more cynical. But I think from an intentions perspective, the club or the organisation actively supporting their players in pursuing that and not being a barrier. Would it be acceptable for a player to miss one day of training a month to do an internship or to get work experience? I would probably argue, yes. But good luck getting that past a head coach. Especially if they're an integral player or important part of the squad. Just think there needs to be more appreciation to being fully invested in sport and that taking up a lot of time, effort, energy

from a physical and emotional perspective and cognitive perspective. And also being able to develop that retirement plan and I think clubs, often from my experience, clubs and coaches want 100% in sport, and aren't willing to necessarily budge very much. Which means that you're not going to get – to get your retirement plan is going to be more difficult. Still achievable. And you can still do it. But you need the circumstances to be true. So obviously, having kids would make that again, even more challenging, because you've got less time to look after kids. So if the clubs could potentially do more to support that, actively supporting that, not just saying, Yes, we support it, but Okay, are you going to give players some time off? Try to support them to use your networks that you have with regard sponsors? Or are you going to actively support them with regards to the businesses that they're setting up?

[PAUSE]

...and some practitioners and some people that are assessing and supervising as well will hold really strong views that we are sports exercise psychologist we have. I would say I'm a sports psychologist, not Sport and Exercise. But we're a sport psychologist, we have really clear remit and really clear boundaries. And if anything strays beyond that you refer and I'm like, yeah, in an ideal world, but pragmatically, that's not helpful. Because I would refer probably 70% of clients I work with as soon as it moves beyond sport. A) it's not realistic because life and sport both influence each other. And, B) just from a personal perspective, I'd I want to have a broader remit. I find mental health interesting. I find the interaction, like my context will probably always be sport. But I want to be able to support the people that I work with more broadly, more holistically and I'm interested in that area and want to develop in that area. Some of the views that the supervisors and assessors hold and like therefore then impart on their trainees... Are we hindering things rather than helping?

I: So I suppose the argument there is, do you want to experience of dealing with it and you want to have the competencies and confidence to deal with it? Otherwise you sit in that grey area, as you said, and ultimately end up having to refer people on into a system that may or may not work.

P: I think, definitely, like, when I was doing my training, and it's like, you'd shit yourself, if anything remotely mental health come up. You kind of told that there's these boundaries, and you can't cross it, but I definitely feel more confident, a) just from experience and b) from supervision, like I've talked about before, with regard to more confidence sitting with that and supporting that, because then it's like, I think there's some clients and they come in and say I'm not great, not in a good place, blah, blah, blah. And you could potentially refer them straight away. But okay, let's have a couple of sessions, a couple of chats over the next few weeks, and then they could come back and say I'm all right, I was just a bit fed up with stuff, things weren't going particularly well. If I hadn't had the confidence or the competence to maybe sit with that, those uncomfortable feelings and stuff for a little bit, I would have started the process that never needed to be started.

I: Potentially refer them, when they've they didn't need the referral.

P: Yeah. And the challenges is, given the state of the NHS and mental health services, unless – this sounds awful, but unless you are going to kill yourself, good luck getting anything

immediate. And then on the flip side of that is okay, well, we can refer to private services, but that's going to cost. I know, [confidential] is a psychiatrist probably charges a lot. But if you've got a clinical psychologist you're looking at 90-100 pounds per session. And it's like so you can guess the NHS and not be seen for the next nine months, or pay £100 per session, and you just end up in this catch 22 where you can do neither potentially. And then the support ends up falling down to you anyway. I think when you are sat that in that grey area, that the importance is, is the supervision and for trainees supervision, obviously from your supervisor, but also supervision from an appropriately trained practitioner and then therefore it's then about either you or your supervisor building those relationships and I think again, this is maybe something that is quite useful or I found really useful is post chartership I'm still in close contact and I'm really in a working relationship with my supervisor from my stage two but obviously once chartered you then becoming dependent and I was like, shit I need to build a supervision support network. And then actually then going out and reaching out to people like [confidential] or other practitioners and other mental health practitioners – can we have a conversation? Can we have a coffee? Can I buy you a coffee to have a chat about things? Would you be happy if I give you a call or could even have a semi-regular catch up? And that really enhanced my confidence with regards to working in that grey area because it's like if something really comes out of the woodwork here, I've got five or six people's phone number, I can give a ring to ask for a meeting or buy them a coffee or something and we can have a chat about it. And then I can understand. Am I okay? Like, stop, stop, continue, like, is everything cool to go? And it's just something that comes up? Do I need to be conscious of where this might go and use that supervision to understand where it might go? What else might come out? Or is it an absolute? Yeah, you need to look into referring now and therefore I've then got a referral network that I can refer into. That's what's helped my confidence with working in those grey areas is supervision. I think that's vital really.

End of Interview.

Participant 18

I: So usually what I'll do is I'll just ask an open question just asking you about your experience within professional sport. So just asking you to detail teams or if you've worked with clients in the past and just sort of building over your expertise and how you've developed within the profession.

