Understanding and Recognizing High-Performance Swimmers' Wellbeing

Katie S. Uzzell, Camilla J. Knight, & Denise M. Hill

School of Sport and Exercise Sciences, Swansea University

Date of submission: 26th October 2021

Contact information:
Katie Uzzell
Swansea University Bay Campus
Crymlyn Burrows
Swansea
SA1 8EN
Email: 659429@swansea.ac.uk

This is the final accepted manuscript, which will be published in Sport, Exercise, and Performance Psychology. Please visit https://psycnet.apa.org/PsycARTICLES/journal/spy/ for the proofset version.

Funding Information: This study was funded by a Knowledge Economy Skills Scholarships (KESS), which is a pan-Wales higher level skills initiative led by Bangor University on behalf of the HE sector in Wales. It is part funded by the Welsh Government's European Social Fund (ESF) convergence programme for West Wales and the Valleys.

Abstract

The wellbeing of high-performance athletes has recently received increased research attention, yet there has been little focus on how wellbeing may be conceptualized within the context of specific sports. Thus, the aim of the current study was to understand and recognise high-performance swimmers' wellbeing. The study used an interpretive description methodology (Thorne, 2016). Semi-structured interviews were conducted with eight elite swimmers and 13 coaches and practitioners currently working with swimmers on the performance pathway. Interviews were analyzed using reflexive thematic analysis (Braun & Clarke, 2019). Participants indicated that, within the context of high-performance swimming, swimmer wellbeing is an individual phenomenon, underpinned by personal values and goals, which influence how it is experienced. Changes in swimmers' wellbeing was characterized by a range of affective, cognitive, and behavioral indicators that were specific to the individual and influenced by their personal definition of wellbeing. The findings emphasize the subjective nature of wellbeing, in terms of how it is understood, experienced, and recognized within high-performance swimming. Taken together, these findings highlight the importance of coaches, practitioners, and other support staff knowing each athlete with whom they work, particularly regarding the personal values and goals that underpin their understanding of wellbeing, as well as each person's specific indicators of changing wellbeing levels.

Keywords: high-performance sport, Interpretive Description, mental health, self-awareness

Emerging evidence indicates that, at the elite level, the wellbeing and mental health of athletes may be negatively impacted due to various contextual factors associated within sport, such as injury and overtraining (Rice et al., 2016). Compared to the general population, elite athletes are no more likely to experience mental illness (Gulliver et al., 2015), nevertheless, that means approximately 34% percentage of the elite athlete population may experience mental illnesses, such as anxiety and depression. Moreover, this figure may be an underestimation due to the under-reporting of symptoms (Gulliver et al., 2012) and because certain mental illnesses (e.g., depression) may be misdiagnosed as other psychological syndromes that have similar presenting symptoms (e.g., burnout; Schwenk, 2000).

Additionally, evidence suggests that athletes competing in individual sports (Nixdorf et al., 2016), or sports where leanness is desirable (e.g., swimming, gymnastics; Sundgot-Borgen & Torstveit, 2004), are more likely to experience certain mental illnesses, such as eating disorders or depression, compared to the general population. Athletes who are injured (Gulliver et al., 2015), experiencing performance failure (Hammond et al., 2013), and those retiring from sport have also been found to be at increased risk of anxiety and depression disorders (Gouttebarge et al., 2015). Given that these scenarios encompass numerous sports and situations commonplace to sport, it is critical that an understanding of how best to protect athlete mental health is gained to help ensure that athletes experience positive psychological outcomes, despite the multiple challenges associated with elite sport.

According to the World Health Organisation (WHO; 2005) mental health can be defined as "a state of wellbeing in which the individual realizes his or her own abilities, can cope with the normal stress of life, can work productively and fruitfully, and is able to make a contribution to his or her community" (p.2). Hence, under this definition, wellbeing represents a core component of mental health and, as such, increasing wellbeing levels may not only be useful in reducing the risk of poor mental health, but also in promoting positive

mental health outcomes (e.g., Keyes et al., 2010; Rice et al., 2016). In addition, there are a number of other benefits associated with high levels of wellbeing that may be relevant within a high-performance sporting context. Specifically, higher levels of wellbeing may improve performance via positive changes to physical health, attitudes, and cognitive abilities (Bryson et al., 2014). Wellbeing has also been associated with better physical health, increased resilience, and improved relationships (see Kanksy & Diener, 2017 for a review). As such, enhancing the wellbeing of high-performance athletes may not only reduce their risk of mental illness, but also offer additional health and performance-related benefits.

Despite its well-evidenced benefits, wellbeing as a concept continues to evade a universally agreed definition (see Dodge et al., 2012 for a comprehensive discussion). Within sport literature, one definition that has often been drawn upon is that by Dodge et al. (2012), who proposed that wellbeing is "the balance point between an individual's resource pool and the challenges faced" (p.230). At an operational level, wellbeing is viewed as multifaceted, including components such as positive affect, life satisfaction, and optimal psychological and social functioning (Keyes, 2002). Within sport psychology, the terms flourishing and thriving are often used in relation to wellbeing. Flourishing refers to the combination of high levels of emotional, psychological, and social wellbeing (Keyes, 2002), whereas thriving has been defined as "the joint experience of development and success, which can be realised through effective holistic functioning and observed through the experience of a high-level of wellbeing and a perceived high level of performance." (Brown et al., 2017, p. 174). Thus, although both flourishing and thriving encompass wellbeing, a perceived high level of performance is also necessary in order for an individual to be categorised as thriving.

Due to the considerable time and emotional commitment required by athletes within high-performance sport, wellbeing in the sporting domain is likely to have a substantial impact on overall wellbeing levels (Lundqvist, 2011). Recognizing the influence that sport

may have on wellbeing, Lundqvist (2011) proposed a theoretical model which integrated global and sport-specific wellbeing and highlighted various sport-related emotional (e.g., sport satisfaction, sport-related affect), psychological (e.g., purpose in sport, growth as an athlete), and social components (e.g., social acceptance in sport) related to wellbeing in this context. However, as Lundqvist (2011) acknowledged, this model was intended to, "provide a broad framework of plausible well-being concepts in sport to act as a guide and inspiration for further studies of well-being in competitive sports" (p.122). As such, it is unclear if this model accurately and fully reflects wellbeing within sports context, or if there are additional/differing constructs that should be included.

Since the introduction of the integrated model of global and sport-specific wellbeing by Lundqvist (2011), there has been a substantial increase in research focused on athlete wellbeing. Some studies have sought to contextualize athlete wellbeing, highlighting growth (Sarkar & Fletcher, 2014), control (Sarkar & Fletcher, 2014), and social relationships (Brown et al., 2018) as core components of, or elements that characterize, athlete wellbeing. Other studies have focused on identifying specific protective and risk factors related to athlete wellbeing and mental health, with a review of studies published between 1998 and 2018 highlighting 82 correlates related to the mental health of elite athletes (Kuettel & Larson, 2020). Further, a number of researchers have sought to develop sport-specific measures of wellbeing. For example, based on Keyes (2002) model, Foster and Chow (2018) developed the Sport Mental Health Continuum Short Form (Sport MNC-SF). Similarly, Kouali et al. (2020) adapted Ryff's (1989) Scales of Psychological Wellbeing (SPWB) to create the Eudaimonic Wellbeing in Sport Scale (EWBSS).

