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Understanding the Career-Ending Injury: A Phenomenological Analysis

Christina M. Rapp

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UNDERSTANDING THE CAREER-ENDING INJURY:

A PHENOMENOLOGICAL ANALYSIS

by

CHRISTINA M. RAPP

(Under the Direction of Daniel R. Czech)

ABSTRACT

Injury is an unavoidable risk and many times a reality in the careers of competitive athletes. While the majority of these injuries will entail some form of rehabilitation followed by a return to play, severe injuries can ultimately end one's athletic career. For example, Kleiber, et al. (1987) discovered that the sole predictor of life satisfaction following an exit from sport was whether one had sustained a career-ending injury. Thus, the purpose of this research project was to qualitatively examine the experience of a career-ending injury through an existential phenomenological perspective. Because phenomenology aims to study how people describe their experiences, it is believed that this design can provide new insight into the athletic injury experience (Shelly, 1999). Data was transcribed and analyzed, and surfacing themes were identified in an attempt to describe the experience. Identified themes consisted of a) emotional response, b) changes, c) coping, and d) current state. These findings suggest that the experience of a career-ending injury may not yet be fully understood, however, support for prior injury research was also found.

INDEX WORDS: Sport Psychology, Athletic Injury, Career-Ending Injury, Existential Phenomenology, Phenomenology, Qualitative Inquiry

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A PHENOMENOLOGICAL ANALYSIS

by

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B.A., Georgetown College, 2004

A Thesis Submitted to the Graduate Faculty of Georgia Southern University in
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INTRODUCTION

Participation in sport brings forth actions, emotions, and experiences in athletes that seem to be unique when compared with members of the general population (Taylor & Ogilvie, 2001). Additionally, injury is an unavoidable risk and many times a reality in the careers of competitive athletes. Specifically, research has indicated that between 14% and 42% of athletes retire due to serious injuries (Fortunato & Marchant, 1999). For the elite athlete, a great deal of time and energy is invested in obtaining optimal performance in sport, hence any significant injury is likely to be perceived as a traumatic life event with physical and psychological ramifications (Quinn & Fallon, 1999). While the majority of these injuries will require some form of rehabilitation followed by a return to play, severe injuries can ultimately end one's athletic career. Individuals experiencing these career-ending injuries may have a much harder time dealing with their injury as well as their unexpected exit from sport. Notably, Kleiber, et al. (1992) discovered through a qualitative study that the sole predictor of life satisfaction in the years following departure from formal sport participation was whether one had sustained a career-ending injury.

To date, some of the most important research regarding injured athletes have come from seeking answers to such questions as: Are there injury-prone athletes?; What is the relationship between injury and other life crises?; What can the study of injuries contribute to our understanding of adherence issues in rehabilitation?; and finally, What role does injury play in the career termination of athletes? (Ogilvie & Taylor, 1993). Before targeting these questions, however, a thorough understanding of the psychological response to injury must be gathered. The impact of any significant injury can affect an

athlete in various ways, yet athletes have generally been reported to experience negative emotions post-injury. Among the immediate effects of injury are pain, shock, anger, isolation, humiliation, helplessness, and the feeling of loss (Heil, 1993).

Weiss and Troxel (1986) conducted the first qualitative study to determine an athletes' actual post-injury psychological experience. The most frequently reported responses of ten injured athletes were disbelief, fear, anger, depression, tension and fatigue. Additionally, more serious effects such as phobia, blame, severe depression, guilt, depersonalization, post-traumatic amnesia and post-traumatic stress disorder have been found to result from athletic injury (Heil, 1993). Various self constructs have also been researched in injured athletes and lower self-esteem as well as global self-concept have been found (Chan & Grossman, 1988), with the severity of the injury commonly being a factor in the degree of the effect. Specifically, Smith et al, (1990) conducted a regression-style study involving several psychosocial factors in order to identify moderating influences on injury response. It was concluded that the most significant predictor of post-injury depression was severity of the injury. Knowing this, it can be speculated that career-ending injured athletes will then have a far different experience than injured athletes who return to play.

However, research conducted on career-ending injured athletes is predominantly quantitative and fails to present a holistic understanding of the injured athlete's experience. Additionally, little qualitative work has been found on the unique experience of career-ending injuries which suggests a need for further exploration. By examining the experience in this way, it is anticipated that beneficial contributions will be made to numerous related fields associated with athletic injury and Sport Psychology.

This current study will attempt to build upon the existing quantitative analysis of injury by utilizing a phenomenological methodology. Because this methodology seeks to expand knowledge on unique experiences, career-ending injuries can likely be better understood further with this methodological approach.

In addition to choosing the appropriate methodology for the study, doing the same with theoretical framework is crucial as well. The following explains the reasoning for selecting the humanistic framework. The client-centered humanistic framework is focused on treating individuals as unique human beings rather than objects (Hill, 2001). Because career-ending injured athletes are unique, staying within this specific framework will ensure that individual human experiences are being investigated. This qualitative framework should assist practitioners by providing a more thorough understanding of the effect career-ending injuries have on competitive athletes.

A more thorough understanding may provide practitioners with the necessary information to assist these athletes with understanding and utilizing coping mechanisms that may differ from those used by injured athletes that return to play. Also, a better understanding of the experience of career-ending injuries is necessary to help practitioners understand the lived experience of these catastrophic events. Because little work has been found specifically on injuries that end playing careers (most research targets injuries in general without distinguishing which kind) additional first hand accounts will lead to a clearer understanding of what this lived experience really is.

PURPOSE OF THE STUDY

The purpose of this research project will be to examine the experience of a career-ending injury through an existential phenomenological perspective.

METHOD

Instrumentation

In qualitative research, particularly phenomenological approaches, the researcher serves as the most important instrument in the study. For this reason, it is important to fully understand the researcher's thoughts, feelings, and experiences with the phenomenon at hand; career-ending injuries. The following section addresses this personal information.

I am currently in my final year of the Sport Psychology Masters program at Georgia Southern University in Statesboro, Georgia. While my involvement in organized sports dates back to age 5 and continued through collegiate athletics, I remained injury-free for the most part. My few sprained ankles and one broken finger failed to compare to the more severe injuries that I have seen teammates and friends experience over the years. My interest in researching career-ending injuries was sparked upon witnessing a friend tear an ACL and ultimately be forced to exit his football career. My initial thought on this rare experience, or phenomenon, is that there is no preparation for the life-changing event. What I then saw was a wide variety of feelings, thoughts, and behaviors surrounding both the injury as well as the transitional point that it left my friend to deal with. Further, it became evident that career-ending injuries can potentially initiate an informal separation from the comfort and familiarity of teams, daily routines, goals, etc. that were previously held. Based on concern and curiosity, I then decided to research the area further.

Pilot Study

Because the researcher has little knowledge on career-ending injuries, a pilot study was conducted in order to become comfortable with the qualitative interview process as well as ensure that the appropriate research question was being implemented. Interviews with two career-ending injured individuals (both colleagues) were audio taped and transcribed in the same fashion as the main study was carried out. An interview guide was used in the pilot study and referred to only when potential probing questions were needed. As the researcher became fully comfortable with the interview process, the interview guide was utilized less, which is the goal with phenomenological research. In addition, the pilot interviewees were asked to give feedback on the interview process and were encouraged to make suggestions for ways to enhance the study.

Participants

Five elite career-ending injured athletes were purposefully selected as the participants of this study. While a sample size of five may not be powerful enough in traditional studies, in qualitative studies the sample must be judged in context- whether it matches the purpose and rationale of the study (Patton, 2002). Participants were selected by a purposeful sampling technique which seeks information rich cases, in which one can learn a great deal about issues of central importance to the purpose of the research (Patton). Specifically, the career-ending injured athletes will have competed at a post-collegiate level during injury-onset which will alleviate extensive variations within the participant's situation during injury onset. Patton points out that this stratification, or sample within a sample, aims to capture a major variation rather than a common core, and is more than simple typical case sampling.

Procedures

The researcher and the committee members initially gathered names and contact information of potential participants based on personal knowledge of those who meet the above mentioned criteria. Upon identifying four volunteers willing to participate, a cover letter, informed consent form, and demographics questionnaire were sent to each individual and asked to return. Participants were be made aware of the following: (a) the data (interview tapes and transcripts) will not include their name or other identifying information, (b) interview tapes and transcripts will only be seen by the researcher and the researcher team, and then destroyed following completion of the study, (c) their participation is completely voluntary and they may stop the interview at any time, and (d) they would have the opportunity to review the transcripts to ensure validity of the data, if desired. Participants were then contacted in order to decide on a time to conduct the individual telephone interviews.

As in many qualitative studies, data collection took place in the form of in-depth interviews with the participants. The interview question for this study consisted of an open-ended statement to initiate the retrospective retelling of the participants' experience with a career-ending injury: "Tell me about your experience of with an injury that ultimately ended your playing career." According to Patton, this open-ended approach ensures that participants can respond in their own words and also minimizes the imposition of predetermined responses with gathering data. Follow up questions, or clarification probes were utilized in a natural and gentle manner in order to receive more information when necessary. Central to effectively fostering more information from the

interviewee is for the interviewer to convey the notion that the failure to understand is the fault of the interviewer (Patton). Some examples of such questions include:

“You said the experience was _____. What do you mean by _____?”

“I want to make sure I understand correctly, can you give me another example of that feeling?”

“Can you take me through that last emotion once more?”

Interviews were taped by a digital recorder in order for complete, verbatim transcription to take place. In addition, the researcher took notes or “memos” during the interviews as the participants told their stories. Areas of lacking clarity or statements that were mentioned repeatedly were noted in order to gather more information on the significance of these things to the participant. The following recommendations from Patton were used in order to ensure proper interviewing procedures were adhered to:

1. All telephone interviews were conducted at a time agreed upon by the participants as well as researcher. Participants felt comfortable speaking freely about his/her experience during this time.
2. Participants were assured confidentiality, as well as the knowledge that only the researcher and peer debriefers will have access to the interviews and audiotapes.
3. Rapport was developed with each participant via small talk prior to asking the main research question.
4. When necessary, relevant probing questions were utilized in order to facilitate elaboration.

5. Silence was tolerated if necessary, which allows participants to gather and organize their thoughts.
6. Leading questions were avoided during the interview.

Data Analysis

The process of data analysis aims to make sense of the gathered data. The following components are all necessary inclusions specific to qualitative studies: preparing the data for analysis, conducting the analysis, moving deeper and deeper into understanding the data, representing the data, and making an interpretation of the larger meaning of the data (Patton). One of the major stages in phenomenological research is the analysis of interviews (Czech, et. al, 2004). Phenomenological analysis seeks to grasp and elucidate the meaning, structure, and essence of the lived experience of a phenomenon for a person or group of people (Patton).

With several approaches to analyzing phenomenological data available to the qualitative researcher, the question develops as to what method is best suited to the research problem and to the researcher (Moerer-Urdahl & Creswell, 2004). From the thematic analysis, the researcher then provides a description of “what” was experienced in textural descriptions, and “how” it was experienced in structural descriptions (Moerer-Urdahl & Creswell). Textural descriptions are considered and additional meanings are sought from different perspectives, roles, and functions (Moustakas, 1994). By analyzing the collected data in this manner, the objective is to identify and describe the common patterns and similar themes that the participants provide, while also attempting to make meanings of what these patterns and themes mean to the participants. Additionally, Patton notes the fact that the systematic procedures and detailed analysis stops as outlined

by Moustakas are ideal for assisting less experienced researchers. For this reason, the researcher felt comfortable applying this analytical strategy effectively and appropriately in her first phenomenological study. The following approach to phenomenological analysis was implemented, as derived from Moustakas (1995), which focuses centrally on the analytical process itself.