P: I suppose I started off mostly working in rugby. And it's strange because I used to work in sports for a long time. I used to work in sports development before I became a sports psychologist and so yeah, I started off with a little bit of track cycling and then started working in more stuff in rugby, did a PhD in professional rugby. And, and was doing bits and pieces obviously went into mental health research in horse racing and still do applied work in horse racing now. And that was that was kind of a big mental health study a couple years back. Now I suppose at the moment I work at an Institute and golf, still rugby, badminton and power curling are the sports I suppose I work in most. I pick up the odd maybe an athlete that has potential for Olympic Games or Commonwealth Games. Working around individual athletes in boxing and tiny bits of other sports. So a fairly broad variety of bits and pieces. So yeah, that's kind of a background of different type of stuff we do in terms of a sport practitioner stuff. In terms of philosophical stuff, most of mine is REBT person-centred bringing in a little bit of Kelly's PCP stuff that personal conflict psychology. So that's the dovetail approach I use for just the individual clients. My PhD was through Business School, actually. So even those in professional rugby it was done around leadership into a business school. So I do a lot of kind of organisational dynamics and stuff as well which is a big interest of mine.

I: So I suppose when we're within that, how have you found the differences in sports. Is there any existing mental health provision? Have you found in one sport, it's better than another, or have you found in one sport, it's completely absent?

P: I think it's moved yeah. It's developed a lot. So for example, I had a very good badminton player, she'd been in the institute for 40 years. And she had said, like, even the provision she gets now it's the best she's ever got in terms of the core, you know, like in terms of just the screening process. So at every institute you get a screening process every year on mental health, all that kind of stuff, and which they wouldn't have got a few years back, and a lot of support in terms of like clinical as well as non clinical provision, if needed. And so in terms of Institute support, very, very good. When it comes to sports themselves I think that can vary. So, and rugby, for example, I think has come a long way over the last few years. But the conversation around mental health – I've always got some concerns around some of the environments in which sport resides, a fairly heavily masculinized environment. So trying to get a really good conversation around mental health can be difficult. So even though a lot of people talk around actually embedding in the way the practices, the day to day practices of a sport can be quite hard to facilitate. In my perspective it has come a long way. And I think in relation to some organisations out there like HR services and business, etc, like employee system programmes and things like that, it probably has a bit more to go. And in terms of horse racing, they've helped push the last few years, but even in terms of sports science, they're wandering about... The leap on to mental health is a big push for them. Jockeys seem to be embracing it a bit more now and there's more conversations that

they're having with something like horse racing is really diverse. So trying to get trainers to embrace mental health protocols is very, very difficult. Management leadership roles, you know, again, did a lot of stuff that came back and say, so they should be the tough ones and carry a lot of the weight, so it's difficult for them. Studs, again, had some problems in the past couple of years, couple suicides, and a few bits of problems with them and individual studs have tried to deal with it, but maybe not as a collective. And, and yes, something like horse racing is so diverse, you know, it depends on how you're registered but, something between 18,000-28,000 people working in the horse racing industry, because it's kind of a farming based industry. So it's huge. And so do you know what it's almost unfair to compare sports, that's a wrong way to go about it. Because there's so much individualism in terms of their cultures in terms of work and practices, where to start from the type of sports that you're facilitating, something like rugby, which has a high concussion rating, we know that psychological, mental health issues related to that. That's a very different thing from badminton, which would have maybe lower limb injuries, etc, but wouldn't have that level of concussion. So I think we maybe make a mistake in comparing sports rather than seeing them as individual little worlds unto themselves and how they develop over time.

I: Yeah, I think are we trying to take best practices from these different sports and then try to integrate them in that sort of way. Do you think that's probably a good route to go down?

P: Yeah, I suppose it's a funny one, because I look at the IRFU In Ireland, their approach has been to embed to mental health quite heavily into having clinical counselling psychologists now more embedded within the organisation. They've got rugby development managers for each province as well to kind of develop that side of stuff. So they wanted to embed it a bit more. And it's a weird one though, because we have this kind of strange relationship between clinical and counselling and sports psychology. So mental health is often seen as a privilege of, I suppose clinical or counselling, in some respects, but all psychologists have a mental health – practitioner psychologists have a Mental Health Foundation. Whether your health or forensic your aim is to make sure the mental health and well being of your client is first and foremost. So, yeah, I suppose different people are occupying different roles or coming at it from different angles, but I'm not always sure of what the view of what good mental health is within the sport is joined up.

I: How have you found athletes perceptions are of mental health issues? Have you found that they are receptive to them? Or have you found maybe the environments have restricted that to some extent?

P: I think certainly there are more athletes themselves are more receptive to it. But I think the sad thing for me is a discourse around mental health in sport is often really mental ill health. So rather than say like low moods, negative emotions, and you know, stuff, you cover a lot with coping strategies for engaging sport. If you're in that situation in the workplace, and, you know, you're in a situation where it's a bit like, can be tough some days can be hard, can be a grind – all of those things. So that almost kind of gets cut out and the conversation seems to rise around clinical disorders. So and, you know, major depressive disorder or bipolar disorder, whatever, but it seems to reside more on this. And actually, the most of people within sport, as in the general population won't be residing in that area. So the conversation, weirdly, around mental health can exclude a lot of people who are