Despite the substantial growth in research interest into athlete wellbeing however, there are a number of areas that still require further consideration. First, previous studies focused on contextualizing wellbeing have mainly looked at the concept in terms of

flourishing (e.g., Stander et al., 2017) or thriving (e.g., Brown et al., 2018; Sarkar & Fletcher, 2014). Yet, wellbeing occurs on a continuum from low to high (e.g., Keyes, 2002) and, within the U.K. for example, only around 20% of the population can be categorised as flourishing (Hone et al., 2014). Thus, it is necessary to contextualize wellbeing at all levels in order to fully understand what wellbeing looks like across the continuum. Such understanding is needed to facilitate a more nuanced and effective recognition of declining athlete wellbeing levels, allowing for earlier intervention if necessary.

Second, previous studies have tended to contextualise athlete wellbeing across a variety of sports (e.g., Brown et al., 2018; Sarkar & Fletcher, 2014; Stander et al., 2017), which means particular sport-specific factors that affect how athlete wellbeing is understood, experienced, and recognized may be overlooked. Evidence from the public health literature recommends that understanding wellbeing in specific contexts is key to delivering successful interventions (e.g., O'Cathain et al., 2019). Hence, there is a need to contextualise wellbeing within specific sports to ensure that interventions designed to enhance athlete wellbeing are relevant, well-received, and successful in achieving its aims.

The current study

Recognizing the importance of considering and developing a sport-specific understanding of wellbeing, the current study sought to understand and recognise high-performance swimmers' wellbeing. Swimming was chosen due to the demanding nature of the sport, as those competing at the highest levels (e.g., national and international) are presented with a variety of challenges that have the potential to impact negatively on wellbeing and mental health (Lang, 2015). In particular, intense, frequent training sessions and long seasons may increase the likelihood of swimmers experiencing low wellbeing and/or poor mental health (e.g., Lang, 2015; Rice et al., 2016) that may contribute to athlete burnout and sport dropout (e.g., Gustafsson et al., 2017). To this end, the purpose of the

current study was to understand and recognize high-performance swimmers' wellbeing. The study was guided by two research questions: 1) How is wellbeing understood and experienced by swimmers within a high-performance swimming environment? and, 2) How can different levels of swimmer wellbeing be recognized within this environment?

Method

Methodological Approach and Philosophical Underpinnings

The methodological approach used was Interpretive Description (ID; Thorne, 2016). ID aims to produce findings with real world implications (Thorne, 2008) and is particularly useful for examining topics where there is a need for the generation of meaningful new knowledge, within the context of the wider environment in which it occurs (Thorne, 2016). ID is situated within an interpretivist paradigm, underpinned by a relativist ontology and a constructivist epistemology. That is, people construct their own subjective and multiple realities (e.g., Sparkes & Smith, 2014), however, there may be shared experiences across these multiple realities, which may only be known through the co-creation of knowledge, as a result of the interactions between the participants and the researcher. As such, ID acknowledges the important role that the researcher plays in shaping and constructing the meaning of these shared realities (Thorne, 2016). Reflecting the ontological and epistemological underpinnings of ID, it is accepted that any claims made via the use of ID, do not represent a definitive truth, rather a 'tentative truth claim,' that is open to future revision and modification (Thorne, 2004).

Procedure

The study was primarily conducted across two high-performance swimming clubs within the United Kingdom, although observations and informal conversations occasionally took place at other clubs (n=3) during the study, in order to provide further context to the interview data. High-performance swimming clubs are those in which swimmers on the performance pathway complete their training, while accessing full-time coaches and

additional resources such as physiotherapy, psychology, and performance lifestyle support. The performance pathway is run by the National Governing Body (NGB) (an organization that regulates and develops the sport on a national level) and involves a programme of training that aims to support swimmers on their journey into elite swimming. The pathway includes various stages that reflect the swimmer's current level of competition and their training and development needs. Typically, swimmers enter the pathway around 12 years and, depending on their progress, remain on the pathway throughout their swimming career.

Institutional ethics approval was gained (approval reference KU_10-11-18), and permission to attend the various swimming clubs was granted from the relevant NGB prior to starting data collection. Subsequently, data were collected using observations, informal conversations, and formal interviews which allowed for methodological triangulation – a technique that is recommended in ID research to help overcome the limitations of a single data collection method (Thorne, 2016). The lead researcher attended morning and evening training sessions, swim meets, training courses, and team meetings to collect observational data and engage in informal conversations with swimmers, coaches, and support staff. In total, the lead researcher was embedded within swimming environments for nine months; three months prior to the formal interviews, and six months during the formal interview and analysis phase.

Participants (Formal Interview)

Maximal variation purposeful sampling was used to ensure that formal interview data were collected from a range of individuals with rich experience of wellbeing within high-performance swimming. In addition to swimmers, the decision was made to collect data from coaches, parents, and practitioners, as it was felt that they would be able to provide further insight into swimmers' wellbeing, particularly around how swimmers' wellbeing could be recognized within a high-performance environment. Thus, individuals were considered for

the study if they were (a) a swimmer currently or previously part of the performance pathway, (b) a current coach working within the performance pathway, (c) a member of support staff regularly working with swimmers on the performance pathway (see below for further detail), or, (d) a parent of a swimmer currently on the performance pathway. To ensure heterogeneity within the sample, swimmers and coaches from all levels of the performance pathway were invited to participate in the study. Swimmers, parents, and support staff were approached directly by the lead researcher (face-to-face or via email) to ascertain their interest in participating in the study, while coaches received an email from the NGB's Performance Director. To maintain confidentiality, all interested individuals were asked to contact the lead researcher to arrange a date, time, and location for an interview.

In total, formal interviews were conducted with eight swimmers, five coaches, five support staff, and three parents. Of the swimmers, five were male and three were female, with an age range of 16-22 years. The swimmers could be categorized as competitive-elite or successful-elite using the criteria suggested by Swann et al. (2015). Of the coaches, four were male and one female. Three coached swimmers at the early stages of the pathway, and two coached swimmers in the later stages. However, the higher-level coaches also had previous experience of working with swimmers lower than the level they currently coached. In regards to the support staff, three were female and two were male and they held various sport science roles within the NGB (i.e., psychology and sports science practitioner roles[1]). They worked with swimmers at least once a week, and had been in their current role for at least a year. All parents were female and related to swimmers who were in the earlier pathway stages.

Data Collection

Formal Interviews

[1] For confidentiality reasons, the specific roles of the support staff who participated in the study cannot be revealed.

Semi-structured interviews were completed with 21 participants, with the content of the interviews guided by the existing wellbeing literature (Dodge et al., 2012; Keyes, 2002), which acted as a theoretical scaffold as recommended for ID research (Thorne et al., 2004). Prior to conducting any interviews, an interview guide was piloted with a former swimmer to verify the relevance of the questions, ascertain whether they addressed the necessary areas, and ensure the questions were clear. As a result, the interview guide was amended to include questions regarding positive experiences to balance the focus of the interview.