1. Epoche
2. Phenomenological reduction
3. Imaginative variation
4. Synthesis of texture and structure

Epoche

Epoche is the first step in the phenomenological reduction analysis process. In taking on the perspective of *epoche*, a Greek word meaning to refrain from judgment, the researcher looks inside to become aware of personal bias, to eliminate personal bias, to eliminate personal involvement with the subject material, that is, eliminate, or at least gain clarity about, pre-conceptions (Patton). *Epoche* is an ongoing analytical process rather than a single fixed event. The process of *epoche* epitomizes the data-based, evidential, and empirical research orientation of phenomenology (Patton). References to others, their perceptions and judgments must be put aside to achieve *epoche* and only the researcher's perceptions are retained as indicators of knowledge, meaning, and truth (Moerer-Urdahl & Creswell). The suspension of researcher assumptions is done before and during data collection, and is an attempt to depict the study participant's reality (Czech, et al). This transcendental process allows the researcher to continuously remain open to the phenomenon and view it "freshly, for the first time (Moustakas)."

The researcher, fully understanding the importance of this first stage, must continuously seek to gather, grasp, make sense of, and reveal each individual's knowledge of this particular event, regardless of personal insight or feelings. As mentioned, the researcher has not experienced the event in question, which further supports the ability for the *epoche* stage to be thoroughly achieved. Additionally, each transcript is approached as "fresh," and the researcher analyzes each as if it is the only knowledge that she has regarding this experience. Because each individual will present their experience differently, *epoche* ensures the researcher will grasp each in its truest form, with no researcher biases or personal thought projection interfering.

Phenomenological reduction

In this stage the researcher "brackets out" as a means of holding the phenomenon up for serious inspection (Husserl, 1962). In this step, participant's descriptions of their experiences are synthesized and significant statements will be identified within each set of data. Each data set is printed on colored paper (each a different color) and statements are examined one by one. Each seemingly significant statement is then cut out and non-significant statements are filtered out. In inspecting each experience and identifying specific meaningful statements from the participant, an inspection can be explored regarding each individual's experience with this phenomenon. Thus, reducing the phenomenon to various individual experiences, as represented by each colored set of meaning units. Because the researcher has previously divulged herself in each experience, the process of identifying significant statements, or meaning units, becomes much more clear and natural. Knowing how each participant experienced and described their specific career-ending injury, the researcher can ensure that the significant

statements from each will be bracketed out, regardless of how each data set compares and contrasts with the next or the previous data set.

Imaginative variation

Following bracketing, identified meaning units are treated with equal value, spread out for examination, organized into meaningful clusters, and a basic delimitation process eliminates irrelevant, repetitive or overlapping data (Patton). A second removal step is also include in the next step, which takes place once themes have formed more clearly. Again, here in the imaginative variation step the researcher carefully examines the identified significant statements, and then clusters the statements into or meaning units (Moustakas). Through imaginative variation, the researcher develops enhanced or expanded versions of the invariant themes that are possibly emerging among the meaning units (Patton). Because each meaning unit is understood by the researcher, placing similar units together ensures that similar statements among the participants are being placed together appropriately. Additionally, using the notes and memos taken during the actual interviews can always be utilized as a means of validation and triangulation.

Structure then begins to take place as the similar meaning units come together to begin to reveal how these individuals speak of this lived experience of a career-ending injury. Phenomenological analysis involves a “structural description” that contains the “bones” of the experience of the whole group of people studied, a way of understanding *how* participants as a group experience *what* they experience (Moustakas.) In the structural synthesis, the phenomenologist looks beneath the affect inherent in the experience to deeper meanings for the individuals who, together, make up the group (Patton).

Synthesis of texture and structure

This final step includes “an integration of the composite textual and composite structural descriptions, providing a synthesis of the meanings and essences of the experience” (Moustakas). As every significant statement is initially treated as possessing equal value in the previous step, this next step deletes those statements irrelevant to the topic and others that are repeated or overlapping from each individual. Because the researcher continuously maintains an understanding for each individuals lived experience, overlapping meaning units can be removed when the researcher feels that a representation has already been made in a different meaning unit provided by that individual. Additionally, because each individual’s meaning units are represented by a different color, continuous comparing and contrasting ensures that each individual is represented fully in each cluster in which they expressed significant statements.

From this point, the remaining statements are then understood as the horizons or themes of these experiences as a whole. Only then can more specific differentiation between the meaning units that make up the themes can take place in the form of subthemes. Because the themes provide the larger global meaning of what the group experienced as a whole, subthemes represent the variation that existed within these themes. Results presented will further explain and elaborate upon the themes and subthemes that surfaced in the investigation. Additionally, evidence will be provided for these developments which will exist in the words and statements themselves, which Patton claims are the essential ingredients for all qualitative Inquiries.

RESULTS

Using the methodology described in the previous chapter, the interviews of athletes were conducted, transcribed, and placed into themes and subthemes. This allowed the structure of the experience of the career-ending injury in professional sport to be revealed. In addition, this section contains quotes from the participants that are used to illustrate the structure the career-ending injury for the group.

A brief description of each participant is provided below. The participants were five career-ending injured former professional athletes. Four males and one female were included, and they participated in 1) professional baseball, 2) professional football, 3) professional running. All athletes were at the professional level when their injury occurred, and were also at this level upon exiting their particular sport. Additionally, all injuries were sport related and came as a direct result of a game or practice incident, or from overuse.

Table 1 Participant Information

Gender	Sport	Race	Injury	Affiliation
1. Male	Baseball	Caucasian	Rotator cuff tear	MLB
2. Female	Running	Caucasian	Foot fracture	Team NIKE
3. Male	Baseball	African American	ACL tear	MLB
4. Male	Football	African American	Neck fracture	NFL
5. Male	Baseball	Caucasian	Elbow injury	MLB

Upon examining the four interview transcripts both individually and comparatively, the following themes were identified in an attempt to describe the structure of the career-ending injury experience: 1) emotional reaction- the reactions to realizing there would be no return to play, 2) change- acknowledging the various changes that the event initiates, 3) coping- the means for dealing with this unanticipated situation and 4) current state- hindsight as well as thoughts and feelings that individuals currently hold regarding the experience.

Each of these themes contained various subthemes. For the theme of emotional response, the subthemes consisted of a) resistance/bargaining, b) fear/confusion and c) depression. For the theme of change, the subthemes were a) identity/new void b) sport related events/routines, and c) leaving the spotlight/accolades. Subthemes for coping included a) support systems/faith, b) solitude c) acceptance/letting go, and d) appreciation. Finally, the theme of current state consisted of a) lessons learned/hindsight, and b) lingering feelings.

Theme #1: Emotional Reaction

The first theme that emerged from the data pertains to the realization that one's playing career is coming to end, specifically due to an athletic injury. Specifically, each of the participants discussed their emotional response to hearing this news. While all participants mentioned some form of an initial emotional response, they varied slightly on some subthemes. The subthemes were a) resistance/bargaining, b) fear/confusion, and c) depression. Those who could potentially rehab and return talked more about resisting and/or bargaining with themselves as well as doctors and coaches, yet those who knew

the end was inevitable were quicker to mention the depression and/or fear that accompanied their response.

Participant 4 spoke of the initial resistance that he encountered in his emotional reaction:

“I played a long time, so it’s still the game, especially when you still have that, I guess that drive, and you can still run, you can still jump, and all those things like, wow, I really don’t want it to be over.”

Participant 2, also attempting a return following surgery revealed thoughts of bargaining:

“I’m not going to say it’s permanent, I wouldn’t tell myself this was a permanent thing, because I was, I felt like if I told myself it was permanent, it would hurt too much. I was, like okay, I’d just tell myself, you know, that maybe for six months, for three months I’ll walk away. But I don’t think that, I can’t tell myself that this is a permanent thing, or I won’t be able to deal with it. That’s how I got through it in the beginning with the uncertainty.”

Additionally, each participant expressed feelings of fear and/or confusion regarding “what’s next?” as well as a reported feeling of some degree of depression. These two subthemes will be highlighted within the following quotations.

Participant 1 stated feelings of fear and confusion:

“... baseball was my life, you know what I mean, totally. So, when you’re into it at that level, and committed to it with your mind and your body and everything, I was really at a loss,...when I was trying to rebound from surgery, I could see that I wasn’t successful, you know. And I started like, oh God, I was scared. You know, how am I going to turn this around? When you’re an athlete and you’re competitive, you do not want to give up, you know what I mean, under any circumstances. So, you know, in my mind I fought it all the way to the end. I just thought well, I probably was 99% going to recover, but then I had that 1% what if? I always kept that one door open, and then, as I started seeing that it was going to happen, I was, like, oh God, now what? And, when it is your life, so to speak, like I said, it’s scary.”

Participant 4 similarly addressed some confusion that was experienced while awaiting a possible doctor’s verdict of his career being over:

“I guess, just being there and especially in the hospital, you would really think about it when you would go to the doctor’s office. When you’re sitting there, you know, in a doctor’s room and you’re saying like, you know, what will I do next, what am I going to do next? You know, what do I want to do?”

Participant 5 addressed thoughts of confusion as well, supporting the second subtheme:

“Here I am, you know, 32, and I’m thinking to myself what am I going to do when I grow up, you know? You’re supposed to be asking that question when you’re 22 or 25.”

Elaborating on the impact of hearing this news as an elite athlete, participant 3 reported:

“I guess, I mean it’s kind of difficult [to explain] ...but, it’s very depressing, I guess I can say that, you go through a state of depression. I did... that’s the mentality that I think few people can explain. It’s almost as dramatic as you being able to walk and talk and function, and move all your limbs, and then one day you wake up and you can’t.”

Participant 5 addressed the depression as well:

“And being away from family [when realizing his career was ending], and so, you ask if I was depressed, yeah.”

Participant 2 stated:

“I got pretty depressed, I got very sad, because, you know, for my whole life, that was all I’d ever really done. You know, who was I without my running? That’s sort of the mindset I was in.”

Participant 5 expressed the emotional response to realizing his career may end:

“I was very unhappy that, you know, here I was five months ago in the big leagues, ready to make a big league team and now, you know, I’m in triple A and my career is, you know, there’s some doubt about whether I’m going to be able to play again.”

In summary, the first surfacing theme consists of an initial emotional reaction.

Upon being asked to describe their career-ending injury experience, each participant at some point conveyed that the experience sparked some emotional reaction. As presented, the responses had similarities yet there were also varying subthemes that surfaced within the data.

Theme #2: Changes

The second theme that emerged from the participants was a sense of acknowledging the idea of change that accompanies the experience. Each individual addressed this area prior to probing, and were then able to provide further information and explanation upon my request for clarification when needed. Playing professional sports often includes unique environments, schedules, experiences, training regimens, etc. as will be revealed in the data provided. Exiting this lifestyle appears to consist of various opportunities for change, most of which appear emotionally distressing when due to the unexpectedness of the injury. Severity differs, however, as mentioned above due to the possibility of a return to play for certain individuals. Identified during analysis were various thoughts and concerns regarding potential and definite changes that the participants foresaw. Participants provided descriptions of these changes that were now at the forefront. Subthemes within this theme consisted of the following: a) personal identity/new void, b) athletic related events/routines, and c) leaving the spotlight/accolades. The following data will provide support.

Participant 1 began to speak of the new void and thoughts of change:

“That [being at pro level] made it [the change] more difficult, absolutely. At that point, your buy-in is 100 percent. I mean, you’re focusing on it... every other word out of your mouth is probably associated with the game, you’re playing year-round, so, you know, you have no other life... And from a psychological standpoint, was looking for a direction of, okay, what am I going to do for the rest of my life? And, how am I going to deal with this void that I have now, because, I started to try to use placebos, playing softball and things like that, and still, it was nice, but it really wasn’t the same... But in my opinion, nothing matched up to that. That was the ultimate, and you’d have to experience it to understand.”

Participant 3 described the void that entered following the departure from

baseball:

“And I think it’s on that same level, it’s difficult when you have to realize that something that you put so much time into, it’s almost like a part of you dies, you know. And you have to try to find a way to, not revitalize it, because you don’t get that part back, but you have to try to find a way to, I guess, for lack of better words, grow another part of you... And that’s tough for every athlete to deal with and have to think about, but for me, it was almost like a part of me died.”