subclinical. Actually, so they, if anything, well, that's not me and find it tough. But I know I haven't got major depression. So weirdly, it has a way of what we know isolated cc in terms of our practice is that mental illness is cut and separated out for the daily practice of sport. And it's seen as something that's resides with the individuals and the individual problem. And rather than looking at it from a kind of work and practices or environmental problem, and like you look at some of the stuff that's come out about American, you know, USA Gymnastics recently, you can very much say that was an environmental problem. So there is often there's a danger with some of the mental health articles as well as you can end up blaming the victim. I suppose the first one is that yeah, athletes are open to it. But we need to broaden out our understanding of mental health and embed it more in work and practices. But certainly, yeah, a lot of people there's a certain amount of toughness, certainly in rugby even though the conversation happens. And then horse racing as well, there can be a lot of discretion about having those conversations, even at a low mood level. I'm not talking about clinical, but also, you know – you've probably read through those as well – mental health literacy sometimes, you know, even coaches, if they have an emotional athlete, and think there's something wrong with them. Like, no, that's a human being, it can feel sadness or frustration or if they're injured. There is an education programme needed within sports around what mental health is our ill health, also clinical, all that kind of stuff needs to happen. So education processes is a bit of a way off because people are scared. I've even had a nurse say to me, who works in sport, and she says to me, she said it scares the life out of me. And I remember saying to her but, we all have mental health, physical health scares the life out of you. And there is a hesitance. There's a psycho phobia of sorts around that, that conversation is slowly rolling, but really it just resides in referring to clinical or psychiatric services more so than actually what is good mental health on a day to day level in the environment, which is regular conversation, but it would be best utilised.

I: Something that you just said about integrating mental health literacy. Do you think that's then better starting off sooner on that – almost embedding that within their education development? Or do you think it's maybe more conducive to wait until that athlete or the coaches have matured and embed into a more senior level sport?

P: It's funny you say that because... So I work with [confidential], someone who would be in their 50s right? So they might have acquired injury. 20 years ago, they might have been without one guy who might worked on farms, acquired an injury that way and now in his 50s. He's in the northwest of Scotland, 50-year old male. So trying to have a conversation on mental health can be very difficult. Even though his mental health may be suffering a lot because of his injury, and so I think it's very difficult to have conversations that like that at that stage and some of them just won't engage which a part of me always feels... Certainly as part of our pathway programmes, mental health has to be included but I think you're almost up against the challenge. I've actually spoken to psychologists in other disciplines and in the general population. The minute that people hear mental health they actually turn off. Language is not great so you're trying to embed it more as in look, you know, you eat your vegetables when you're a kid you look after your physical health so what do you do to look after your mental health or mental health there's a slight kind of inverse stigma so people know what they should do with it but they're also seen as frightening and something scary. So I think either from very young you have to embed it I do believe that, or you have to have it in such a way that the language is easier to get a grip on like it's even interesting

for me that we have more discussion, I did a study on mental health, you're doing a PhD in mental health, with sport psychologists they've been doing mental health work for ages, I like to talk to more CBT practitioners and use goal setting, so we've been doing this with mental health related elements for the performance side for quite a bit of time. We're just now calling it mental health coping strategies, managing anxiety. Most clinical counselling psychologists say that's good mental health, it involved managing anxiety, not just for performance, it's just that we looked at them as a by-product and obviously for people's lives, but sports psychology is changing in that view. And so yeah, I just think for certainly, for me, I feel it's the embedded quite young but, we'd have to watch the language a little bit. And we're up against the same as every psychology profession is, which is actually we know it's less about the stigma of general population, but self stigma, help people figure out and don't be afraid of their own mental health, and help them explore those things. And so I think we're up against it. We're trying to get people in society stuff they don't want. Yeah, that's, that's hard. You know.

I: it's almost like you're trying to, I suppose, remarket the definition or change the terminology of mental health or mental health issues to something that would be more engaging for people because it's almost like there's a fear associated with it?

P: It is basic stuff like I know that sounds really simple. But I even reached a section of athletes a few weeks back. We did it in conjunction with performance lifestyle, and we call it mental fitness. Yeah, it's almost mental health, but we knew because it was with [confidential] and their age and demographic. But when you talk about that, what do you do just to look after yourself? Oh, you know what I like to do a bit of fishing or whatever. That's you looking after your well being, looking after your mental health. People have always been doing this. They've always been finding ways but just never labelled it. You always go back to what they do but the language is a barrier, you have to get around that and go well how do you recharge at the weekend. I like to sit and read a book it's trying to get into them supportive behaviours, rather than the language to try and give them a bit more of a meaningful understanding.

I: Have you found in your experience that athletes are more likely to disregard their own well being in favour of performance? Or have you found the opposite where I suppose probably best way to term it is recognising that their well being is conducive to a better performance?

P: I think it depends on the kind of the demographic, like I say, and it's very hard to sell this you see because if I say that [confidential], for example, because of the nature of their background, they do get that well being is important. But some of them have pain management issues that they are dealing with pain every day. So they are very conscious that they need to look after themselves in order to get the job done. Because their body can be fighting against them. It's a different situation. And if I look at something like badminton, I would say there's a much more awareness and greater understanding of the importance of their mental health. And in terms of fostering good performance, and most of them got burned though so the went 21 days straight and travelling and just broke down. And now like, no, I need to look after my emotions as much as my performance you know, means that that's gone. But then when you come into sports like rugby, where it's valorised, to put