Written consent was obtained from each participant before they took part in the interview. Within our institution, parental assent is only required for those individuals aged under 16 years and, as there were no participants under this age included in the study, there was no requirement for parental assent. Once consent had been gained, interviews began with introductory questions to help participants relax and build rapport (Rubin & Rubin, 2012; e.g., "Tell me about your swimming career so far") before moving on to the main questions. For swimmers, these were focused on their own wellbeing experiences within their sport and included questions such as, "Tell me about a time when you feel you have experienced high levels of wellbeing," with follow-up questions including "How were you feeling at that time?." Swimmers were also asked to comment on how they recognized wellbeing in their peers. For coaches, support staff, and parents, the main questions focused on how they judged the wellbeing of the swimmers they worked with or parented (e.g. "What type of behaviors do you notice in swimmers that you perceive to be experiencing low levels of wellbeing?").

During the interviews, a responsive interviewing style (Rubin & Rubin, 2012) was used, which allowed the participant some control over the direction of the conversation, and exploration of novel areas not included in the interview guide. As such, the direction of each interview was led by the participants' responses, with the lead researcher choosing to follow up on responses that they perceived to be relevant to the research question. Where follow-up

questions produced insightful answers, the interview guide was amended to include this question. Interview length ranged from 26 to 76 minutes (M = 50 min; SD = 13.77).

Observations and Informal Conversations

According to Thorne et al. (2004), observations can help contextualize findings and avoid an overemphasis on interview data. In total, approximately 200 hours were spent observing swimmers, coaches, and practitioners within the swimming environment. All formal interview participants were included in the observations, as well as other swimmers, coaches, and practitioners who did not participate in the formal interviews. The majority (approximately 160 hours) of observations took place at training sessions, with the remaining hours at squad education days and competitions. An additional 40 hours of observation was conducted at specific staff training courses (e.g., mental health first aid) and monthly team meetings where swimmer wellbeing formed part of the meeting agenda. As such, observing these situations was beneficial to gaining an understanding of how wellbeing was being discussed within the environment by coaches and the wider support team.

Throughout the study, an 'unstructured' approach to observation was used (e.g., Mulhall, 2003), which involved documenting all behaviors, interactions, and elements of the environment considered relevant to the research topic (e.g., social interactions, body language). This information was used to contextualize interview data, act as a trigger for subsequent interview questions, and test and refine the themes generated during the interview analysis. Further, the observations provided the opportunity to engage in informal conversations, which facilitated understanding of participants' experiences more clearly.

During the observation period, a number of informal conversations with swimmers, coaches, and sport science staff also took place before, after, or during training sessions. The specific topics of the conversations were broad and wide-ranging, but they encouraged participants to reflect on their previous and current experiences within the high-performance

swimming environment (e.g., how they were feeling today, thoughts around upcoming and previous events). These conversations were not recorded and transcribed, but relevant information was written as fieldnotes or reflections, and included in the data analysis. All individuals were made aware that they were being observed as part of a research project and that information from these observations and any informal conversations may be recorded via fieldnotes and used as data. Everyone the lead researcher interacted with had an opportunity to indicate if they did not want any of their information to be included in the study, although none indicated any concerns aligned with the ethical approval for this study. Only quotes from the formal interview participants (i.e., participants who have consented for their data to be used in this way) are presented in the results. Data from the informal conversations are presented in excepts from field notes and are integrated with researcher reflections.

Data Analysis

All formal interviews were recorded electronically and transcribed verbatim. The transcription process began shortly after each interview, and where possible, before the next interview. This approach allowed for data immersion, and thus formed the first stage of the data analysis process. Additionally, it encouraged reflection around the interview questions, which were amended where necessary (i.e., to include additional questions around common themes that participants discussed). In relation to data analysis, Thorne (2016) presents readers with some guidance, but acknowledges that there are other existing data analysis methods that are suitable for use within an ID framework.

For the current study, interview data were analyzed using reflexive thematic analysis (RTA; Braun & Clarke, 2013; 2019) - a method that is theoretically flexible and suited to analyzing data from multiple data sources (Braun & Clarke, 2013). Moreover, RTA seeks to generate patterns of shared meaning organized around a particular theme or 'central organizing concept' (Braun & Clarke, 2013). Thus, as the aim of an ID study is to explore

shared meaning within individual experiences (Thorne, 2016), the use of RTA as an analysis method was considered a good fit for this study. The data analysis process involved moving through the six main phases outlined by Braun and Clarke (2019). The first stage, familiarisation, began during the transcription process described earlier and continued throughout the analysis process, where transcripts were read and re-read, as well as returning to the audio recordings at times. The second stage, data coding, involved reading the transcripts line-by-line whilst highlighting and assigning descriptive codes to parts of the transcripts which were relevant to the research questions. For example, during this stage, I used codes such as "smiling as a sign of + wellbeing," and "withdrawal indicative of low wellbeing." Generating initial themes was the third stage, which involved the grouping together of related codes under a 'central organizing concept' that captured the essence of each theme (Braun and Clarke, 2013).

The fourth stage, reviewing and developing themes, involved taking the themes back to the raw data and checking whether they were a good reflection of the data. The fifth stage involved refining, defining, and naming themes with titles that adequately reflected the sub-themes within them. For example, the second theme, "Wellbeing characterized by change" was originally labelled "Wellbeing characterized by consistent changes." However, this suggested that there were universally consistent changes by which various wellbeing levels could be recognized and, although there was some consistency, the specific changes that participants experienced were individual. As such, the word consistent was removed.

Finally, themes were written up and presented in a coherent way, which addressed the research questions. Although this process is described step-by-step, the process was an iterative one, which involved moving between phases until the research team were satisfied the themes were sufficiently developed. Throughout the analysis process, observational and informal interview data were initially used to contextualize the themes as they were being

developed and, as the analysis progressed, informal conversations occurred to discuss the themes with participants to see if they made sense and reflected swimmer wellbeing within this context. Where there was conflict (e.g., tensions between interview and observational data), swimmers' perspectives were prioritized, and the iterative process between data collection continued to encourage a fuller exploration of these experiences. Individual differences were accounted for in the analysis and included in the presented results.

Positionality

Reflexivity is a core component of RTA that distinguishes it from other types of thematic analysis (Braun & Clarke, 2019). Engaging in reflexive practice involves 'turning inwards' (Alvesson & Skoldberg, 2017) to understand how researcher positionality may have influenced the study. I (the lead researcher) am a white, British, female, with no prior experience of competitive swimming. Further, I had very little knowledge of swimmer wellbeing, beyond what I had previously read in the literature when beginning this study. Therefore, at the outset of the project, due to my lack of swimming experience, I could be considered an 'outsider.' However, in some aspects, I could also be considered an 'insider'; specifically, I was white, British, and female, characteristics that I shared with the majority of participants who took part in the study. Although my positionality presented initial challenges in that it took some time to understand and become familiar with swimming-related terms, at times I felt that my position as a non-swimmer led to some participants being more open with me about times when they struggled with their wellbeing, as I was not seen as a threat to their swimming career. In addition, my initial position as an non-swimmer also meant that my observations were not clouded by personal experience and, as such, I was open to seeing a wider perspective (Fay, 1996).