Participant 2 described the daily routine changes, as well as the identify conflict

following the injury:

“Because it’s something that I did for, God, fifteen years of my life and I’m only twenty-six, so it’s a big chunk of my life. Is the fact that part of me is gone. You’re good at other things, too, that’s not your whole life. You can’t live all of your whole life around this sport... I, um, even to this day I still, that’s one thing that hasn’t completely gone away. It kind of, basically I think for a long time I felt like that might be the only thing I was going to have in all honesty. ...for example when I was in high school, I kind of did just enough to get by with my grades. I didn’t really push myself, and I really pushed myself very much in sports. And so, I felt like, well, I’m really good at sports, and I’m okay if I’m just doing just enough to get by in some other areas. And so, and that’s sort of how I felt even when I was in California, my whole, my number one priority, my whole focus was this team, this running, this whole part of my life. And so when that was gone, I was, like, I felt like I’d done something so half-assed, that I was like, okay, how, I don’t feel like I’m that good at some other things. So what am I good at anymore? Who am I?”

“But even now, when I got back here, I still, that was something I still struggled with, and it took me awhile to just realize, I just never really tried to be dedicated and that good at other things in my life besides running, so it’s really been a huge effort to sort of change my attitude and change the way that I do things in my life without my running.”

Participant 1 spoke on the difficulty of finding the same happiness that he found in

baseball, and realizing the change:

“...but for two years I had probably three or four different jobs, trying to find something that would make me really happy, that I enjoyed, so it was a transient period, moving away from home, bouncing around various cities... And finally just said, okay, you either move on, or it’s time to move on, and you don’t really like what you’re doing now, emotionally the roller coaster and things like that, and finally you beat yourself up enough that you have to pick yourself up and move on.”

Participant 3 continued to speak on the changes that occurred following the injury:

“And so, once I got over the fact that I was out, not going to play again, I just thought of looking for a new challenge. You know, just like sports challenged me, just like I had to be mindful of my food intake, and be mindful of my workouts, different things, I looked for something else, to take on that challenge. I don’t think you ever find anything, really that’s comparable, but there are things out there that you can challenge yourself with... Also, looking into other areas of your life, what else you may be interested in, or where do you need to go to start your new career. I mean all of these things that you never really thought about in detail are now at the forefront, so that’s the learning experience you get. You know, where are you as far as your life? I mean, are you able to step into a job, or are you going to have to start from the ground up?”

Participant 2 spoke on the potential environment change, supporting the second subtheme of changes in sport-related routines:

“So I just said what am I supposed to do? I moved out here for my running. ...I just, I just knew if I was going to live out there and I didn’t get to run, I had to come home. That was sort of what it had to be, because I couldn’t stay out there and live in this environment where it was just so health-conscious, and all around me was running...”

She continued to speak on the training daily routine changes as well as identity issues:

“I completely gave myself a break. I didn’t do anything for probably two months. I just rested. And I’m glad I did that but it was very weird for me. It felt just foreign. It was really hard... you know my body even went through withdrawal when I was not running anymore, I think that was another reason why I was so sad, because my body, and even mentally I was so used to running daily. And, I’m still going to work out, and do my thing, but I’m not going to train with the group right now, I need to rest, mentally and physically. But I missed it, it was extremely hard, especially when all my roommates were runners, all my roommates on the team, and they’re awesome, awesome, awesome girls, but it was so hard when they came home every day from practicing, they’d be talking about it, and I would listen to them and I would talk with them, but part of me ached for it, like I wanted to be out there with them so badly, and they were traveling and competing at all these great places. I was doing that before, but I wasn’t doing it then after the surgery, and so it was a just a huge shock for me, just for my mind and my body, it just, you know, I felt like I didn’t know who I was anymore.”

Participant 3 describes the feeling of leaving the spotlight and sport involvement.

Additionally, he questions his new identity:

“You know, athletes are, they’re very confident, they’re at times cocky, and the people you’re going to have to go and start working with are those same people that bought tickets to come see you play. Then, they were in awe of you, but

now there's nothing to be in awe about. You become a "regular person"... I mean, being an athlete, you're in a position all the time of attention. You're in a position where people want to give you things, and want to do things for you. And once your talent is gone, then you go to a position of almost not important to a lot of people, and that's a hard pill to swallow, and that's a long way down...It's just a big change, you know...I mean being an athlete, and being a professional athlete, having that notoriety sometimes it makes you feel like you are above the law. You know, you don't have to wait in line, most of the time you don't have to pay for your food, you know, people always want to be next to you, people are always telling you that it's okay, and how good you are, you know, how much they need you and how much they miss you, and so you get a false sense of security... I don't mean that to say athletes are better than anybody else, but what athletes do, no one else can do but other athletes, and it's almost like, if you take a successful lawyer, and that's what they know, they know how to win cases, and know the law, and they're good with their clients, and all of a sudden you take their practice away from them, you take their law license away from them, and they have to become a doctor, or they have to go work in a grocery store, that's what I mean by coming down."

Participant 2 expressed the change regarding no longer receiving accolades and being in the spotlight as well:

"I just, it felt good to, to get noticed. I was running well at the time, I was doing all these really great things, it felt good to get the accolade...I'd worked so hard, you know, in high school and college, and finally this time's paying off for me... I liked that part, that was fun for me, I was, like, woo, I ran well, and this is kind of my reward. And, you know, I really struggled with you know with just losing all that."

Participant 4 revealed similar feelings pertaining to the current theme of leaving the sport related events:

"...but it was just knowing that I won't be able to play on Sundays any more, at the highest level of football anymore. You know what, you won't hear the cheers, you won't hear the cheers anymore, you won't run out of the tunnel anymore, your day has come... I guess I just, after my surgery I realized that hey, you know what, no more running out of the tunnel, no more hearing the cheers, no more being in the locker room, none of the jokes. No more being blessed... going to training camp,... I'll be missing all those things. Waking up at 7:00 in the morning, going and eating breakfast with the guys, and I guess just missing some of the things that that you do during camp. You know watching the rookies' show, those kinds of things that you would miss, just, I guess, just the fun in the locker room, hearing some of the jokes, the stories being told in the locker room, and taking the long flights, from the west coast to the east coast."

As revealed in the above data, each participant described one or more feelings of change that accompanied their experience with a career-ending injury. While change

may be expected in a situation such as this, the selected quotations reveal the powerful emotions that are linked with this notion of change. Additionally, as the subthemes reveal, change was experienced and revealed in various ways by the individuals.

Theme #3: Coping

The third theme that emerged from the data was the use of coping strategies by the participants. The individuals all mentioned various strategies that aided in their ability to respond to the experience at hand. There were variations in the specific approaches taken by the participants to cope; however, it was evident that this concept was a large part of the experience for each of them. As will be revealed in the subthemes for this larger theme, it was evident that a large part of this experience is dealt with by incorporating some form of self-analysis, or personal confrontation with themselves in order to fully grasp and deal with the end of one's playing career. Words and descriptions were very powerful and passionate at this point, similar to those of the first theme. Upon analyzing and clustering this coping data, the following subthemes were detected: a) support systems/faith, b) solitude, c) acceptance/letting go, and d) appreciation. As the following data revealed, some individuals reported using only one coping strategy, while others reported using several means for getting through the experience.

The following statements reveal the support systems or religious strength that individuals reported benefiting from:

Participant 2 revealed how her mother and friends were support for her:

“But it was horrible, my Mom was pretty awesome, she flew out and stayed with me for like two weeks and helped me right after I had my surgery and I remember her telling me, she was like, baby, if this is for you, you can come home, and you know, it's all right. You can come home, and you can start over...And I got really mad, I was like, Mom, don't come out here and tell me

this, I can't deal with this right now. It's not over. And she gave me this look, like, yeah it is, you just don't know it yet."

"I had awesome support from my girl friends, that I met running out there, but at the same time, I felt myself starting to pull away from them a little bit, because I felt like if I didn't, I was, it was going to be even harder when I left, because I met some of the most amazing girls out there. And they're still great friends of mine, to this day. Although none of us live in the same state, they're the best people in the whole world."

Participant 2 also revealed thoughts of having faith as a means of coping:

"It was like, I have to keep the faith, because I'm wise doing this, you're making the right decision [leaving running], you have to keep moving forward to get ahead, there's no turning back now. So I just for whatever reason, I just made myself deal with it."

Participant 3 revealed how his faith in God played into his coping, and additionally spoke of his personal support system:

"...and I could get mad at him [the other player], but I'm a tremendous believer in Christ and think that things happen for a reason. And of course, right then, I knew that, it was still hard for me to cope with it. It helped me understand, my faith helped me understand that it happened for a reason... I think it had a lot to do with my faith, and like I said, knowing that I feel like God is going to rule over my destiny."

"And I also have a good support group. My wife and my family were very supportive and encouraging."

"...you know, and that's another thing, you usually try to find another athlete that's been through that situation before, to kind of help you through, because this is a long process."

Participant 4 similarly expressed the role of God in his coping, as well as those in his support system:

"Let me think, let me pray, let me talk to my God and, and figure this out."

"I'm definitely a person who has a very strong faith in God. I believe in God, He can make great things happen for you... I've been taught where sometimes He's going to put you through different tests. He's going to put you through different tests to see how you, how strong your faith is whether or not you're going to give up or you're going to just not believe and you know I think my grandmother, she would always tell me... something I would always read before every game was the 23rd Psalm. You know that passage involved very encouraging words. I think just reading that and having that in my life, I think it was just something that just kept me, that just kept me strong, you know?...I mean, not to give up on life and

not to give up...I guess being raised in the Church that spiritual side of me just, it came out, especially in a situation like this.”

“I guess people like my financial advisor, I guess they say [name withheld] you’re fine, you know, you’re good, don’t worry about it”... and you’re one of the smart ones to do good things with your money, and talking to my attorney, so I had them kind of reassure things, that everything’s going to be fine, and I knew back in the back of my mind, hey, I was fine.”

“Yeah of course, my family was there for me always. My mother would say, “You’re a blessed young man [name withheld]. You played a long time, you’ve helped a lot of people, don’t worry about it, it’s time to go to another phase in your life it’s time to move on.” I think all of that was really coming from everyone...”

“...my financial advisor was saying, “Hey [name withheld], you were one of the smartest ones, you listened, you did good things, financially you did good things, you’re going to be fine, don’t worry about that part, you just, really just get yourself back together health-wise and you’ll be fine. Don’t worry about your finances, just get yourself together. If you don’t play another down, you’re fine.” I guess my attorney was basically [saying] the same thing... You played in the big games, you played in the Super Bowl, and you know, it comes a time, he says a lot of my clients, when they leave the game, they really need to play the game some more because they didn’t do the right things with their finances.”

Participant 2 also took it upon herself to find support in the form of a therapist:

“So I went to some counseling, I really didn’t know how to deal with it, I was like, oh my God... therapy helped. I was in therapy, so that helped.”

Many individuals reported experiencing solitude and as a key component in their coping.

Exemplifying this subtheme are the following quotations.

Participant 1 revealed intense solitude that he experienced upon leaving baseball:

“I went through it alone, I didn’t talk to a whole lot of people about it, I didn’t let on that there was anything bothering me about the lack of baseball, or things like that... but I was definitely carrying that luggage around for about two years. ...this is probably the first time that I’ve ever talked about it with anybody, so it’s a little tough putting into words.”

“So I was raised [to think] those are types of things you keep to yourself, and you know, and you’re a strong enough person that you deal with it yourself. And so it was sort of like when I had to go through it I was used to dealing with emotions and things in my life on my own. I probably, looking back on it, wished I would have opened up to somebody, you know? And talked to somebody about it. ...But again it was just something that I dealt with personally and I didn’t have any erratic behavior or anything like that but I was sad. ...but that’s what I mean, I went through it alone, I didn’t feel that I wanted pity.