yourself through true pain, where it's valorised to sacrifice your body for the sport it's very, very difficult then to come from the right angle. How do you then look after your mental health? Or how do you have self care? So how do you go from a language where coaches made it your job to smash it to then how would you engage in self care? That's quite a movement for them. I think coaches are getting better. They too, are seeing that tension. So how do you push them to such a might but don't break them. But it's really difficult because even with all that every year, like you see a preseason training in professional rugby. And it's absolutely, it used to be to any club every year, year on year, it gets harder. So that treadmill, So on one hand, you want to compete against, you know, other teams, or fitness, etc. But on the flip side, you're having this conversation on mental health. So it doesn't really shift. You know, we see that at the moment I worry for players at the moment we've got, we've got some kind of nations tournament going on. They look at that and go, so you have Scottish players coming back after playing European and premierships finals. And then a week later, pretty much or two weeks later, straight into the test match. That for me doesn't scream we're looking after mental health that screams we're worried about finances, I understand that's the bigger picture. But when it comes to performance or money, because it's professional sport, mental health often takes a backseat. Because of that, because they are so worried like, rugby doesn't make money. It's poor at making money. It's not like football at the top end it doesn't have that and say 25 years old to push very hard for professionalism, wants a lot of people with very good intentions want to look after the guys in there. But at the end the day, no pay no play. And all the players will say that. So there's a tension, right? I think if times are good, and they'll be spot on yeah, mental health. Times are not so good, i.e. we're losing or we have no money, it will go to a back seat, which I suppose is a business entirely in some ways, in some ways. But the problem you have there is actually a kind of, you're kind of shooting the goose that lays the golden egg in the long term. And I just feel like rugby is probably not as strategic around how it implements its mental health policy. So it's not, it's not embedded in the same way that say strength and conditioning is or physiotherapy is two different layers of a governing body of teams. It's just, it's just not, you don't look at that. If you look at any rugby team you'll see strength and conditioning coach, you'll see your physiotherapist, the psychologist will be some guy or girl who will be brought in by the head coach to do a bit of collaborative work. Very rarely will you see it on homepage, sports psychologist or counselling psychologist. This is such and such. That tells me a lot about how they feel. But really psychology as a front of house not simply on half of something, it needs to be integrated into work and practices as a sports psychologist, sit down as part of that multidisciplinary team that you'll get an institute and doing that kind of work. I don't know but very few sport psychologists out there would do that on a regular basis.

I: Do you think that's something that that needs to come from the organisation or the NGBs, to say, as you said, sort of embedding that into Front of House making sure that everyone's aware, you know, everyone needs this within the environment?

P: I think yeah, I think you have to get to a stage where, for example, yes, take the example at [confidential] we would fund some of the governing bodies in [confidential]. Something like [confidential] cycling gets funded to 78%. Pretty much it's an extension. So it's very easy again, to go to the governing body and go actually you need proposed procedures around it, or at least buy into our procedures. And when we say x, y and z and so it does, I think you

have to maybe at the start – [confidential], for us. There's actually a jockey, he once said to me, chatting to him about mental health and he says, you know, every time I'm sat in a waiting room, talking about mental health to see the psychologist I'd slide it off and make a joke of it. And then he says he'd go in there and bawl his eyes out. He says the cut between what they need and the culture, he says is very diverse. And he was saying you should force them because then at least to go Hmm, I have to go see the sports psychologist, actually they need to as well, but it allows them to save face within that environment, quite macho environment. So I suppose if you scale his thinking up to go over a body level, I think you have to enforce it. You have to enforce it the same way. I don't mean like necessarily, and everyone has to see a sports psych once a month. It might be just a screening process every year for ill health. And also robust services around and a policy around good mental health. What we do in our environment so it doesn't have to be an enforcement but at least have some policies and procedures in there that reflect that as part of their health and safety, which really we should have with the Disability Act and mental health can go under that act. And then to abide with the law of the land, you should have those policies and procedures but often that doesn't extend into the area.

I: There's a lot of literature surrounding the effects that injuries can have on an athlete's mental health. So how have you found that level of support or that level of understanding during times of injury?

P: It's funny because I run the programmes where we introduce sport psychology referrals during injury. And they're not about at the moment, because we've launched it in January, but the fact that I'm saying we launched it in January tells you something in terms of we haven't really had, I suppose, in terms of sports psychology, we haven't really had a robust intervention programme for athletes when they're injured. Now, there was lots of knowledge floating about, certainly, you know, if a coach was worried or a physio was worried in the past, about an athlete, it was referred to clinical and stuff, psychological, I think... And, again, we know from the research between 10-20% of athletes will have an extreme response to injury. So most of them are going to have negative emotions. And some of them rightly so. You know, at the moment I'm dealing with a boxer who's got a broken hand, they're gonna be out for six months, probably. So his chances of getting to the Olympics is probably gone now. It's gone. And the Commonwealth Games is what you're kind of after. So there's a need there for that support. But again, it comes back to educate like what can often happen with coaches, for example, they don't mean to do it. If someone is injured, it's, I would say, out of sight out of mind. Again, we know that core support is that link is really, really important. And so it does link back if you've got such a heavy mechanical view of the athlete. So you just, you know, if you view the athlete as a cog that can be pulled in or out of a piece of machinery, then it's not a great place, it's not a great message to send out if you viewed it as individual athletes who need support and care throughout their lifespan and their careers, then that's a whole different ballgame. I think you've got athletes and MDT that want to do that. So the coach is huge, because of you have to understand their philosophical motives and personal motives. Some of them are great, they will want to look after athletes, they care, classic philosopher coaches, if you want to call them that. Then there are other coaches that just are not in that who might be more and more aware of their own careers or more of just performance. And that's everything to them. There's less of those, which is good. But they can dictate usually what the

environment is like. That's the nice thing about how the MDT is set up in the environment. So we are an external organisation. So we're not embedded as a sport psychologist, I'm not embedded within a certain governing body, we provide our services. And so if I'm not happy about something, I can say that. If you're a psychologist who's embedded within I don't know, Exeter rugby, you know, if you're pissing off the coach, with your suggestions for x, y, and z, then that's a very different ballgame. It's harder to be a distance from that and be more transparent around it.