However, throughout the study, I was embedded within the high-performance swimming environment and over time my position changed to a 'knowledgeable outsider'

and, gradually, more of an 'insider.' This shift came with both benefits and challenges – as I became familiar with certain terminology and the structure of the sport (i.e., competition season, training schedules), I spent less time asking for clarification and as a result, my data became richer. However, during participant recruitment and interviews, some participants felt that sharing their experiences might impact their selection opportunities and so it became even more pertinent that I emphasized that I was not involved in team selection processes.

During data analysis, my own wellbeing experiences influenced my interpretation of participant's experiences. In seeking to understand the internal and external changes related to wellbeing, I reflected on the changes that I notice in myself and how these may be similar and/or different to changes that participants talked about. For example, I reflected that when my own wellbeing is low, I tend to withdraw from social situations. In analyzing the data, I found that this was similar for many swimmers included in the study, however, I noticed there were swimmers who, when their wellbeing was low, would seek social interaction and become 'louder', in order to distract themselves from their thoughts and feelings.

Methodological Rigor

For this study, the four criteria that Thorne (2016) proposed for evaluating the quality of ID studies are considered. First, *epistemological integrity* is demonstrated as the research question, alongside the lead researcher's underlying philosophical beliefs, led to the choice of ID as a suitable methodological framework. Subsequently, all research and analytical decisions were made within the guidelines of interpretive description to ensure methodological coherence. Such decisions included the study design, participant sampling method, data collection and analysis methods and the write-up of results.

Second, *representative credibility* was ensured via maximal variation sampling, methodological triangulation of data collection methods, and prolonged engagement within the environment, which allowed for rapport to be built with participants and encourage responses

which were rich, descriptive, in-depth, and authentic (Harrison et al., 2001). Further, contradictory examples were actively sought during data analysis and included within the results, to acknowledge individual differences within the shared experience. The ongoing results and observations were also discussed with people in the environment, who were able to indicate the extent to which they appeared to fit with what they had witnessed.

Third, the use of examples of methodological and analytic decisions throughout the manuscript provide a clear *analytic logic,* by providing the reader with transparency regarding how decisions were made and how these may have influenced the findings which have been reported. Further, the results of the study have been presented using supporting data from the formal interviews, informal conversations, and researcher reflections, allowing the reader to see how different data collection methods may have been used in the construction of the results.

Finally, Thorne (2016) argues for *interpretive authority* to be made clear, in order to achieve trustworthiness. To achieve this, the lead researcher completed a reflexive journal throughout the research process, which served to prompt recognition of how their own beliefs and prior understanding of wellbeing may have shaped the data collection and analysis. In addition, the research team acted as *critical friends* during the analysis, to challenge thinking, encourage reflexivity, and ensure findings were grounded in the data rather than, as Thorne (2016, p. 196) described, an 'over inscription of self.'

Results

The current study aimed to understand and recognize high-performance swimmers' wellbeing. Two main themes were developed: i) wellbeing understood and experienced in relation to personal values and goals; and ii) wellbeing characterized by change.

Wellbeing Understood and Experienced in Relation to Personal Values and Goals

Participants' interpretation of wellbeing varied and appeared to be influenced by their personal values (e.g., being in control and feeling supported) and goals (e.g., making a

qualifying time), although there were some similarities in what participants understood wellbeing to mean. In particular, many participants associated wellbeing with happiness, as most participants associated high levels of wellbeing with feeling "happy", although feelings of happiness were related to personal values and goals. Reflecting the above, this theme comprises two sub-themes: variation in the values and goals that underpin swimmers' understanding and experience of wellbeing, and the role of happiness in evaluating wellbeing in relation to personal values and goals.

Variation in the Values and Goals that Underpin Swimmers' Understanding and Experience of Wellbeing

When asked what wellbeing meant, each participant defined wellbeing slightly differently. Emphasizing this point, Support Staff 1 mentioned, "no one really understands [wellbeing], everyone kind of has their own definition." Indeed, although there were similarities, many swimmers had different beliefs about what comprises wellbeing. For example, Swimmer 1 felt, "wellbeing is like happiness really, and health" whereas Swimmer 7 felt that wellbeing was "physical as well, not just mental." For many, wellbeing was considered to be multi-faceted and listed multiple components that characterized wellbeing for them as individuals. For example, Swimmer 2 felt that wellbeing was, "the state of mind you're in" and "how you deal with things" and Swimmer 4 thought that wellbeing included, "being like happy mentally, physically, and maybe like emotionally."

In developing their understanding of wellbeing, swimmers tended to draw upon their own personal values. That is, things that they as an individual perceived as important, such as being in control, winning, or having good relationships with others, influenced how they understood and evaluated their own wellbeing. For instance, one swimmer indicated that his interpretation of wellbeing was one of feeling in control of a situation. Therefore, low levels

of wellbeing were associated with "not being in control." Subsequently, this swimmer reiterated the consequences of feeling out of control:

> It makes you feel powerless, because you lose everything, it's like hitting a wall, it's like racing cars running out of grip, you hit the brakes, they lock up and you just go sliding off the track, that's what it feels like, it's not fun (Swimmer 5).

Contrastingly, Swimmer 3 identified that their meaning of wellbeing was "the support and stuff that I get from other people, like my coaches, my peers, and my family." As such, they commented that, "I think generally, the whole way through [my wellbeing] has been good because I do, like I've got a lot of support from my family." Additionally, fieldnotes describing an informal conversation between them and the lead researcher indicated that the swimmer valued hard work, and so although managing a job alongside swimming was challenging, they found it positive for their wellbeing. The fieldnote recorded:

> Spent some time chatting with [Swimmer] – talked about how they were tired from work. I asked how they managed to juggle work and swimming. [Swimmer] told me they find it hard sometimes but 'hard work is always worth it'... also said they'd struggle if they were just 'swimming, swimming, swimming.'

Moreover, in addition to personal values, it was clear that swimmers experienced wellbeing in relation to their goals. For example, one swimmer had been trying to qualify for a major games for a number of years, noting, "I'm still chasing that time that I've been after for three years, I'm still trying to do it" (Swimmer 2). As such, they felt that their wellbeing was closely linked to how well they performed in relation to that time. Speaking about this, the swimmer recalled how their wellbeing was negatively affected even though they had achieved personal best times, as they had still not made the qualifying time, "[I] swam best times, but obviously missed it [qualifying time], um, and obviously I was very upset"

(Swimmer 2). Indeed, changes in wellbeing related to goals (especially performance goals) was something that was commonly observed during the study. One fieldnote recorded:

> First session back for all of the swimmers after trials and nearly a week of rest. Most swimmers seemed in a good mood, probably due to some really good performances... Only exception was [Swimmer]... had a quick chat with [them] after the session and said [they were] "disappointed" with performance... didn't seem to want to chat too much about it but I could sense [they were] quite down compared to usual.