Participant 2 expressed feelings of needing solitude as well:

“And so I started to pull away from them, and they even noticed, they were like, are you okay? I was like, yeah. But I knew that I was going to have to... for me it was almost like I pulled myself back inside my own head.”

“...my whole life I was surrounded by training and running, and I just, I couldn't deal with it, I had to distance myself from the whole scene.”

Participant 3 expressed a similar period of alone time:

“You know, during that time it's a lot of free time, and you have time to think about a lot of stuff, and worry about, okay, am I ever going to be able to compete again, or if I am, how good, and who's going to take a chance on me being injured, and yeah, it's a lot that you go through.”

Participant 4 had more time of solitude while awaiting the final decision as to whether he could return to play:

“For six or seven months I really didn't do too much, I didn't enjoy going around my teammates...if I was going to go over there and pick my check up, usually I'd go over when meetings were in, I really didn't want to talk to coaches or anything, it was more just, it was almost like I just really wanted to be to myself... I didn't spend a lot of time around football, I didn't go to the games, I probably spent more time going to see my [brother], I have a younger brother who played. I probably spent more time with him, going to see him play. And a lot of times I would stay in bed a lot, just to be alone, doing a lot of thinking about [how] my neck is going to end, you know, will it heal... it more was that I prayed a lot and, like “I've got to question, God about the situation... you know, some days I wouldn't leave the house sometimes, I could just stay in the house all day...I just really didn't want to be around people. I just didn't want all the questions... But you know when they would even see me, [they would ask] “are you going to have the surgery,” “what do you think,” you know, those questions, just all those questions coming from just different people, it would just, sometimes it would just, just drain me, because I just didn't want to be around people because it was more, I guess I just thought about my career, I didn't want to hear all this, I didn't want to answer their questions, I just wanted, I just wanted to be to myself.”

Another subtheme that surfaced within the coping theme was the notion of getting to a point of acceptance or letting it go. As participants discussed the process of coping, each mentioned acceptance and letting go in various ways. The following quotes represent this subtheme.

Participant 1 mentioned the point at which his void left him:

“You know, there was a piece of me that was missing, but I just sort of got by, got through it, I don’t know if you would call, ignoring it. You know eventually, it just went away...”

“But again, you have two options: either you can succumb to it and just completely come apart, or you can move on. And so I was fortunate enough to get through it?”

Participant 2 spoke of various thoughts and actions that lead her to the point of acceptance:

“It was funny, I would go down to Barnes & Noble and buy these books about, like, the art of letting go, moving forward, not holding onto the past, all these self help books, like, okay, I need to educate myself and maybe, keep my mind open to ways of dealing with this, maybe differently than what I’m doing.”

“It was like, I have to keep the faith, because I’m wise doing this, you’re making the right decision, you have to keep moving forward to get ahead, you know, there’s no turning back now. So, um, I just for whatever reason, I just made myself deal with it... You need to go home and you know, you can start focusing on some other things, you did a good job, go back to school, because I knew at some point I wanted to go back to school, I wanted to be close to my family...”

Participant 4 reflects on this acceptance as well:

“You know, the situation comes where you just have to come to say hey, you know what, it’s over, you’ve got to move on,... you’re blessed to have played, you’ve had a long career and then I said you have to look at the good times.”

Participant 5 discusses acceptance in a reflective manner as well:

“And so, over the years, from that point, I’ve kind of realized that I’m no longer in the playing aspect of baseball, and trying to relate myself to playing. I’m 41 now, so... I look at it as now I’m an alumni, I’m an alumnus. You know, I don’t think I can go back and play. So now, I’ve got a lot more peace with it.”

“I had to take something good out of it, what I took out of this is that, I’m able to see my kids grow up... family life and baseball is not very good, I’m happily married, I get to see my kids, I kiss them every night, good night.”

Participant 3 reported reaching this point fairly quickly, and his understanding of the event:

“You know, it didn’t take me long to start moving on with my life, and knowing that what happened was supposed to happen, and not blaming that guy for it...I

think that everything that happened was supposed to happen... if it wasn't him, it would have been something else; it had to happen some kind of way if it was supposed to happen."

Participant 4 recalled the specific time and place that he experienced a sense of acceptance and letting go:

"You know, the situation comes where you just have to come to say hey, you know what, it's over, you've got to move on, you're blessed to play, you've had a long career and then I said you have to look at the good times... Don't look at it as something negative."

"...I finally came later to a, hey, you know what, it's over and I guess living in California in San Diego and all the sunshine out there, and I think just standing out on my patio one day I just realized that hey, you know what, I'm fine, it's time to move on... it's time to move on, and I guess I just accepted it. Sometimes you talk to yourself. People say they don't talk to themselves but we all do."

Participant 5 reported letting go, which was aided by earning his degree:

"I had, at the time that I got hurt, and I felt like my career was over, I applied for graduate school of business at University of South Florida in Tampa, where I lived, and I was accepted into the program and by 1998, because I was still playing baseball when I got accepted, but every off season I went back and I started business school. So that kind of contributed to it too, because by '96, I was already like halfway through, or maybe a little bit more than halfway through my MBA."

The final subtheme that emerged in the coping theme included the appreciation for the opportunity that individuals used to help them cope. Found continuously within this area of coping was a recurring theme of realizing what they were lucky enough to experience.

This final subtheme is represented by the following:

Participant 1 spoke of taking this approach upon beginning to cope with his exit from injury:

"I tried to spin it by saying hey, I had an opportunity that a lot of people don't get, you know, count your blessings, be fortunate that you did have the opportunity and make the best of it."

Participant 2 took time to address her opportunities and accomplishments as well, which she reported aiding in her coping.

“But I have the memories, I have lots of memories, and that’s something that’ll always be with me. I mean, that sounds kind of corny, but that’s, I’ve got awesome memories of traveling and running all over the United States, and representing Nike. For me, that’s something I thought about as a little kid, so when I actually got there I was so happy I would cry about it. Like it was just, you know, oh my God, this was something I thought about when I was ten, now I’m 23, and I’m like, look where I’m at.”

Participant 3 similarly addressed his appreciation for simply having the opportunity:

“And I’m just thankful for the opportunity that I did get to play, and I took so much from it, that I don’t know if the game could have given me much more, other than heartache and pain. But I just took so much from the learning experience and I was just so thankful to play...”

Upon comparing and contrasting his career-ending injury with others’ participant 4 revealed an appreciation for his opportunity as well as his current health:

“And I think just talking to myself and like, hey you know what, thanking God just for the opportunity... like hey, you’re a blessed young man in a lot of different ways...”

“And I that year I saw where they took another player off, I think it was maybe Michael Irvin, when they took him off of the field strapped down, I thought wow, that could have been me.”

“And, then I saw, I think I saw something else where this other guy, I think he’s actually in a wheelchair. He was in a wheelchair. I’m like, you know what, that could have been you, but you’re still able to walk, you’re able to jump around, you know, still able to do things. You’re not playing on that field anymore, but you’re still able to do things. I think that was how I was able to accept it, just seeing others that, hey, you know what, they’re in a lot worse shape, they’re in a wheelchair and they’re taking those guys off the field strapped down and you didn’t have to put up with those things. So I think one of the things that helped me was saying hey, you know what, I accept it, I accept what’s happened, it’s happened, I still can do things but there’s so many others that can’t.”

Participant 5 mentioned the opportunity in terms of coping assistance as well:

“And, so now that I look at it now, and I say I don’t care if I only had 28 at-bats, or 1 at-bat, I was one of only 7,000 people in the whole history of the game in this country who have ever played baseball, major league baseball. And if you look at it, there hasn’t been, I don’t know what the statistic is, but there’s only been about 6,000, 7,000, 8,000 people that have played major league baseball in the whole history of the game. And I was telling my son yesterday, I’m one of them.”

As the above data reveals, the process of coping with this unique yet unwanted experience appeared to be a very emotional time for these individuals. Ranging from faith and support, to solitude and finally appreciation, there are various approaches that are cited as being utilized in the coping process. Additionally, because this event is unexpected and experienced alone, there is likely no clear path to take when attempting to cope in a healthy manner.

Theme #4: Current State

The final theme described the carryover effect that injuries can have on athletes. At some point(s) in each of the interviews, participants would speak about what the experience was *for* or *to* them later on down the road; a reflection. For example, what their current emotional state is regarding the exit, what they now know that they didn't see at the time and/or how they would have handled it differently. While this is not a direct effect from the injury and/or leaving the sport, because of the consistency in the data, it was clearly a large part of the holistic experience. The aftermath of leaving the sport in this undesirable way spilled over beyond the initial coping that was addressed in the prior theme. Based on the selected quotations, it is evident that the experience is not whole without incorporating the thoughts and reflections that the individuals hold currently. Within this current theme, the subthemes are a) lessons learned/hindsight, and b) lingering emotions.

Participant 1 revealed some hindsight regarding what may have been a healthier approach in responding to the experience:

“It probably would have benefited me to talk to these other guys [who have experienced a CEI], but it was sort of like, hey, you have to concentrate on surviving, and performing, and you can't let that enter your mind, it's a negative, it's a negative thought... I probably, looking back on it, wished I would have opened up to somebody, you know? And talked to somebody about it... I think,

at that stage in my life, I was like, listen, I can handle anything. This isn't a thing, this is nothing, you're strong enough to get through it. Now, now I know better..."

"I guess I'm older, I'm smarter, and I'm probably more open to looking at those types of things, because it's a smart thing to do, rather than muffle through something on your own, but at that time, maybe, subconsciously had I had contacted the guys I played with, it probably would have happened without us admitting it. (Laughter) You know what I mean? ... You know, that we were getting each other through this, but at that time, it would probably have been difficult, for me to admit that I needed help."

"And so, when you do come out, and I think that was, you know, I was sort of fortunate to be [at that age], you know at the time I had gotten out, I was 25, almost 26. I think had it happened earlier, I probably would have taken it, had a lot harder time finding a direction to go into."

Participant 2 mentioned hindsight in this statement about the injury experience:

"Like looking back now, I can see it now [that my career was over], but then, I was just like, no way. I'm gung ho, I'm coming back, you can't tell me any different. That's where I was at the time."

Participant 2 additionally addressed the lessons that were learned as a result of the experience:

"Yeah, it's a very testing, a very testing situation. I learned a lot about, about myself, like how strong I can really be when I have to be."

"...basically it just made my skin a little tougher. Now I know if a tough situation in my life, like that, ever arises again, because it will at some point, then I'll be able to deal with it much better. Not that I even dealt with it bad then, but I just think that I'll be a bit more prepared, you know."

"I learned a lot about my character and just that it's okay to ...be sad about it because it was such a big part of my life."

Participant 3 discussed lessons learned as well:

"And also, me personally, I've never been a bad student. I've never had a problem learning... Kind of like going into an algebra class for the first day. You know, learning the parts of your body, and how things work, just the whole thing that goes with the injury."

"We do, a lot of times, take our bodies for granted. We take walking for granted. Even the average person who's not an athlete, we take walking, we take our motor skills, picking up forks and eating, for granted. We all take those things for granted. And we only really realize how important they are when we can't do them. And we can no longer run, and we can no longer dunk a basketball, we

can no longer be at the height of our athleticism, even not for injuries, people who get older, they begin to realize how much they took for granted, how much they really could do. And how fast they really could run. I think it's something that especially athletes deal with, but I think everybody deals with also."

"And I'm just thankful for the opportunity that I did get to play, and I took so much from it, that I don't know if the game could have given me much more, other than heartache and pain. But I just took so much from the learning experience and I was just so thankful to play..."

Participant 5 shed light on his current thoughts regarding his mentality at the time, providing some hindsight towards the end of the passage:

"And, you know, I knew I was going to get called up. And I felt like at the time, I was young, I felt like if I complained about my elbow to the big leagues, you know that's everybody's dream to make it to the big leagues. You know, you don't have the, I guess, the experience, not the experience, but the maturity to be able to look at it and say, you know, you're good, you're hurt, you've got to take care of your body... And when you put your dream in front of your body or yourself and how you're feeling, well, that could be a problem because, probably what I needed to do was shut it down and take my chances the following year and try to get better."