Yes, look, we need a robust process that athletes get looked after, psychologically the same as they would physically during rehab, there should be no difference. It's one reason that we're starting off the programme is that we really treat as psychologists at the institute. So we're quite limited in terms of what we can offer, but then we can at least try and go, okay, we can do individual support, we can also provide psychoeducation what emotions are you going to experience when you're injured, trying to upskill the coach, what support should you be giving them, trying to help the physio with language you know. Watch out for catastrophising language. So we should be as embedded, we shouldn't be separate from that processes and it comes down to our philosophical view of we just see as sports psychologists we just see our view as performance, but like to think that most now are more holistic and oriented.

I: Building on what you're saying there, have you then found athletes are more likely to seek support outside of their immediate environment, because of some of these sorts of preconceived notions of masculinity, the idea of maybe like the coach perceptions or the ideas of weakness? And obviously, having a psychologist or support service embedded into the team maybe creates this dilemma where an athlete is potentially less inclined to seek support because they are embedded.

P: Yeah, I think I've kind of few different ways. So I know, certainly with racing... Individuals can be hesitant, like racing welfare is a huge charter within racing, and it's pretty much become the Human Factors element. And sometimes I'll get referrals through them. Because maybe individuals don't want to go through their related body. So yeah, whatever reason, I suppose on one side, there is the idea of anonymity and confidentiality and just discretion, how others outside of the club, or outside of the system might view them, and there's a social element in racing so, everybody knows everybody. So it's not even necessarily, like in rugby, where you're working for a club, but it's just that you've got you know, as a trainer, you go to a Racecourse, and you're surrounded by 2500 trainers that are there you know. So if you're known to be seen as a sports psychologists, then I've had trainers that would say to me, then, you know, to get challenged, because I've got owners involved. They don't want owners to know that they're having psychological struggles that might be their business might be at so there's a sense of weakness, so I give my horses to somebody else, there is that that I'm going on to. And so this was that was the more global environment, if you want to be discrete about - that's useful. But I also think within clubs that is a problem, especially if you're employed by the club. So if you're an external consultant, it's like, guys, if you've anything that you want to discuss from a psychology perspective around performance, or good mental health, give me a call. It's not attached. It's independent. You've got to pay for it yourself. But we know this is the kind of guy that we'd recommend because he's qualified. Yeah, that's one thing. But then if you come in you're around the environments, you know, sitting there having chats with the coaches, in

the meetings with the coaches, the coaches are the ones that select you, as a player for the game on a Saturday, you have to take a lot of trust and a lot of belief with that psychologist not to think things are slipping out. And I think sometimes the better psychologists are better off going out from a team or social psychology perspective, and nearly have another psychologist within the club that does one to one work with some of the individual guys and do it that way. So, people like Mark Nesti does a lot of his work, really with the team. He doesn't deal with the athlete, well a little bit. But he does a lot with the teams within the Premier League he'll work with the actual multidisciplinary team, coaching team and around group dynamics and how best to support them to support as they work through the coaches. This helps avoid any confidentiality issues or trust issues or basically becoming a bit of an informant or viewed as an informant by the players and stuff in question. So I think psychologist inside has its place we'd have to look at that work remit and I would have thought it's more about what is called a psychological informed environment or whatever we're looking at the psychology, psychological infrastructure and don't necessarily want to do heavy handed one-to-one confidential work. That's tricky. You come up against a real tension there.

I: Yeah. I think that's really interesting, I suppose it's difficult to manage, isn't it? I suppose it comes down to trust and how much the players trust you as the individual?

P: Yeah, I think that's quite tricky. And also, when we come back, who is the client? Who's brought you in there? Is it a coach who's brought you in to do work with the players, but the players haven't asked for you. Well, you got problems straight away. The coaches want you to come in have a more psychologically informed environment. Can you work with us on that to help us have discussions as a collective around mental health, you know, around talent around all of the things that might have been around body image, you know, injury, help us to have those discussions as a group, so actually will help gel us, actually increased cohesion by having the openness and discussion, which it does. And that works quite well. So you always have to make a call when you come in and be quite upfront, which is about what the job there is to do. And, and depends on the sport as well. I look at it like badminton is different golf, but they may have someone who's a very progressive coach, who people feel quite comfortable with anyway. And he'll already espoused importance of mental health properties. So just depends if the coach is very, very open. And there's more trust anyway. Does that make sense? There's more trust, that coach is not part of a team sport. It is at times for competitions. But there's a high level of trust in the coach and the coach won't drop me just because I've gone through a tough time. Yeah, there's a whole lot of other factors there too. But in relationship between the coach and the athlete, and that's very, very strong and trusting, then the party will trust you as a psychologist to come in to have a conversation and not pass it on because the coach be like, I don't want to know, your job is to look after these guys. That's all I want you to do. Coaches get put under pressure. The jobs get challenged and they get paranoid and then it can start going off in a very manipulative way sometimes trying to find out and they don't mean to they're just worried about their jobs, worried about getting the sack. So try and find out about the mental health but you can't overstep the boundary. You know, the players of theirs are not their possessions, but they can overstep that boundary sometimes just in a desire to win on a Saturday, to keep your job. So there is a tension. So I understand what the market is, like,

you know, in the Premier League or why you would have to work in that way. Because there's pressure on the managers, other jobs and some of the support staff as well.