The Role of Happiness in Evaluating Wellbeing in Relation to Personal Values and Goals

Despite individual differences across participants' interpretation of wellbeing, happiness was a consistent characteristic of wellbeing for most participants. For example, Swimmer 8 felt that wellbeing was, "just being happy in general," while Coach 2 considered their role in relation to swimmer wellbeing to be, "managing them so that they feel happy" and Parent 3 indicated that their child's wellbeing is, "just that she's happy, really." Furthermore, many participants used happiness as an indicator of their own wellbeing levels, and when talking about experiences of high levels of wellbeing, simply referred to "feeling happy," whereas when talking about experiences of poor wellbeing, participants often referred to feeling "bad." For instance, Swimmer 1 shared an experience of low wellbeing as "I felt bad like within myself. I know that's a bad word, but I felt bad within myself."

However, the role of happiness in relation to wellbeing was complex, and rather than a general feeling of happiness, it appeared that how happy participants felt in relation to personal values determined their overall wellbeing levels. For example, if an individual valued social support and believed this was important for their wellbeing, they judged their wellbeing based on how happy/satisfied they felt with their social network. As Swimmer 6 suggested, they felt their wellbeing was good if, "I'm happy emotionally with my parents and my friends." In contrast, Swimmer 5, who judged their wellbeing in relation to

control, mentioned that when things felt out of control, "you don't feel happy, because you're having to work harder and harder every day, just to maintain."

Wellbeing Characterized by Change

Participants felt that there were various affective, cognitive, and behavioral indicators that suggested a change in wellbeing. However, these indicators were often specific to each individual. For example, whereas one individual may withdraw from social interactions as a result of low levels of wellbeing, another may become overly talkative. Additionally, swimmers' ability to recognize changes in themselves was dependent upon each individual's level of self-awareness. These ideas are encapsulated within three sub-themes: Internal changes, external changes, and the role of awareness.

Internal Changes

Internal changes refer to the unobservable changes associated with varying wellbeing levels. Internal changes fell into two main categories; affective and cognitive. Considering the affective changes, participants often noted a change in feelings of motivation, particularly regarding training, as a result of their wellbeing levels. At times, a lack of motivation led to swimmers missing training sessions or not putting as much effort in as they usually would. In contrast, participants felt that higher levels of wellbeing made them feel more motivated to train. For example, when experiencing high levels of wellbeing, Swimmer 3 felt "really motivated... really looking forward to getting in the pool and having a good session." A lack of motivation related to wellbeing was also recorded during observations at training sessions. For example, one fieldnote recorded, "[Swimmer] told me they "weren't feeling it this morning." I asked why and [Swimmer] said they "just didn't feel great." I'm wondering if it's because of the competition on the weekend – try to find out how they did."

Participants also identified variation in feelings of enjoyment, related to increasing or decreasing wellbeing levels, again particularly regarding training. For example, when

discussing training during periods of high wellbeing, Swimmer 3 mentioned, "it's fun, it's hard but it's a good hard like you feel like you're accomplishing something rather than just slaving away up and down the pool." Conversely, Swimmer 8 said, "when you're not in the best state of mind and all that, the sessions drag, it's not as fun, you're there and you feel like you're swimming up and down for no reason." Related to this, Swimmer 1 noted how, when they had low wellbeing, other swimmers' behaviour could affect their wellbeing further, saying, "it doesn't even have to be something that annoys me but like, I'll find a way to get annoyed by it." Related to the influence of other's wellbeing on swimmer enjoyment, the impact of the coach on swimmer wellbeing was also recorded during observations. One fieldnote described, "[coach] not as upbeat as usual, very quiet... this seemed to put everyone on edge... not too much talking between staff or athletes."

With regards to cognitive changes, participants identified two main ways in which changing wellbeing levels affected these, specifically their ability to focus and their ability to rationalize. For instance, speaking about focus during periods of low wellbeing, Swimmer 2 said, "you're not a 100% focused or committed on what you should be doing…10, 20% could have wandered off somewhere else, that's going to affect your performance." In contrast, high levels of wellbeing were associated with an increased ability to focus. As Swimmer 4 mentioned when they had good wellbeing they would be, "really looking forward to getting in the pool... [because] you can just focus on going up and down swimming."

Beyond focus, some participants reported an inability to rationalize when experiencing low levels of wellbeing. For example, Swimmer 6 said, "when I'm having a hard day I'm just like, it's that session, that's the one that is going to make me so rubbish." However, as Support Staff 3 mentioned, when experiencing high levels of wellbeing, swimmers were perceived to be better able to "recognize this [a bad session] is not the end of the world." Reiterating this point, Coach 4 said, "they [swimmers] can think about things in a

bit more of a logical way, instead of reacting emotionally." During the times when they found it difficult to rationalize, swimmers felt that the people around them could help. For example, Swimmer 2 explained how, when they had not made the times to qualify for a squad, the coaches helped them to rationalize the situation, saying:

> I was like what am I doing now, there's nothing, I haven't got anything to aim for so they sat me down and they were like yeah, obviously we know your situation, like you haven't qualified but, they were still the best times you've ever done so they were like, it's like you haven't become a shit swimmer overnight.

External Changes

Participants referred to a number of noticeable behavioral changes that were considered to occur as a result of changing levels of wellbeing. These were identified by swimmers themselves, as well as coaches, support staff, and parents. Behavioral changes were most commonly observed via social cues, namely, through social interactions and body language. Specifically, higher levels of wellbeing were often associated with more interaction with others, whereas lower levels of wellbeing were associated with reduced interaction. Swimmer 3 highlighted this point, "On a day when where I'm feeling good in the pool, I'll talk to anyone in my squad . . . whereas if I'm not [feeling good], I'll just talk to my close circle and sort of exclude everyone else." Additionally, participants reported noticing changes to the language used in interacts while experiencing lower levels of wellbeing. Swimmer 1 noted, "I feel like I swear a lot more if I'm not happy… a lot more bad words come out."

Participants also considered changes to body language to be an indicator of varying levels of wellbeing. For example, some of the participants felt the way swimmers walked onto poolside provided a useful indicator of their wellbeing level, as Swimmer 1 explained:

> People walk up like on pool side, like chest out you know head up, having a bit of a laugh and smiley, that sort of stuff um, but if you're having a bad day it's like head down, bit slumped, bit sad, miserable face.

In addition, participants spoke about changes to facial expressions related to wellbeing, including smiling, frowning, and eye contact and a number of observations related to this point were recorded. For example, one fieldnote noted, "I tried to smile if I caught [staff member's] eye but no response," whereas another observed "[swimmer] had a vacant look in his face". Finally, participants felt that body posture was a consistent indicator of wellbeing and many coaches believed that changes to body posture and movement could also be recognized in the water. Speaking about this, Coach 2 noted, "I mean…, you can see them in the [water], you're thinking goodness me, it's just like have you ever swam before (laughs), what's happened, do you have arms and legs?"

Although there were commonalities in the behavioral changes perceived to indicate wellbeing levels, the specific changes observed were dependent on the individual's typical behavior. As Support Staff 2 commented "the kind of the main thing with the athletes I work with is they become a different person." Indeed, as the study progressed, comments regarding changes to typical behaviour were often recorded in the observational fieldnotes. For example, one entry stated, "one swimmer ignored me which is not unusual but also seemed very quiet even with other swimmers" and another entry observed that a swimmer was, "much more relaxed than normal." However, despite the individuality in the changes observed, there appeared to be within-person consistency, as Support Staff 3 noted, "there's one athlete who very much disengages from the coach when they're not in a state of great wellbeing."