Participant 1 addressed the idea of still missing the sport currently, and how he still have lingering feelings regarding baseball:

"But, at that point, I reached a pinnacle in my life where that void got smaller and smaller, you know, I was telling [name withheld] that I still have it today, you know, when you watch it and stuff like that..."

Participant 5 mentioned lingering feelings regarding the effect of career-ending injuries and his thoughts on current injury-free individuals:

"... you've got to realize in baseball that death comes to all that play. Whether it's injury, or whatever, even the best players, when their skills deteriorate, their time comes. Because this sport, this game is bigger than any player? Even bigger than Barry Bonds, and one day the angels will come knocking and take him away. And that's just a fact of life. So, you know, what I can say, the thing that gets me is that there's guys in the big leagues now, and a lot of them are grateful, but a lot of them aren't. A lot of them don't realize that for every guy that's playing in the big leagues, there's probably another one or two guys that could have played in the big leagues. But didn't make it because they had a career ending injury, right/wrong time, wrong spot, wrong time, whatever. Maybe not one for one, but there are guys that are out there, and so, you know. But as far as getting over this experience, it was inevitable. Whether it was an injury, or whatever, it happens to everybody. And the exit for most is not a

glorious exit... You know, I wasn't just some fly-by-night guy that got a chance and didn't do it, so he left, I got hurt. That's why I didn't play in the big leagues longer than I did."

Participant 2 provided support for both subthemes of the current state theme in the following statements:

"It was crazy, I started to feel a little bit better, but even then, I still, struggle with it. I could just be out, driving around, or going to work and I'd see a runner, and I'd get really sad... even to this day I still, that's one thing that hasn't completely gone away... And it's still a struggle almost daily, it's, you struggle with your self-esteem, and feeling good about yourself... I'm at this point now, I've just started to make peace with that part of it. But it's still, like I said, it's still hard sometimes."

"But, you know, for the most part, looking back, it was, I just think it was totally meant to end when it did."

"...I've had everything I wanted, and so when I did break my foot, when it finally came to an end, I look back with absolutely no regret, because I did everything that I ever wanted to do. And that was it, so I guess that pretty much sums it up for me."

"I tried everything and anything that was put in front of me to make me deal with it better, to feel better, to get everything, you know, together and I just praise myself, I have no regrets, and I'm happy looking back and I'm very happy that things worked out as they did."

"Now, my life is completely different now, completely! I'm, where I'm at now, I can't imagine going back in training. Where I'm at right now, it's crazy. I'm getting married, I have a full time job, I'm in school, and I'm kind of like, how would I even do it now? I just think everything kind of worked out for itself."

Participant 5 provided a retrospective view on the initial attempt to treat the injury.

Because of the detail and passion included in the passage, this information supports the lingering feelings subtheme:

"And I think all it basically did was get rid of some inflammation, but in retrospect, it didn't really do anything for my injury, because my injury was still there."

"And so, I was so upset, I remember to this day, I remember this, I was in the training room talking on the phone to New York, the front office guy in New York, and I was speaking my mind, I said look, you've got a freaking veterinarian for a doctor, I was pissed...I said, you know, this guy doesn't know what he's doing..."

“You know, so of course with all this discovery, we found out that the January MRI, there was a radiologist who wrote on his report that I had an area of vascular necrosis. He nailed it, he nailed it in January. The doctor that I saw in January never actually saw the MRI report. He never even looked at it. As it turned out that he never even looked at the report. He never called me back when I was in spring training and said Doc, I’m getting a cortisone shot, he never even called me back. Had he called me back, I could have prevented having that shot. He would have said no, don’t get a shot whatever you do. Just rest. This is what you have, tell the doctor this is what you have. You know, it never happened.”

“You know, that, when I came back things were never the same. I came back from that, and they had called up a kid from Double A, he was a quarterback at FSU, but before that he was playing pro ball... You know, I just knew that was the time to say that’s it.”

In summary, this theme consists of the current state of the career-ending injured individuals. The participants reflected on the event and expressed both lingering feelings and emotions, as well as expressed the way in which the experience served to teach them various lessons.

It has become evident through the data that the career-ending injury may be something much more complex than what is commonly assumed. Upon analyzing interviews with individuals who have experienced this personally, four major themes and thirteen subthemes were detected. Using this information, it is imperative to compare and contrast with current available information in order to better understand the holistic, lived experience of a career-ending injury. The following section will address this specifically, with the above surfacing themes being at the core of the examination.

Figure 1 Theme Interrelatedness

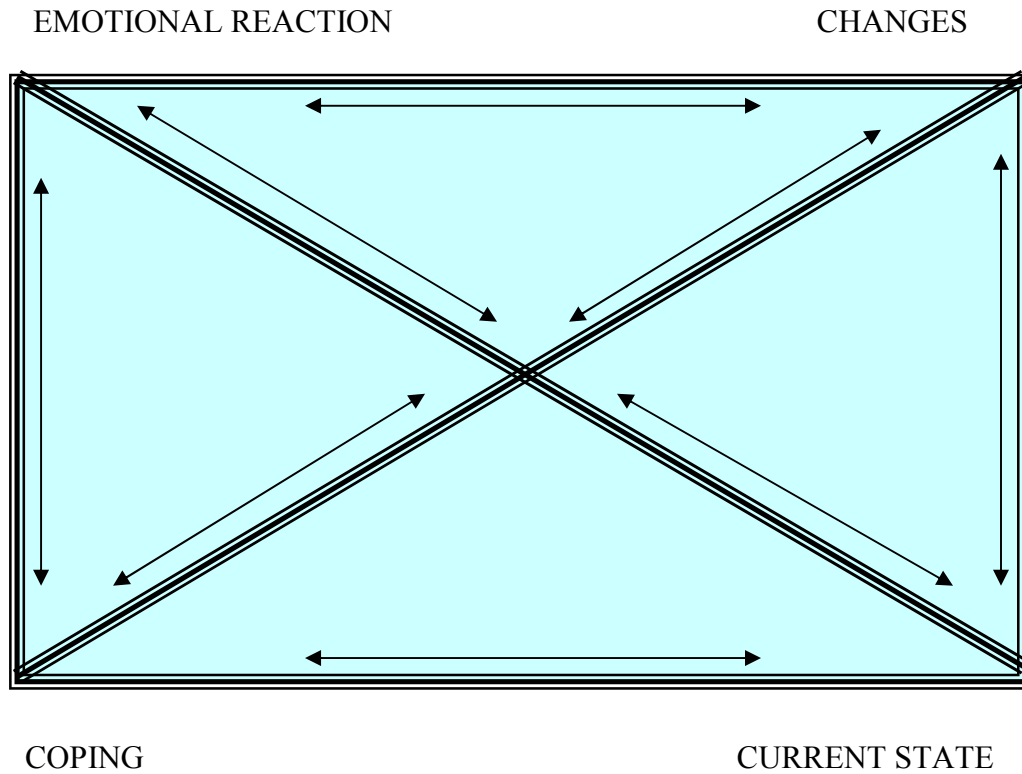


Figure 2 Themes and Subthemes

<p><u>EMOTIONAL REACTION</u> Resistance/Bargaining Depression Fear/Confusion</p>	<p><u>CHANGES</u> Identity/New void Sport related events/Routines Leaving spotlight/Accolades</p>
<p><u>COPING</u> Support system/Faith Solitude Acceptance/Letting go Appreciation</p>	<p><u>CURRENT STATE</u> Lessons learned/Hindsight Lingering feelings</p>

DISCUSSION

The current study examined the experience of career-ending injuries at the professional playing level from an existential phenomenological approach. Transcribed verbatim interviews were analyzed via a thematic analysis in order to describe “what” the experience was and “how” it was experienced. Structural descriptions were utilized to identify similar patterns provided by the participants, which resulted in several major themes. The purpose of the current section is to compare and contrast these themes with the available literature in the area, and also draw conclusions stemming from the data. Individual themes will be investigated, as well as summary information regarding what was revealed by the individuals. Additionally, suggestions for future research will be included.

It is important to describe the passion that was at the center of the interviews. It was not uncommon for the individuals to pause and really try to find the words to describe this experience and to some extent relive it. The difficulties that the participants often described enabled me to understand these emotional reactions. It was not uncommon for the participants to follow up their statements with comments such as “I hope that makes sense to you,” or “It’s hard to put into words.” Additionally, it was evident that certain probing questions sparked old emotions and while it is not revealed in the quotations, there were often pauses to gather thoughts and feelings. This also revealed the power that this experience contained.

Emotional Reaction

The theme of an initial emotional reaction was supported by each of the five individuals who experienced a career-ending injury. The Stress Process Model (Lazarus,

2000) suggests that it is one's perceptions of specific stimuli that can cause a person to feel desirable or undesirable emotional responses. With this in mind, it is not hard to grasp how the unanticipated end to one's playing career is perceived as a negative or saddening event. While it may be seen as a natural reaction to be upset when being faced with this type of situation, it is important to explore the theme fully in order to learn more about the reactions that were reported. These individuals were at an elite level of performing. Because athletes who are not as serious, or as devoted to their sport may experience their departure differently, grasping the experience from only the perspective of the truly elite may shed light on non-traditional emotional responses due to one's elite status at injury-onset. The subthemes that emerged within the emotional response were a) resistance/bargaining, b) fear/confusion and c) depression.

Current sport psychology researchers have investigated these psychological reactions extensively, and the current cognitive appraisal model (Brewer, 1993) is a means for explaining how athletes respond to injury. In this model, it is suggested that an interaction occurs between personal factors consisting of individual characteristics and injury aspects, and situational factors consisting of sport related factors, social aspects, and environmental conditions. Thus, influencing the thought process athletes have about the injury (Wiese-Bjornstal & Shaffer, 1999). This response then influences the emotional response (ie: anger, denial, shock, depression, etc) and the various behavioral outcomes. While this model was traditionally coined for injuries where rehabilitation and a return to play are anticipated, it is interesting to apply this model to the current findings. Since the athletes in this investigation were a) elite professionals and b) not returning to

play, these could be powerful, rare factors that lead to differing emotional responses specific to this population.

Looking specifically at the subthemes, the mentioned factors would understandably lead to the emotional reactions contained in each of the subthemes. As compared to traditional injuries, it is understandable for bargaining and resistance to surface more because the athlete understands that there will be no return to play.

Participant 2 provides a great example of this mentality when she states:

“I’m not going to say it’s permanent, I wouldn’t tell myself this was a permanent thing, because I was, I felt like if I told myself it was permanent, it would hurt too much. I was, like okay, I’d just tell myself, you know, that maybe for six months, for three months I’ll walk away. But I don’t think that, I can’t tell myself that this is a permanent thing, or I won’t be able to deal with it.

The second subtheme provides an understandable reaction in this position as well, fear and confusion. If an injury is experienced yet there is a foreseeable return to play, it can be assumed that less fear and/or confusion will exist due to a “light at the end of the tunnel” concept. However, career-ending injured individuals may know that this chapter of their lives has ended, and the ending was unanticipated. Participant 5 shows this reaction in the following statement:

“Here I am, you know, 32, and I’m thinking to myself what am I going to do when I grow up, you know? You’re supposed to be asking that question when you’re 22 or 25.”

The final subtheme within the emotional response theme is depression. Numerous studies have linked depression within the response models commonly linked with injury (Kubler-Ross, 1969; Weiss and Troxel, 1986), yet little research has been found which as addressed depression with career-ending injured athletes. The current finding of depression supports the models that identify depression as an emotional response to severe injury. Further, being career-ending injured may bring on more depression than a

traditional injury. Additional qualitative investigation in this specific area may yield more revealing insight regarding the possibility. Participant 2 provides a clear depiction of her mindset:

“I was pretty depressed, I was very sad, because, you know, for my whole life, that was all I’d ever really done. You know, who was I without my running? That’s sort of the mindset I was in.”