I: How have you found the differences between some of the individual athletes versus some of the athletes who are in team-based sports?

P: It's a weird one because it just depends like we're in golf. It's a very isolated sport. So you know, golfers would be by general on their own quite a bit. So probably wouldn't have that social support that they might get in a team environment. And some of them are quite happy to be on their own, it's just their nature. I suppose the interesting stuff is if you're part of a team environment, you probably get greater exposure to services. Unless you become a pro golfer, sometimes a range of service get exposed to can vary. Most governing bodies will try and make those things available, you know, through an institute or bringing staff but it's trickier there because the coach is not attached. Coaches are independent. So again, just depends on where the coaches are associated with as well.

I: Just a bit off topic here, but what's your opinion on how athletes are able to cope within sport and then without sport? I'm referring to times of injury or even as they're approaching retirement there.

P: I'll be honest, I will see a lot of stuff that comes out in terms of research papers, etc. and around sports injury, and not so much about how to manage injured athletes in practice. Does that make sense? That for me, that's tricky. We've put in like a seven step process on referrals and psychology support. And that paper is just not there, you know, as much that this is what we did. And so I think it's a lot to ask for athletes on how to cope. So that's one side is the system and the infrastructure, I think it's really only there if a crisis hits. Yeah, really only there if, you know, something else comes along as well, either a trigger something else, or was already something that was quite significant all the way along that we were quite aware of where someone suffers ongoing from major depression, then we know that like, you know, injury might increase the potential for that to become more severe. Yeah, that might be the more of a red flag in terms of helping athletes deal with the low points, the general augments which we all have as injuries go. And I don't think that's necessarily there. So they often only encountered it when it happens. So we know, for example, in terms of how people respond, a history of injuries is really important, either in terms of stuff that haven't had before, so straightaway they've had an injury that puts them out for six months, and just feel like the world's ended because they've never had one before, or they've had lots of injuries and they're like, here we go again, I know what to do, , I know what to feel and know what it's like. It's not as bad as it was first time around, you know, so in rugby they're known for getting repeated injuries. Well, for six weeks, and you'll get an operation, whether that's good or bad, they're blasé about going to get another hip operation at 23. Whether that's good or bad. That's another question. But they can be blasé. So they'll often learn by going through saying that's a real shame. But the funny thing is that if you have a conversation with athletes before they're injured, about getting injured. It's like, for them, it feels like almost inviting disaster. It's almost like oh, well can't have a conversation about that. Because you kind of like, you know, I don't want to think about that. It's almost like now it will be normal to get injured. So that's how you respond when you do the same as a normative transition. You're going to go from junior to senior, but

almost as a wishful thinking there might never get injured. And you're like weell. And it's likely you will, especially for rugby or boxing or high impact sports or snow sports, there's a real need to have a conversation in snow sport when you get a concussion, because you probably will. So how do you manage that? But we wait until it happens and then they're all over the place and I'm much less facilitative. You know, in the early days of an injury, their emotions are all over the place. It's very hard for them to hear a psychologist talk about how they're gonna self regulate that anger and frustration they're going through today. They've got no kind of warning. So information, and trying to find ways to get information across to them on what to experience and how to deal with it beforehand, and then not to balk at it. That's the real trick. And because I think what happens as well is that the lack of knowledge of an injury or an injury happens is much more likely to trigger a more clinical problem. Yeah, because they're not prepared so you haven't headed it off at the pass. So I don't know. But how we sell that to athletes is really, really difficult. And they're young. You know, if you're 19 or 20, you don't think about getting injured, your body feels like it does everything you tell it that it's different when you're Roger Federer, and you're reconstituted about how to keep your body going. So you put your body through all kinds of craziness, because it'll take it and recover fast. So you don't think like that, you don't have that view. So it's almost morbid to talk about injuries. So there is a need there to normalise that conversation, not just for mental health but about how your body will get injured or how you respond, to how you cope with it.

I: Yeah, I think about that you significantly more likely to get injured in that career than you would any other career.

P: Ironically, it's their anxiety that may evoke problems around injury. And we know what's really weird about it is that like, the big thing that you know, in terms of preventative stuff for injury its daily hassles. So daily stressors we know will contribute to an injury. And just from muscle tightness alone and lack of concentration, all of those things. So stressors can, but that goes back to the mental health thing, in not dealing with daily stressors. So you know, if you're trying to say actually, one of the big factors that would help prevent any duration and a potential occurrence of injury is you looking after your mental health is a very different type of language to have. But it's a hard habit if people don't see it. They don't. It's like almost one step removed. You know, if I'm constantly feeling stressed, of course, you know, more likely to get ill for a start up, but you're also more likely to get injured. And, you know, so I kind of feel that maybe we have to set it from a performance side. It's an easier sell. Take care of your well being, everything will flow down a bit easier.

I: I think there's certainly from what I've looked into as well seems to be this disparity between wellbeing and performance, where well being is seemingly disregarded in favour of performance. To the extent where it's almost like when you do mention it, again, it becomes a stigma, it becomes this issue.