The Role of Awareness

Within the context of this study, awareness referred to an individuals' ability to recognize changes, either in themselves or in others. In particular, participants felt that

swimmers needed a certain level of self-awareness to be able to recognize both internal and external wellbeing related indicators, though not all participants considered swimmers to have the level of self-awareness required. Specifically, some participants considered that self-awareness was age related, and developed over time. As such, compared to other swimmers, more experienced swimmers were perceived as better able to identify changes associated with their wellbeing. Discussing this, Coach 2 said, "I think, as an adult, you kind of learn to know yourself a little bit better in that way, but I think that's where the swimmers are still learning about themselves a bit." Some swimmers felt that they could not always identify changes to their own wellbeing, rather, it was only when others noticed, or they reflected, that they became aware of them. Swimmer 1 explained, "I think it takes a while for me to realize when I'm in peaks or troughs or whatever like, with how I'm feeling."

Participants felt that, in particular, coaches had a good awareness of the wellbeing levels of their swimmers, with Swimmer 8 noting, "he [coach] will notice, it's a bit creepy actually!" Reiterating this point, Parent 3 said, "I think sometimes [the coach] recognizes more in my daughter than what I do." However, given the individual nature of behavioral changes related to wellbeing, coaches, support staff, and parents felt it took extended time with each swimmer to observe their responses in a range of situations and establish a baseline for future comparison. Discussing this, Coach 4 explained, "it's that change in their day to day emotions, that you've learnt over a period of time."

However, coaches noted that changes to behavior were harder to spot in individuals who did not display large variations in their day-to-day social interactions and body language. For example, Support Staff 1 felt it was difficult to notice changing wellbeing in a certain swimmer because they appeared to be constantly cheerful, noting, "he looks so cheerful all of the time... I think people like him are probably the worst ones to try and like pick up on subtle signs." Similarly, Coach 5 felt that it was harder to recognize changes in wellbeing in swimmers

who were quieter because, "they're so neutral all of the time, you don't know, there's not very many changes in their, their everyday characteristics... they're the harder ones to figure out."

Discussion

The purpose of the current study was to understand and recognize high-performance swimmers' wellbeing. Overall, the findings point to a close association between participants' personal values and goals in both their understanding and experience of wellbeing. That is, findings suggest that wellbeing of high-performance swimmers is a highly subjective experience, and that swimmers understand wellbeing in relation to their own personal values and goals, and experience wellbeing in terms of happiness related to those values and goals. Further, the findings indicate that wellbeing can be recognized via various cognitive, affective, and behavioral indicators and that changes in wellbeing levels may be recognized via changes in these indicators, although the manifestation of these changes differ between swimmers. Related to this, the present study highlights the variation in levels of self-awareness that meant that not all swimmers were able to recognize their own wellbeing indicators, and instead relied on others (i.e., coaches, parents, peers) to notice these for them.

Generally, participant's understanding of wellbeing was aligned with Lundqvist's (2011) model of wellbeing, in that participants characterized wellbeing using both hedonic (e.g., feelings of happiness) and eudaimonic (e.g., functioning and social) aspects. However, the current study extends our understanding by highlighting the individual differences in the value that participants placed on certain aspects of wellbeing over others (i.e., emotional, psychological). For example, some participants viewed social aspects as critical to wellbeing, whereas others felt that emotional functioning was more important for their overall wellbeing. Consequently, these findings suggest that to understand an individual's wellbeing it is necessary to delve below the categories of hedonic and eudiamonic functioning, to consider the personal factors that underpin each individual's experience of these.

The individuality in participants' understanding of wellbeing found in the current study offers a novel contribution to the literature as, with the notable exception of Ashfield et al. (2012) whose findings emphasized the individual nature of the flourishing experience, previous studies have tended to approach the conceptualization of wellbeing from a "one size fits all" perspective that views wellbeing as a common experience. As such, previous studies have aimed to identify shared aspects of wellbeing that characterize the experience for all (e.g., Sarkar & Fletcher, 2014; Brown et al., 2018). This endeavor has proved challenging and, despite increased research focus in this area, researchers have struggled to reach an overall consensus with regards to what characterizes athlete wellbeing. In light of the current study's findings, we suggest that such challenges will remain while attempts to define wellbeing in terms of a generalized set of characteristics continue.

Instead, future research may benefit from redirecting its focus towards more fully understanding the underpinning values and goals related to wellbeing, and how they may influence, or are influenced by, wellbeing. Indeed, this shift would reflect that of the broader psychology literature, where studies have begun to consider individual differences in the wellbeing experience (e.g., Wissing et al., 2021). For example, a recent study by Wissing et al. (2021) that examined differences in the goals of individuals with high and low levels of wellbeing found that those who had lower levels of wellbeing (i.e., languishing) were more likely to have self-focused and hedonic goals, whereas those with higher levels of wellbeing (i.e., flourishing) were more likely to have other-focused and eudaimonic goals. Such insights within the context of sport would allow researchers to better understand what factors might affect wellbeing, how they might impact on wellbeing, and in what situations.

Further, the subjective and personal nature of wellbeing emphasized by the findings of the present study have implications for how athlete wellbeing is measured. Previously, studies have looked to develop sport-specific measures of wellbeing, such as the Sport Mental Health

Continuum Short Form (SMHC-SF; Foster & Chow, 2018) and the Eudaimonic Wellbeing in Sport Scale (EWBSS; Kouali et al., 2020). However, these instruments take a criterion-based approach to measuring the construct and, given that wellbeing appears to be closely tied to personal values and goals, this approach may not provide an accurate or appropriate way of measuring wellbeing as it does not account for differences in how wellbeing may be understood and judged by the individual; nor does it factor in an individual's aspirations and goals. Based on the current findings, to provide useful and useable results, any measure of athlete wellbeing would need to account for variation in a respondent's personal values and goals that underpin their understanding of wellbeing. In practical terms, this might mean including additional questions around identifying personal values and goals and/or amending the wording of items to encourage respondents to answer in relation to their own specific values and goals, rather than global or societal norms. Another option may be to administer wellbeing measures to the same person multiple times in order to form a baseline against which further within-person comparisons may be made.

Despite the individual variation in how wellbeing was understood, the association of wellbeing with feelings of happiness was similar across participants. This is consistent with the wider psychological literature on subjective wellbeing, in which happiness is considered a core component (Diener, 1984). However, the findings demonstrate that there is another layer of complexity underpinning this, with feelings of happiness related to satisfaction with, and progress in, personal values and goals. One explanation may be that swimmers who achieve their goals and live a life consistent with their values may experience more happiness. This aligns with the self-concordance model (Sheldon & Elliot, 1999) which suggests that autonomously motivated goals are more likely to be attained. Within sport, Smith et al. (2011) found that, for athletes who had goals that were intrinsically regulated and of personal value, goal attainment was associated has been linked to increased positive affect and life

satisfaction. Thus, it appears important that athletes set goals that are meaningful to them, as they will be more likely to achieve these and, thus, may experience higher wellbeing.