In the current findings, the above information serves as an understanding for the first theme within the career-ending injury for these individuals, their emotional reaction. Upon examining additional work on immediate effects of injury, as well as other phase processes, there are similarities and differences here. Heil (1993) identified immediate injury effects being pain, shock, anger, isolation, humiliation, helplessness, and the feeling of loss. Heil then proposed the Affective Cycle of Injury that included denial, distress, and determined coping. The themes of the current study differ in this initial phase, and further comparison with this cycle will follow below. Additionally, Rose and Jevne (1993) conducted a qualitative study in which they allowed athletes to speak about their experiences. They identified a four phase process of 1) getting injured, 2) acknowledging the injury, 3) dealing with the impact and 4) achieving a physical and psychological outcome. The current emotional reaction theme identified in the current study appears similar to the second phase of their study, due to the similarities between acknowledging an injury and experiencing the emotional response.

Changes

Following the initial emotional reaction in the first theme of the experience, individuals appeared to experience a sense of change as a result of the injury. When faced with career-termination, elite athletes are required to face a wide variety of psychological, social, financial/occupational threats (Ogilvie & Taylor). The severity of

these threats will then lead to the perception of crisis resulting from the injury. Because these individuals had their lives quickly altered, they conveyed the multiple changes that accompanied the exit from the sport. As stated by Quinn & Fallon (1999), a great deal of time and energy is invested in obtaining optimal performance in sport for the elite athlete, hence any significant injury is likely to be perceived as a traumatic life event with physical and psychological ramifications. As I listened to the first hand accounts, the participants spent a significant amount of time expressing these changes prior to addressing means for coping. Subthemes consisted of a) identity/new void, b) sport related events/routines, and c) leaving the spotlight and accolades.

The findings within this theme appear to support the Sinclair and Orlick (1993) findings regarding the 11 difficulties that athletes may encounter when transitioning from sport. Their study, however, was not looking only at injury-related causes for transition. Also included were transitions due to age, free choice and deselection. Of the 11, the following appear similar to the subthemes of the current study: missing the social aspect, loss of status, and feelings of incompetence in other activities. Because the current study's subthemes were identifiable within these prior findings, this may provide information to help identify ways career-ending injured athletes experience different changes and difficulties upon experiencing a transition away from sport.

The strongest of the subthemes in this theme pertained to a reported new void and struggle with personal identity following the injury. Several previous studies are of interest. Within the athletic identity research, Brewer (1993) identified the strong relationship between athletic identity and depression following injury. The Wiese-Bjornstal et al. (1998) model additionally mentions identity in the first of seven areas that

determine an individual's reaction to injury. Because the athletes in this study were at the highest level, it can be assumed that their athletic identity was fairly strong. The findings then, having revealed that these individuals reported questioning their new identity, support this notion that strong athletic identities will lead to a heightened negative response with the changes that they are faced with.

Participant 1 spoke of this specifically:

“That [being at pro level] made it [the change] more difficult, absolutely. At that point, your buy-in is 100 percent. I mean, you're focusing on it... every other word out of your mouth is probably associated with the game, you're playing year-round, so, you know, you have no other life... And from a psychological standpoint, was looking for a direction of, okay, what am I going to do for the rest of my life? And, how am I going to deal with this void that I have now...”

The second and third subthemes included in this phase, sport related routines/events and leaving the spotlight/accolades, indirectly support available research as well. Due to the lack of specific information regarding these subthemes, however, this may be an area of further investigation specific to this population of athletes.

Professional athletes continue to surpass the normal human being, even the normal athlete in our society. Ogilvie and Taylor (1993) suggest that career termination was not as highly examined until around twenty years ago. They claim that until recently, the lifestyles of elite athletes meshed more with those of normal society. Now, however, salaries have reach record highs and the lifestyle appears to be above and beyond what the average person would ever dream of experiencing. Ogilvie and Taylor go on to address how these salaries and lifestyles further separate the elite and professional athlete from the amateur athlete. With the media, internet, sponsorship opportunities, professional athletes may appear to be in the position that everyone else can only imagine. Leaving this lifestyle due to injury, may then lead to many changes specific to

the sport related events and opportunities, as well as the accolades and spotlight. As participant 3 mentioned in one passage:

“You know, athletes are, they’re very confident, they’re at times cocky, and the people you’re going to have to go and start working with are those same people that bought tickets to come see you play. Then, they were in awe of you, but now there’s nothing to be in awe about. You become a “regular person”... I mean, being an athlete, you’re in a position all the time of attention. You’re in a position where people want to give you things, and want to do things for you. And once your talent is gone, then you go to a position of almost not important to a lot of people, and that’s a hard pill to swallow, and that’s a long way down...It’s just a big change.”

Had this injury occurred *prior* to attaining this level, these specific changes may not have been so prominent within these individuals. Similarly, had a return to play been expected after a traditional injury, these changes may not have been as intense. Future studies could examine how the exit from professional sports, specifically due to a career-ending injury, may trigger an onset of unique changes for these individuals. Further, longitudinal studies examining initial change acknowledgments as compared to later life satisfaction and/or adjustment may be beneficial as well.

Coping

Following the emotional response and change acknowledgement themes, a coping theme surfaced with a salient presence. Modern research on coping and athletic injury is plentiful and it is important to examine the current study in comparison with what has been found to date. According to Cox (2002), any behavior that assists an individual in dealing with a stressful situation is considered to be a coping behavior. Coping for these participants consisted of support systems/faith, solitude, acceptance/letting go, and finally appreciation.

The first coping subtheme to emerge included social support and/or faith when going through this experience. All but one participant spoke of the inclusion of one or

both of these sources for coping with the injury. According to Petrie (1993), social support is one of the important available to athletes to reduce the stress that exists in situations such as injury response. Additionally, Hardy, Crace & Burke (1999) report social support being significantly important in the recovery process as well. Participant 3 supports this concept with the following statement:

“... my family was there for me always. My mother would say, “You’re a blessed young man [name withheld]. You played a long time, you’ve helped a lot of people, don’t worry about it, it’s time to go to another phase in your life it’s time to move on.” I think all of that was really coming from everyone...”

In addition to family and friends that were commonly mentioned, several individuals referred to their faith in God as a source of support as well. Prayer in sport has been an area of increasing interest and has been shown to reduce stress and anxiety (Coakley, 1998). Additionally, Czech et al. (2004) notes the extensive research on the positive effects of prayer and coping with uncertainties. Because career-ending injuries bring on many uncertainties, as highlighted in the previous change theme, prayer could be beneficial in this situation. Further, the noted qualitative study by Czech et al. revealed that athletes who pray often report “God’s will” as being the driving force behind all that they experience, both in and out of sport. Quotations between the two studies had striking similarity relating to this concept, providing strong support for this finding. For example, participant 3 stated:

“...and I could get mad at him [the other player], but I’m a tremendous believer in Christ and think that things happen for a reason. And of course, right then, I knew that, it was still hard for me to cope with it. It helped me understand, my faith helped me understand that it happened for a reason... I think it had a lot to do with my faith, and like I said, knowing that I feel like God is going to rule over my destiny.”

Because the purpose of this study is to better understand career-ending injuries and assist individuals who may experience this at some point in their career, additional

research regarding faith would be beneficial. Specifically, is the stress response the same for those who *do* incorporate prayer versus those who *do not*? Additionally, do these individuals have different perceptions of the career-ending injury based on things such as having God's will in mind? While some information can be gathered and speculated from the current study, because this was not the primary research question additional studies may be beneficial. Additionally, similar work would also provide therapists and sport psychology consultants with more information regarding how those with a strong faith differ from those without in terms of coping mechanisms and transitions.

Solitude surfaced in the coping phase as well, and was mentioned by each individual at least once. Participant 1 revealed the concept of "dealing with it" on his own numerous times, for example:

"I went through it alone, I didn't talk to a whole lot of people about it, I didn't let on that there was anything bothering me about the lack of baseball, or things like that... but I was definitely carrying that luggage around for about two years. ...this is probably the first time that I've ever talked about it with anybody, so it's a little tough putting into words."

Surprisingly, there is little traditional injury research that address the athlete's need for alone time following an injury. This then, creates a question as to whether this is helpful or harmful to the stress response that the individuals experience. This is additionally interesting because of the existential phenomenological approach that this study utilized. Opportunities to clarify and/or elaborate only came after an initial mentioning by the individuals. Specifically, these individuals reported a "need" or desire for that alone time. Participant 4 provided thoughts on this as well:

"...just all those questions coming from just different people, it would just, sometimes it would just, just drain me, because I just didn't want to be around people because it was more, I guess just as I thought about my career, I didn't want to hear all this, I didn't want to answer their questions, I just wanted... I just wanted to be to myself."

Again, further research here would be beneficial in order to identify if this reported and possibly desired solitude and self-serving mentality is specific to elite athletes who experience a career-ending injury. Further, additional qualitative investigations would be beneficial to continue understanding the reported coping and handling of the changes that accompany the experience.

The third subtheme to surface in this theme was acceptance and letting go of the situation. Participants appeared to acknowledge this as an aid in further coping. While some reported attaining this acceptance fairly quickly following the realization that their playing career was over, others appeared to attain their acceptance after a somewhat longer period of time. Participant 3 recalled specifically when he “accepted it”:

“...I finally came later to a [mentality of], hey, you know what, it’s over... and I guess living in California in San Diego and all the sunshine out there, and I think just standing out on my patio one day I just realized that hey, you know what, I’m fine, it’s time to move on... it’s time to move on, and I guess I just accepted it.”

In a phenomenological examination, Coakley (2006) found that those forced to retire due to injury reported a sense of failure regarding their athletic goals. While individuals did not specifically mention much about goal attainment in the current study, this could be a factor with the current theme of acceptance. Because career-ending injured athletes exit unexpectedly it is likely that goals were not viewed as accomplished by the individuals. Coakley also notes, however, that this type of experience does not necessarily lead to distress. The study showed that the experience is often seen as a social rebirth to some individuals. Furthermore, the Kubler-Ross (1969) stages of social death, commonly applied to the injury process, includes a final stage of acceptance. While in the current study acceptance is not the final stage, there is still support shown for the importance and

inclusion of individuals experiencing a sense of acceptance and letting go following a career-ending injury.

The final subtheme included here was a sense of appreciation. In addition to accepting and letting go regarding their injury-induced exit from sport, individuals were aided in coping by appreciating what they were leaving behind. In traditional injuries this is likely not as prominent or essential in the coping process due to the anticipated return to the same lifestyle. With these career-ending injuries, however, it became evident that a strong component in moving on included appreciating all they had experienced prior to their injury. Participant 5 revealed his appreciation in the following statement:

“I say I don’t care if I only had 28 at-bats, or 1 at-bat, I was one of only 7,000 people in the whole history of the game in this country who have ever played baseball, major league baseball. And if you look at it, there hasn’t been, I don’t know what the statistic is, but there’s only been about 6,000, 7,000, 8,000 people that have played major league baseball in the whole history of the game... I’m one of them.”

In a phenomenological study by Shelley (1999), it was suggested that athletes’ perceptions change over the course of the injury recover process. The current study supports this based on the initial emotional reactions theme, as compared to subthemes such as this one where participants gained an appreciation for the opportunities and experiences they had.

Current State

The final theme that emerged included the various reflection-related thoughts and feelings currently held by the individuals. This current state theme appeared important for inclusion because each individual provided various ways in which this experience remains a part of their thoughts and feelings currently. Based on my primary statement

of “Explain to me your experience with a career-ending injury,” individuals consistently included present thoughts and reflections within their statements. This suggested that this experience has a carry-over effect for the individuals and the experience still affects them. The subthemes within this current phase consisted of lessons learned and/or hindsight as well as lingering feelings.