P: I think we talk about identity foreclosure as well. And I see athletes over a period of time is, it's a strange analogy, but it's like jam in a doughnut, that identity would sit in the middle, you're sporting identity. But sometimes what happens is the donut shrinks, and shrinks. So that when something happens, there's nothing left, they neither have their identity because they're too invested in sport and they've had to cut off a lot of social

support systems around them to help them when they do get injured, so it's like a double hit. And in terms of when they get injured. And I see that with athletes so it's not even necessarily I think the broader identity or sporting identity, it's the shrinkage of the wider perspective on life, as well, in terms of the people they interact with. I know it's not a direct dualism, but they're interacting more so with more athletes that maybe give up a work, or maybe they have a part time job to invest more time in their sport. And all these little things, which kind of means that they're less robust, there's less social support systems, those resources are kind of gone. And as they invest more and more in sports, so it's, it puts more weight on the sport to carry those social support systems within as well. So you do have this strange – I'm just thinking of one athlete in particular, I can see over time, her world for sport has grown, but her wider world has shrunk. So if she gets injured or fails to make it to competition, it's just going to have a bigger impact on her even though she gets better on the performance side. So we're culpable too. For years, we had narratives around making the boat go faster and shit like that. And so we as sports psychologist in the sports science have colluded with as well to justify our presence there. And so we have to also go back as sports scientist and go well actually is that the right narrative? We buy in to different ways of reinforcing a win at all cost mentality. When there's no such thing as win at all cost, there's no such thing as the split between winning and well being, you talk to any business out there. If that was the case you wouldn't have a HR department. And organisations are, well, the personnel now you know, let's go back to that kind of more employee centred, they wouldn't have those things, because you have to look after your staff in order to better look after physically and mentally, but with sport just hasn't made that movement, as well as maybe it should have.

I: So, just one more question for you. What do you believe needs improving to better prepare athletes for the transition out of sport? So, once they retire, because I've always found it interesting, how can we aid that transition into retirement to help those people.

P: Yeah, I'm sitting here thinking about the difference between a coach and the multidisciplinary team, you know, like, I can understand a coach having a short term perspective, as well as the athlete as well about you know, next competition, next year and I think it's important in terms of balance that your staff around have a kind of just that lifespan perspective on the athlete, and beyond. And you know, I remember speaking to a guy, pro rugby player and he said to me that you thought when you're a player played to think he was 22 or 23 and he was pretty much at his age is unlikely I'll play to that he said to get 10 years of a career is that it just you know, it's pretty foreign now. You know, even this this guy who's been retired in 2015 and he was just reflecting on that and discussing that is you know, I probably won't get that it's just the nature of the sport we just don't go as long even in that short time span. Yes, so I suppose 1) is making sure you have along the way that people seen athletes across that lifespan and beyond as well and educational process Yes, but we maybe run into the same problem if I'm 21 I'm not going to be thinking about afterwards and I will probably not be thinking about what's going to happen to me when I retire and this problem–

I: Sorry to interrupt you I just thought; do you think that's part of the problem because they are so young I suppose you can make similar to what we were talking about before mental health literacy is almost like introducing it earlier this idea maybe not like specifically don't

do something else with the rest of your life while she play at least introducing the idea earlier

P: Yeah, no, that's I was gonna say that education goes a long way and is really important but yeah you cannot trust a 21 year old young lad to necessarily make the best decisions in his life. So there has to be responsibility. He is an adult I get that but you have to put in soft structures in place. Whether that is him having a mentor who's now retired, his next player will talk to him, that really is where the next most powerful conversation will come when there's people they respect. They've done good work and have had a career say look, this is how I navigate this and what's happened afterwards. And also try to open up what avenues are. I think there has to be a lot more relationships with FE and HE. So I think most rugby clubs should have partnerships with with different universities. So that gives guys the possibility to get an education not just Open University, that's fine, but it's quite isolating, sometimes for players. Sometimes to have something beyond the – I remember, a good friend of mine back home was a runner, he went to the Olympics, but he says, I need to get this undergrad. So what am I supposed to do, go into a job in interview and say I can 1500 metres really fast. He was worried about that, you know, even if you want to work in sport, now you have to have a degree at least even if you are a world class athlete, you still have to have a qualification. So I just feel that you have to have an infrastructure within the clubs which is club driven. So it's not someone else coming in, like me lambasted about later, the club has to have players coming in having those conversations. And I think it also depends on the sport, because if something like golf can go on for years and years, you know, as well. And so I think it's just more certainly more of those ones where the careers are shorter. And you're likely to be transitioned at best in your early 30s, that you really have to be having the conversations earlier. For something like golf it's got to be a financial transition, not a physical transition. That's a whole different ballgame again. And in fact, if you don't make it pro or you do make it pro you have to survive and transition out of it that way. It's maybe less about injuries, more about I just can't put up with making no money anymore. And that's more tricky in some ways, because you don't know when that happens, you kind of labour on. So there has to be a conversation as well about how it was precarity or economical insecurity will impact on your mental health as well as it's not just about you might have depression, because you transition out. Now you might have depression, or even low mood, because you got no cash. Strange thing, but even the language on transitioning out was quite abstract. But when you're pained as you've got a house, a wife, you've got mortgage to pay, and you've got no income coming in. How do you think or feel? Yeah, maybe not great. So it's, again, it's coming back to what life might look and kind of describe that for them. So maybe that's got a better grip than just talking about transitions or retirement. You know, psychologists are guilty of it, we tap into abstract terms anyway. And so yeah, I suppose there's a few different things. There was one, yeah, education, but again, goes back to use of the language. I think there has to be role models, so people that they feel that they can relate to not necessarily psychologist, psychologist could arrange the session, but then let the ex-guys have the conversation, to kind of highlight all the stuff they've been through. And they also have to look at it just from different angles. So rather than looking at it in terms of, well, mental health is so distinctive that happened in your head or your heart, it's a physical thing that will happen to you. It's insecurity. You know, certainly we did research, all the health related, mental health related issues are coming out with things like not getting paid by owners, you know, not having money coming in, or

trying to manage staff who are a pain in the ass and would give them headaches are ringing at ten o'clock at night. So again, it's just making the language more practical so that they understand it in their terms. Because you might say oh, yeah, you know, when you retire, you might go through some mental health issues. That language would bounce straight off them.