In addition to how wellbeing was understood and experienced, the current study provided insight into how the wellbeing levels of high-performance swimmers might be recognized and, importantly, findings highlighted that swimmers' ability to recognize their own wellbeing indicators was often poor, with swimmers noting that they rarely thought about their own wellbeing, unless it became problematic. The lack of awareness around mental health and mental illness related symptoms is not new within sport and is already starting to be addressed through the delivery of Mental Health Literacy (MHL) interventions (e.g., Van Raalte et al., 2015; Liddle et al., 2021). Such interventions have shown to be useful in increasing knowledge around symptoms and signs of common mental disorders, as well as increasing intentions to seek help for a mental illness. However, these interventions are pathology-oriented in that they focus on the identification of, and help-seeking for, mental illness. Whilst it is critical that athletes are able to recognize and seek support for mental illnesses, it is equally important that they are also able to recognize the signs and symptoms of mental health (i.e., wellbeing). By being aware of what wellbeing "looks like" for them, athletes will be better able to recognize and intervene when their wellbeing is declining. In addition, if athletes are aware of what high levels of wellbeing look and feel like for them, they may be better able to reflect on situations that foster and facilitate wellbeing for them.

Practical Implications

In addition to the aforementioned theoretical implications, there are a number of practical implications related to the findings of the current study. First, the findings highlight the need for coaches and practitioners to spend time learning about each swimmer's personal values and goals that may underpin their understanding (and experience) of wellbeing. This is an essential first step in being able to protect and enhance the wellbeing of swimmers as, by

doing this, coaches, practitioners, and other support staff may be able to anticipate when and how a swimmer's wellbeing might be impacted, as well as being able to create an environment that supports swimmer wellbeing. This can be achieved through regular conversations that are not just focused on swimming-related goals, but also swimmers' wider lives, alongside continual observation and reflection by coaches and support staff.

Second, the findings emphasize the importance of developing an awareness of each swimmer's typical behaviors as this may provide an informal way for coaches to assess swimmer wellbeing. For coaches within a high-performance swimming setting, who often spend around 4+ hours a day with their swimmers, it is likely that they already have a good understanding of the typical behaviors of each swimmer. By encouraging coaches to look for changes in these behaviors and use these as a signal to ask the swimmer about their wellbeing, then declining levels of wellbeing may be identified earlier.

Related to wellbeing indicators, increasing self-awareness should be a key focus for sports organizations looking to protect the wellbeing of their athletes. Self-awareness may be developed through the process of self-reflection, and so coaches and practitioners should encourage and provide opportunities for this behavior. However, it is important to note that reflection can lead to rumination, which is associated with lower levels of wellbeing (e.g., Harrington & Loffredo, 2010). As such, athletes should be encouraged to reflect on positive experiences and previously effective strategies, rather than ruminating on negative memories.

Limitations and Future Research Directions

The current study is the first known attempt to conceptualize high-performance swimmers' wellbeing, and the findings provide a unique insight into how wellbeing is understood, experienced, and recognized within a high-performance environment. In conceptualizing the wellbeing of high-performance swimmers, the study has produced some novel findings that would benefit from further investigation. In particular, it would be

beneficial to establish whether increased levels of self-awareness are related to earlier help-seeking behaviors for declining wellbeing. Finally, a more in-depth examination of the factors that influence wellbeing, with a specific focus on how these relate to an individual's values and goals would be useful, as it is only by understanding *how* wellbeing is affected within specific contexts that we can develop targeted interventions, aimed at protecting and promoting wellbeing within high-performance sporting environments (Lundqvist, 2011).

The findings of the present study should be considered within the limitations. Specifically, the study design consisted of one-off interviews with participants and, as such, they offer a snapshot of how wellbeing was understood at that particular time, although the observational data collected throughout the study did allow for contextualization of the interview data and provided an insight in to how participants' understanding of wellbeing was affected within the environment. Even so, future research may wish to adopt a longitudinal focus to explore how swimmers' understanding of wellbeing may change over time.

Conclusion

The current study sought to understand and recognize high-performance swimmers' wellbeing, with the findings encapsulated within two main themes: wellbeing understood and experienced in relation to personal values and goals, and wellbeing characterized by change. Taken together, these findings suggest that wellbeing is a subjective and dynamic experience which is understood in relation to a swimmer's values and goals, experienced via happiness in relation to these values and goals, and recognized via numerous affective, cognitive, and behavioral indicators. In addition to providing some support for the limited extant research in this area, the findings offer some novel insights into athlete wellbeing, specifically regarding the role of personal values and goals in how wellbeing may be understood, and the important role of self-awareness for being able to recognize the person-specific indicators of changing wellbeing levels.

References

Alvesson, M., & Sköldberg, K. (2017). *Reflexive methodology: New vistas for qualitative research*. Sage.

Ashfield, A., McKenna, J., & Backhouse, S. (2012). The athlete's experience of flourishing. *Qualitative Methods in Psychology Bulletin*, *14*, 4–12. https://doi.org/10.1080/10413200.2017.1354339

Braun, V., Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners.* Sage Publications.

Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, *11*, 589-597. https://doi.org/10.1080/2159676x.2019.1628806

Brown, D. J., Arnold, R., Fletcher, D., & Standage, M. (2017). Human thriving. A conceptual debate and literature review. *European Psychologist*, *22,* 167–179.

Brown, D. J., Arnold, R., Reid, T., & Roberts, G. (2018). A qualitative exploration of thriving in elite sport. *Journal of Applied Sport Psychology, 30,* 1–21. https://doi.org/10.1080/10413200.2017.1354339

Bryson, A., Forth, J. and Stokes, L. (2014). *Does wellbeing affect workplace performance?* London: Department for Business Innovation and Skills. https://doi.org/10.1177/0018726717693073

Diener, E. (1984). Subjective wellbeing. *Psychological Bulletin, 95,* 542–575. https://doi.org/10.1037/0033-2909.95.3.542

Dodge, R., Daly, A. P., Huyton, J., & Sanders, L. D. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing, 2*, 222-235. https://doi.org/10.5502/ijw.v2i3.4

Fay, B. (1996). *Contemporary philosophy of social science: A multicultural approach* (Vol. 1). Blackwell.

766 Foster, B. J., & Chow, G. M. (2019). Development of the Sport Mental Health Continuum—
767 Short Form (Sport MHC-SF), *Journal of Clinical Sport Psychology*, *13*, 593-
768 608. https://doi.org/10.1123/jcsp.2017-0057
769 Gouttebarge, V., Frings-Dresen, M. H. W., & Sluiter, J. K. (2015). Mental and psychosocial
770 health among current and former professional footballers. *Occupational medicine*, *65*(3),
771 190-196. https://doi.org/10.1093/occmed/kqu202
772 Gulliver, A., Griffiths, K. M., Christensen, H. (2012). Barriers and facilitators to mental health
773 help-seeking for young elite athletes: a qualitative study. *BMC Psychiatry, 12*,
774 157. https://doi.org/10.1186/1471-244X-12-157
775 Gulliver, A., Griffiths, K. M., Mackinnon, A., Batterham, P. J., & Stanimirovic, R. (2015).
776 The mental health of Australian elite athletes. *Journal of science and medicine in*
777 *sport*, *18*(3), 255-261. https://doi.org/10.1016/j.jsams.2014.04.006
778 Gustafsson, H., DeFreese, J. D., & Madigan, D. J. (2017). Athlete burnout: Review and
779 recommendations. *Current Opinion in Psychology, 16,* 109–113.
780 https://doi.org/10.1016/j.copsyc.2017.05.002
781 Hammond, T., Gialloreto, C., Kubas, H., & Davis IV, H. H. (2013). The prevalence of
782 failure-based depression among elite athletes. *Clinical Journal of Sport Medicine*, *23*(4),
783 273-277. https://doi.org/10.1097/jsm.0b013e318287b870
784 Harrington, R., Loffredo, D. A. (2011). Insight, rumination, and self-reflection as predictors of
785 well-being. *Journal of Psychology, 145,* 39-57.
786 https://doi.org/10.1080/00223980.2010.528072
787 Harrison, J., MacGibbon, L., & Morton, M. (2001). Regimes of trustworthiness in qualitative
788 research: The rigors of reciprocity. *Qualitative Inquiry, 7*, 323-345.
789 https://doi.org/10.1177/107780040100700305