Because studies vary regarding long term affects of career termination issues for professional athletes, the findings from the current theme may provide significant contributing information to what we know. Research reveals that those who have a strong athletic identity tend to have more difficulty with adapting to sport retirement (Brewer, 1983). Because individuals here were at an elite level, it can be assumed that their athletic identity was strong and that they were then susceptible to problems down the road. For example, there are documented accounts of career-ending injured athletes, due to a perceived lack of control, encountering pathologies such as depression, anxiety, substance abuse, and dissociative disorders following their exit (Alloy & Abramson, 1982). While these extreme responses were not mentioned, with the exception of depression, it should be noted that honesty could not be controlled by the researcher. An assumption, as with all qualitative inquiries, was that participants were honest and exhaustive in the interviews.

The first subtheme consisted of hindsight and/or lessons learned regarding the experience. Each individual appeared to have current feelings regarding what they now know about, or gathered from the experience. Participant 5 provided an example of this:

“And, you know, I knew I was going to get called up. And I felt like at the time, I was young, I felt like if I complained about my elbow to the big leagues, you know that’s everybody’s dream to make it to the big leagues. You know, you don’t have the, I guess, the experience, not the experience, but the maturity to be able to look at it and say, you know, you’re good, you’re hurt, you’ve got to take

care of your body... And when you put your dream in front of your body or yourself and how you're feeling, well, that could be a problem because, probably what I needed to do was shut it down and take my chances the following year and try to get better."

Additionally, as revealed in subtheme two, there are apparent lingering emotions regarding the experience and the participants discussed these current thoughts and feelings. While some stated examples of how they still miss their sport, others revealed various emotions such as bitterness and occasionally anger regarding how the experience unfolded. As stated in an autobiographical narrative by a career-ending injured soccer player, "the time when it seems *right* to reflect on what it all meant and understand how the resonance of the sporting past still exists in the lived experiences of the present, it may not occur for a long time" (Gilborne, 2002). This quotation provides further support for the final theme to be one of much importance when examining the lived experience of career-ending injuries. The "experience" appears to be not only the realization of no longer playing, but also the individuals' thoughts, feelings, and perceptions of the event further down the road. As Kleiber and Brock (1992) suggest, the career-ending injury may interrupt the life-narrative that the individuals foresaw for themselves upon entering into the world of sports. Additional studies targeting career-ending injured athletes at a specific amount of years following sport departure may be beneficial for better understand this concept.

Conclusions

The current study examined the experience of a career-ending injury from an existential phenomenological approach, as described by former professional athletes. Surfacing themes consisted of a) emotional response (resistance/bargaining, fear/confusion, depression), b) change (new void, sport related events/routines, leaving

the spotlight/accolades, personal identity), c) coping (support systems/faith, solitude, acceptance/letting go, acceptance), and d) current state (lessons learned/hindsight, lingering feelings). In regards to previous injury research, similarities as well as differences were found. While support for traditional theories, phases and models were addressed throughout the previous section, it is important to understand the contrasts and new areas of interest also. Specifically due to the unique methodology of the study, professionals must approach each new development with the intent of learning more fully what this holistic experience is.

One main area of interest based on this study pertains to the difference between career-ending injuries versus those including a return to play. Much of the available information on coping responses and healthy adjustment are more commonly applied to the latter, in which there is a perceived “light at the end of tunnel.” Career-ending injuries have been described in the past within a “severe” category, yet numerous studies report that that should be examined individually due to their consistent deviations from other injuries. With this in mind, the new themes within in this investigation may present how this type of injury differs. Special attention was given to the numerous and significant changes that came with this injury, as well as the impact of these injuries. Additionally, a choice for solitude was reported in the coping theme. This appeared to be of more importance with these individuals than those of other studies, both quantitative and qualitative. Finally, these career-ending injured participants devoted significant time to speaking of where they are presently regarding their experience. This presents the possibility of career-ending injuries having a far different impact than normal injuries, and thus deserving additional studies similar to this one in order to investigate further.

Because smaller numbers of participants are commonly used in qualitative work, additional first hand accounts would shed more light on the experience.

Based on the results of the study, sport psychology consultants can better understand what this experience may be for individuals that they may work with. By having verbal descriptions instead of statistic-based information, those working with career-ending injured athletes will be more knowledgeable and can likely better identify an entry point for consulting. In addition to consultants, this information can also assist other professional and/or elite athletes. Because all athletes run the risk of encountering this type of injury, having available information regarding how others explain the experience may be beneficial. Because the study centered on existential phenomenology, first-hand, lived experiences are presented which may foster a sense of preparation for what they may experience.

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APPENDIX A
RESEARCH QUESTION, LIMITATIONS, DELIMITATIONS, ASSUMPTIONS, AND
DEFINITIONS

Research Question

What are the thoughts, feelings and perceptions of career-ending injured elite athletes regarding this unique lived experience?

Limitations

1. Retrospective information due to injuries occurring in the past.
2. Participants selected primarily through personal contacts.
3. Results may not be generalizable to other levels of play during injury onset.

Delimitations

1. A small sample size was included in the study.
2. Participants identified through purposeful sampling.
3. Some injuries will be excluded. (ex: spinal cord injuries, brain damage)
4. Participants all experienced injury-onset at professional level.

Assumptions

1. The personal experiences of the selected elite athletes are important in understanding the phenomenon of career-ending injuries.
2. Participants accurately and honestly described the phenomenon in their own words during the interview.
3. Participants were capable of articulating the appropriate information in the interviews.
4. The phenomenological interview is a valid method for gathering a thick, rich description of individual experiences of career-ending injuries.

Definitions

1. Career-Ending Injury- Injury that prevents the athlete from returning to any level of competitive play. (acute or chronic)
2. Elite Post-Collegiate Athlete- Any athlete who has competed beyond the professional level for a minimum of six months.
3. Existential Phenomenology – A means of understanding human experience that is directed by the question: “What is the structure, meaning, and essence of this lived experience for the people involved?” (Kerry & Armour, 2000)
4. Qualitative Data - Direct quotations capturing people’s perspectives and experiences. They capture and communicate someone else’s experience of the world in his or her own words (Patton, 1990).
5. Triangulation - Strategies for reducing systematic bias and distortion during data analysis (Patton, 2002).
6. Phenomenological Interview- A type of interview that attempts to capture the perceived experience of the person in his/her own words.
7. Phenomenological Analysis – Seeks to grasp and reveal the meaning, structure, and essence of the lived experience of a phenomenon for a person or a group of people (Patton).
8. Research Team- Primary advisor and two peers, all experienced and knowledgeable in phenomenological research and data analysis procedures.

APPENDIX B

REVIEW OF LITERATURE

The purpose of this study was to better understand the experience of a career-ending injury as perceived by eight elite athletes. The purpose of the following section is to fully explain the procedures that were carried out in the study. The methodological framework that guided this study is derived from an existential phenomenological approach which is a means of understanding human experience that is directed by the question: ‘What is the structure, meaning, and essence of this lived experience for people involved?’ (Kerry & Armour).

The current study is of the qualitative design which has become increasingly popular due to the potential to yield a direct assessment of the emotional and cognitive perceptions that individuals experience regarding specific experiences. Within the many possibilities within the field of qualitative inquiry, it is essential to clarify the reasoning behind selecting existential phenomenology. Phenomenology is both an abstract philosophy and methodology of qualitative research that deals primarily with the practical aspects of living in the world (Czech, et al, 2004). In applying this methodology, the researcher is interested in gathering rich, detailed descriptions of lived experience that provides insight into the phenomenon and increases the potential for further action and/or research (Boyd, 1993). Because phenomenology is meant to study how people verbally describe their experiences, it is believed that such a design provides new insight into the sport injury experience as well (Shelley, 1999), and can possibly help applied sport psychology consultants with entry points in helping an injured athlete. Understanding this, it is evident that the rare experience of sustaining a career-ending

injury can be more clearly understood by examining the in-depth, rich descriptions of individuals who hold the knowledge of what the experience really is.

Existential phenomenology entails a method of research resulting from the blending of existentialism and phenomenology, two complementary yet distinctive approaches (Valle, King, & Halling, 1989). In existential phenomenology, people are considered holistically and not in a segmented fashion based on the assumption of an indissoluble interrelationship between the human being and his/her world (Czech, et al). This methodology seeks to describe the essence of the experience and the experiencing person in the world, which is accomplished by gathering and interpreting data (Henderson, 1992). In applying this methodology to the current study, the power of participant's consciousness allows the phenomena itself, career-ending injuries, to surface and develop structural clarity via the retelling of lived experiences.

Athletic injuries have existed as long have sports have been played. Likewise, athletic injuries have been an important research area in several fields of sport science. In order to fully understand the reasoning behind the current study, it is imperative that the history of injury-related research be fully understood. As noted, quantitative studies represent the large majority of the research that has been conducted to date. In addition, qualitative means have recently been introduced and implemented as well, shedding new light onto what traditional research has revealed. The following information will highlight all relevant, notable injury-related work in order to gather a chronological, holistic understanding of what has been found to date.

Psychological Response, Coping, and Adjustment

The impact of injury on athletes has been extensively studied (Granito, 2001), with specific investigations into the psychological responses that tend to follow. For athletes, who may derive significant amounts of self-esteem and personal competence from their ability to perform, the injury process can be emotionally devastating (Petitpas, A. & Danish, S. 1995). Coping resources for the injured have been thoroughly examined (Grove et al., 1997, Taylor & Ogilvie, 1994) as well and theorists suggest that adapting to retirement strongly depends on the presence of these resources. Addressing this, Heil (1993) identified immediate injury effects being pain, shock, anger, isolation, humiliation, helplessness, and the feeling of loss. Heil went on to propose the idea that there is a three phase cycle, the Affective Cycle of Injury, involved when coping with injury. The three phases proposed in the cycle are, denial, distress, and determined coping. While some support was found for Heil's cycle, additional interpretations of injury continued to be proposed.

Weiss and Troxel (1986) also attempted to interpret responses to athletic injury by claiming that the injury itself is a stressor and coping resources were needed. They then proposed a four-stage cognitive appraisal model for adjusting to athletic injury. Both situational and personal factors will help individuals assess their ability to deal with the stressor (injury). The appraisal determines the individual's emotion response which, in turn, determines behavioral response. Brewer (1993) suggests that the cognitive appraisal approach offers an explanation for individual's differences in response to injury. Shelley's study (1999) supports the idea of different reactions to injury and found that athletes' perceptions about injury change over the course of the process and

emphasized the importance of the influence of coaches, teammates, and family members on athlete's emotional response.

Previous work shows that links to several theories and cognitive thought processes may apply to the experience; however, there is no sure-fire explanation or obvious model. For example, Rose and Jevne (1993) used a grounded theory methodology with a variety of athletes (amateur, collegiate, and professional) to document the process of the injury experience. They found a four-phase process: 1) getting injured, 2) acknowledging the injury, 3) dealing with the injury, and 4) achieving a physical and psychosocial outcome. As evident, while there are many proposed understandings to what the injured athlete's post-injury process, there appears to be numerous factors and variables within the individuals. This again, is where additional lived experience accounts are needed in order to provide more information. By gathering on the individuals themselves, rather than the injuries, it is possible to better understand athletic injuries.

Athletic Identity

While multiple coping strategies were found to be used, it was also revealed that individuals who maintain a strong and exclusive athletic identity prior to retirement may be vulnerable to career transition difficulties (Brewer). The findings suggest assessing athletic identity may be helpful in identifying athletes who are at risk. Sparking an interest in examining how one's athletic identity has been linked with the psychological response to injury, is the work similar to that of Little (1979). Little revealed that avid exercisers and athletes appear to be predisposed to symptoms of neuroses when they are forced to stop exercising due to illness or injury. It was found that 75% of male athletes

that sought out psychological treatment did so because of injury or illness, where only 10.9% of non-athletes sought treatment for injury or illness.