I: Yeah, it's not relatable at all in that context.

P: No, I know what the sad thing is, we can put all the provisions in place, and sometimes they won't listen. We need to have powerbrokers, stakeholders in the organisation constantly saying, you do great, Jimmy, fantastic. You know, just make sure you get your ass along to the lifestyle or psych session this afternoon. We were talking about it because it could be useful for you someday. We want to look after you, we want to care about you. And just make sure you get yourself along to it, so that kind of encouragement, as well is huge. But it's very hard because coaches are occupying the short term as well. Everything during preseason, brilliant to have this kind of stuff, once the season kicks off, mayhem for most the time. So it's very hard for them to be calm enough to be able to go, yeah, you could do with doing an extra unit analysis session, but you know for the long term benefit of Jimmy it's probably good that he goes on to a lifestyle/psych session this afternoon to talk about retirement. That's hard when you've got a game on Saturday, and you're worried that Jimmy hasn't got down what he's going to do on Saturday. Yeah, there's a constant tension. So you need a coach to be able to say no, I need to be able to look out for these guys and also for them to be looked after. As a long term, not just in their body on the park on Saturday, you know.

I: That's all my questions. Thank you, if you've got anything else to add or...

P: I think we just have to be careful that mental health is something that is external to the sporting environment. So that it is this separate thing. It's not embedded that sits out as something that an athlete suffers, or some that they go away to get support from. I suppose when I look at I find that a lot, I suppose you could call it lip service, but that's not fair. But it's seen as sort of detached from the working practices. Yeah, but more support. So that's my only concern that the conversation actually is not really about how sports go about your daily business and how that facilitates good mental health. And it's really crisis oriented when someone's in ill health and how we respond, not how do we promote good mental health on an ongoing basis that that will stave off a lot of crisis. Yeah, so that's that for me, there's a tension there between promotion of good mental health and the management of ill health or poor health, that raising is a bit of an issue.

The problem is they're in the same situation as athletes. Because, it's funny when you have you know, someone will come out and actually pick them up and say I tried to take my own life or, you know, severe depression, and the problem with that is the narrative around mental health kind of equates to every chord is cancer. And that that, for me is the issue that stops the conversation around mental health from happening. Yeah, so everyone thinks, oh, is your mental health down a bit? That's like going, if you've got a cold someone asked me so you've got cancer? It's unrelatable rather than actually going well, if I've had kind of a few shit weeks and I'm struggling with my inverted commas a mental health version of a cold that I'm still dealing with things but it's hard, my partner's at me and give

me a hard time and we're fighting all the time. That is a mental health related issue. But they won't equate it with that, because what they see is the media representation of mental health is much more extreme. Yeah, of course, I'll get to that. But I might not get to that. So then how does a footballer who's Mrs. giving them a hard time, you know, worried over money, need to chat with someone to figure it out my head how can I actually get on better with my wife? Improve relationships that are better with my husband, that's a mental health issue. And so that conversation that kind of almost like the low line mental health issues that happened day to day are never really brought to the fore or dismissed, and organisations basically kind of, I suppose it's a funny one, because they're all to conduct the level where yet they want to deal with the bigger issues. When do they step in, if they're worried about one of our players is, you know, going through a difficult time and his wife, when do we step in? And that's it, it is a boundary issue for them. Unless the player goes, actually know what – males have this problem as well. But again, that's a literacy issue, but understand well, you know, and we write organisations have to create that climate where someone is more likely to go yeah, I'm finding a bit harder with a partner just now. Is there a couples therapist that a club can recommend, that might help? Is that same as an employee assistance programme at work? Or is there a head of psychology you can pick up the phone and I'm looking for a bit of support here. Now that kind of side of stuff there's a whole range of support services. But we are interested to do as you say crisis response or not yet all right, and usually a crisis services can often reside around a very small percentage of athletes.

And here's a crazy one for you. What if their sport enhances their mental health? God forbid that swinging a golf club makes them feel better about life, which is really what sports psychology for a long time in theory is enjoying your sport as a way of not just performance but life in general that you'll still be swinging a golf club when you're 60 you might have played pro for 25 years as well, you're still enjoying swinging that golf club. So we're not very good at that, about what positive emotions, how would we promote that so it's a good mental health aspect as well so that people get something from their sport and that's the other side of that mental health just because it's just associated with the negative. It's tough being a rugby player. You talk about openly around rugby players and just laughing and joking and coming together and take the piss out of each other and getting on as a group is fantastic. And most of them will talk a lot about what lads get up to and stupid things. You read most autobiographies, it's about like, you know, Jimmy played a prank on whoever. So that's the kind of stuff in themes that people remember. So I think also about well, how do you start to inject a bit more enjoyment into it without compromise? You know, without always returning back to, it's all going to where we bevvie together? So there is all of that kind of stuff where we foster what is a nice place to work.

End of Interview.