Hone, L. C., Jarden, A., Schofield, G. M., & Duncan, S. (2014). Measuring flourishing: The impact of operational definitions on the prevalence of high levels of wellbeing. *International Journal of Wellbeing*, *4*(1). https://doi.org/10.5502/ijw.v4i1.4

Kansky, J., & Diener, E. (2017). Benefits of well-being: Health, social relationships, work, and resilience. *Journal of Positive Psychology and Wellbeing, 1*, 129–169.

Keyes, C. L. M. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behaviour, 43*, 207–222. https://doi.org/10.2307/3090197

Keyes, C., Dhingra, S., & Simoes, E. (2010). Change in level of positive mental health as a predictor of future risk of mental illness. *American Journal of Public Health, 100,* 2366-2371. https://doi.org/10.2105/AJPH.2010.192245

Kouali, D., Hall, C., & Pope, P. (2020). Measuring eudaimonic wellbeing in sport: Validation of the Eudaimonic Wellbeing in Sport Scale. *International Journal of Wellbeing*, 10, 93-106. https://doi.org/10.5502/ijw.v10i1.776

Kuettel, A., & Larsen, C. H. (2020). Risk and protective factors for mental health in elite athletes: a scoping review. *International Review of Sport and Exercise Psychology*, 13, 231-265. https://doi.org/10.1080/1750984X.2019.1689574

Lang M. (2015). "None of the kids are allowed to eat junk at the pool": Discourses of "optimal nutrition" in competitive youth swimming and the impact of athlete welfare. *International Journal of Sport and Society, 5,* 11-22.

Liddle, S. K., Deane, F. P., Batterham, M., & Vella, S. A. (2021). A Brief Sports-Based Mental Health Literacy Program for Male Adolescents: A Cluster-Randomized Controlled Trial. *Journal of Applied Sport Psychology, 33*, 20-44. https://doi.org/gf7qt9

Lundqvist, C. (2011) Well-being in competitive sports – the feel-good factor? A review of conceptual considerations of well-being. *International Review of Sport and Exercise Psychology, 4,* 109 -127. https://doi.org/10.29359/BJHPA.10.4.20

Mulhall, A. (2003). In the field: notes on observation in qualitative research. *Journal of advanced nursing, 41*, 306-313. https://doi.org/10.1046/j.1365-2648.2003.02514.x

Nixdorf, I., Frank, R., & Beckmann, J. (2016). Comparison of athletes' proneness to depressive symptoms in individual and team sports: Research on psychological mediators in junior elite athletes. *Frontiers in Psychology*, *7*, 893. https://doi.org/10.3389/fpsyg.2016.00893

O'Cathain, A., Croot, L., Duncan, E., Rousseau, N., Sworn, K., Turner, K. M., ... & Hoddinott, P. (2019). Guidance on how to develop complex interventions to improve health and healthcare. *BMJ open*, *9*, 8. https://doi.org/10.1136/bmjopen-2019-029954

Rice, S. M., Purcell, R., De Silva, S., Mawren, D., McGorry, P. D., & Parker, A. G. (2016). The mental health of elite athletes: A narrative systematic review. *Sports Medicine*, *4*, 1333-1353. https://doi.org/10.1007/s40279-016-0492-2

Rubin, H.J. and Rubin, I.S. (2012). *Qualitative interviewing: The art of hearing data* (3rd ed.). Sage Publications.

Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57, 1069-1081. https://doi.org/10.1037/0022-3514.57.6.1069

Sarkar, M., & Fletcher, D. (2014). Ordinary magic, extraordinary performance: Psychological resilience and thriving in high achievers. *Sport, Exercise, and Performance Psychology*, *3*, 46–60. https://doi.org/10.1037/spy0000003

Schwenk, T. L. (2000). The stigmatization and denial of mental illness in athletes. *British Journal of Sports Medicine, 34,* 4-5. http://dx.doi.org/10.1136/bjsm.34.1.4

Sheldon, K. M., & Elliot, A. J. (1999). Goal striving, need satisfaction, and longitudinal well-being: The self-concordance model. *Journal of Personality and Social Psychology, 76*, 482–497. https://doi.org/10.1037/0022-3514.76.3.482

Smith, A. L., Ntoumanis, N., Duda, J. L., & Vansteenkiste, M. (2011). Goal striving, coping, and well-being: A prospective investigation of the self-concordance model in sport. *Journal of Sport & Exercise Psychology, 33*, 124–145. https://doi.org/10.1123/jsep.33.1.124

Stander, F., Rothmann, S., & Botha, E. (2017). Pathways to flourishing of athletes: The role of team and individual strength use. *South African Journal of Psychology, 47,* 23-34. https://doi.org/10.1177/0081246316649095

Sundgot-Borgen, J. & Torstveit, M. K. (2004). Prevalence of eating disorders in elite athletes is higher than in the general population. *Clinical Journal of Sport Medicine, 14,* 25–32. https://doi.org/0.1097/00042752-200401000-00005

Swann, C., Moran, A., & Piggott, D. (2015). Defining elite athletes: Issues in the study of expert performance in sport psychology. *Psychology of Sport and Exercise*, *16*, 3-14. https://doi.org/10.1016/j.psychsport.2014.07.004

Thorne, S. (2004). Commentary by Thorne. *Western Journal of Nursing Research*, *26*, 104–106. https://doi.org/10.1177/0193945903259463

Thorne, S. (2008). *Interpretive description.* Left Coast Press.

Thorne, S. (2016). *Interpretive description: Qualitative research for applied practice*. Routledge.

Thorne, S., Kirkham, S.R. and O'Flynn-Magee, K. (2004). The analytic challenge in Interpretive Description. *International Journal of Qualitative Methods, 3*, 1-11. https://doi.org/10.1177/160940690400300101

Van Raalte, J. L., Cornelius, A. E., Andrews, S., Diehl, N. S., & Brewer, B. W. (2015). Mental health referral for student-athletes: Web-based education and training. *Journal of Clinical Sport Psychology, 9*, 197–212. https://doi.org/10.1123/jcsp.2015-0011

World Health Organization. (2004). *Promoting mental health: Concepts, emerging evidence, practice.* Geneva: WHO.