It appears that once the athletes are essentially removed from their athletic lifestyle they are left to cope with undesired circumstances. Brewer then further revealed the relationship between athletic identity and depression following injury. In this study it was shown that athletes whose identities relied strongly or exclusively on athletic participation were found to report higher feelings of depression. As stated by Despard (2002), many authors before and since have echoed their assertion that athletes should be encouraged to develop broader, more flexible identities in order to avoid potential trauma in the event of injury. Again, this provides an additional factor that must be examined when attempting to understand the injury process. The previously noted coping cycles and psychological responses will likely continue to differ due to the different interpretations that individuals can have regarding an injury. For this reason, the current study attempts to include athletes who will likely hold similar degrees of athletic identity. Additionally, although not all athletes develop one-dimensional identities, it is fair to suggest that a career-ending injury will represent an identity threat to some degree as well (Brown, 1998).

Career Transition and Retirement

The literature on athletic retirement or “career transition” is much smaller than that of athletic injury (Despard). The event of retirement, however, is a normal consequence of sport participation (Sinclair & Orlick, 1993), and it is imperative to understand how career-ending injuries compare and contrast to other forms of career termination. Termination from sport involves a variety of different experiences that sets

it apart from typical retirement concerns. Sport careers are typically shorter than most other careers or occupations, as most athletes retire, voluntarily or involuntarily, during their mid to late twenties. Athletes are often forced to contend with the early age of career termination, the need to find another career to pursue, and the diverse ways in which they choose to or are forced to leave their sport. In response to the apparent significance of the issue of career termination, there has been a small but steady stream of anecdotal, theoretical, and empirical accounts of career termination among athletes using both qualitative and quantitative research methodologies (Lotysz & Short, 2004).

While recent interest has examined the adjustment of these individuals rather than their coping capabilities (which is the interest in injury research), Taylor and Ogilvie (1998) have provided the sole model of retirement in athletes. Their Conceptual Model of Adaptation to Career Transition is a multidimensional, sport-specific model that emphasizes individuality of experience and includes the potential for numerous influential variables related to the sport-career transition of former National Football League players. This model is the only sport-specific model that considers the entire course of the career transition process of elite amateur and professional athletes (Coakley, 2006).

Evidence suggests that most athletes, while they believed that they were prepared for the sport-career transition period, admit that when faced with the retirement event realized that their preparation efforts were inadequate resulting in negative feelings of subjective well-being (Coakley). This alone, then, proposes the question how career-ending injured individuals react to their exit from sports. If those who have simply retired or moved on report having negative feelings, it is likely that an unexpected injury-

induced exit may lead to significantly more intense feelings. Limited studies have been found involving interview-based methods to gather data regarding the experience.

Career-Ending Injuries vs. “Normal” Injuries

After addressing the current injury-related work to date, possibly of greater importance is the clear understanding that all injuries are not alike, as this will be a key point in the current study. Traditional injury-related work predominantly addresses those injuries where some form of rehabilitation is required, followed by a return to play. Additionally, it is not uncommon to see the career-ending injured included in the “severe” category, lumped with individuals who will return to play eventually. However they are not career-ending injured. Obvious questions arise as to whether there is any comparison to these experiences. It is also not uncommon to see the career-ending injured participants removed from studies based on the obvious situational differences between individuals. Much of what we believe to be valid understandings of injured athletes, then, may fail to include these individuals at the most severe end of the spectrum.

Numerous studies have linked more severe injuries with more severe emotional responses, for example Johnston & Carrol (1998) who used a qualitative methodology to do so. By conducting semi-structured interviews with injured athletes, they discovered that the only athlete forced to retire as a result of the injury had the most extreme response. Additionally, they found that positive emotions increase with positive rehabilitation progress, and increased impatience to return to play leads to increased frustration and depression for the athlete. Additionally, multiple studies such as the previously noted Kleiber et al. (1992), suggest that career-ending injured athletes should

be investigated exclusively as well as in-depth in order to fully understand the experience. Also revealing the difference between career-ending injuries and retirement, the work of Lotysz and Short indicated that of all the causes of career termination in athletes (age, deselection, injury and free choice), injury is considered to be the most distressing to the athlete.

In Kleiber and Brock's (1987) initial quantitative study, self-esteem and life satisfaction were compared between injured and uninjured elite athletes. Interestingly, only those athletes invested in playing professionally revealed relatively lower-self-esteem and life satisfaction following their injury. While these measures revealed statistical significance, the authors recommended a more interpretive approach to more fully determine the subjective impact of injury on these athletes. Further, this study "indicates a need for a narrative perspective in the field of sports medicine and medicine more generally. It provides empirical evidence for the need to view illness as a disruption to a life narrative." Interestingly, however, it appears that little work has been done in response to this suggestion, other than continued work by the noted authors.

Specifically, the idea of leaving sport, or sport retirement has been subjected to existing social death theories, particularly the Kubler-Ross (1969) model as a way of understanding injury response. In this five-stage grief model a progression is used to describe a dying person's mental process as they come to accept that something has been lost. Lerch (1982), proposed that the stages, denial, anger, bargaining, depression, and finally acceptance can be applied to this situation due to a traumatic loss of one's "self" that will no longer exist as it once did. Providing support to this idea was the work of Fortunato and Marchant (1999), who conducted a qualitative study and found evidence of

the Kubler-Ross stages within the responses of the injured athletes. Other studies, however, failed to support the five stages and additional models and perspectives were proposed.

As evident, however, these studies have highlighted the concept that the most severe, specifically career-ending injuries, are those which deviate from traditional injuries the most. For example, in a study examining literature on psychological responses of injured athletes as compared to the loss and grief work in clinical literature, Evans and Hardy (1995) note the need for further investigations based on a different experience than traditional injuries (ie: career-ending injuries). Of the limited work conducted on career-ending injured athletes, however, notable findings have resulted. Highlighting the severe impact that a career-ending injury can have on one's subsequent well-being, the findings of Kleiber, et al. are very important in the current study. Sparked by their initial study previously noted, a qualitative approach was taken to better understand athletes recently faced with retirement. It was revealed the only predictor for life-satisfaction following retirement was whether one had experienced a career-ending injury. This study pointed to the career-ending injury as a phenomenon deserving special attention since its occurrence is not uncommon (Brown).

Brown then conducted a grounded theory approach to examine healthy adjustments following career-ending injuries. Brown discovered that adjustment depended on the following four factors: the significance of the loss, strength of coping resources, extent to which each element can be filled after sport, the presence of some direction to pour his/her energy. Brown went on to create a model of healthy adjustment

which included a down period, helpful coping resources, competent feelings, affiliation, physicality, fulfillment, and the central importance of some new passion or challenge.

As this important yet neglected population of individuals continues to be examined, it is important to continuously make advancements in the way we do so. As mentioned, qualitative approaches, while rare in comparison to injury-related quantitative work, provide rich thick descriptions that can provide more insight into the actual experience of the injured athlete. As stated by Brown, very little research, however, has attempted to examine the career-ending injury experience in this manner. In order to fully understand the impact that this experience has on one's life, it is important to allow those with the first-hand knowledge speak about it. Only then will we better understand the phenomenon of career-ending injuries.

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APPENDIX C

IRB APPROVAL

Cover Page

Georgia Southern University Institutional Review Board

For electronic submission: Your proposal narrative should already be completed and saved. Next complete cover page and “Save As” a word document to your computer or disk named “Coverpage_Year_Month_Date_lastname, First initial.doc”. Then open and complete Informed Consent Checklist.

Application for Research Approval

Name of Principal Investigator: Christina M Rapp	Email: CMRapp11@aol.com	For Office Use Only: IRB ID _____ Date Received _____ BY _____
Phone: 5135183180	Address: 1210 Fair Rd Statesboro GA 30458	
Department: Health and Kinesiology	Project Start Date: Sept 1, 2006 Project End Date: Sept 1, 2007	
*Date of IRB education completion: (attach copy of completion certificate)		
Check one: <input checked="" type="checkbox"/> Student <input type="checkbox"/> Faculty/Staff		
If student project please complete advisor's information below:		
Advisor's Name: Daniel Czech	Advisor's email: drczech@georgiasouthern.edu	
Advisor's phone: 9125410318	P.O. Box:	
Department: Health and Kinesiology	All applicants please complete all fields below:	
Project Information:		
Title: Understanding the career-ending injury: A phenomenological analysis		
Project Duration (in months): 12	Number of Participants: 8	
Brief (less than 50 words) Project Summary: The current study will be a qualitative, interview format in order to better understand career-ending injuries. Individuals who have experienced this phenomenon will be interviewed 1:1 in order to gather first hand experiences.		
<i>Please fill in if applicable:</i>		
Name of Georgia Southern or External Funding Source: Personnel and/or Institutions Outside of Georgia Southern University:		
Compliance Information:		

<p><i>Please indicate if the following are included in the study:</i></p> <p><input checked="" type="checkbox"/> Informed Consent Document</p> <p><input type="checkbox"/> Greater than minimal risk</p> <p><input type="checkbox"/> Research Involving Minors</p> <p><input type="checkbox"/> Deception</p> <p><input checked="" type="checkbox"/> Generalizable knowledge (results are intended to be published)</p> <p><input type="checkbox"/> Survey Research</p> <p><input type="checkbox"/> At Risk Populations (prisoners, children, pregnant women, etc)</p> <p><input checked="" type="checkbox"/> Video or Audio Tapes</p> <p><input type="checkbox"/> Medical Procedures, including exercise, administering drugs/dietary supplements, and other procedures</p>	<p><u>IRB Use Only</u></p> <p>Type of Review</p> <p>() Full Board</p> <p>() Expedited</p> <p>() Exempt</p> <p>1st Reviewer:</p> <p>X: _____ Date: _____</p> <p>2nd Reviewer:</p> <p>X: _____ Date: _____</p>
<p>NOTE: <i>All</i> thesis and dissertation work by definition is to create generalizable knowledge.</p>	<p><u>IRB Use Only</u></p> <p>Comments:</p>
<p><i>Signature of Applicant</i></p> <p>X: _____</p>	<p>Date:</p> <p>9/5/2006</p>
<p><i>Signature of Advisor(if student) / Dept. Chair(if faculty)</i></p> <p>X: _____</p>	<p>Date:</p> <p>9/5/2006</p>

Please submit this protocol electronically to the Georgia Southern University Institutional Review Board, c/o The Office of Research Services & Sponsored Programs, P.O. Box 8005. The application should contain a summary of the project, informed consent form(s), instruments, questionnaires, etc. Questions or Comments can be directed to 486-7758 or oversight@georgiasouthern.edu

GEORGIA SOUTHERN UNIVERSITY INSTITUTIONAL REVIEW BOARD
Proposal Narrative

Please respond to the following as briefly as possible, but keep in mind that your responses will affect the actions of the Board. Clearly label your responses in sections that correspond to the specific information requested. You may insert your responses in each section on this page, leaving a space between the question and your answers. Narrative should not exceed 4 pages.

The application should be submitted electronically or 2 duplicate copies sent to the Office of Research Services and Sponsored Programs, at P. O. Box 8005, Statesboro, GA 30460, and should contain, in this order: a signed cover page, the informed consent checklist page, the project proposal narrative, and the informed consent that you will use in your project. Additional information, such as copies of survey instruments, advertisements, or any instruments used to interact with participants should be attached at the end of the proposal clearly designated as an Appendix.

Personnel. Please list any individuals who will be participating in the research beyond the PI and advisor. Also please detail the experience, level of involvement in the process and the access to information that each may have.

The only other individuals that will be involved in this study are the two other people that will be on my board to propose and defend this study as well as a research team that will sign a confidentiality guarantee form before analyzing the interviews. I make seek them out to possibly get another view or opinion on how to do something, but they will not be given any names because the participants will remain anonymous throughout the entire study. They will have access to the transcriptions of the interviews however as mentioned no name will be on any of the transcriptions that is being analyzed or examined.

Purpose. 1. Briefly describe in one or two sentences the purpose of your research. 2. What questions are you trying to answer in this experiment? Please include your hypothesis in this section. The jurisdiction of the IRB requires that we ensure the appropriateness of research. It is unethical to put participants at risk without the possibility of sound scientific result. For this reason, you should be very clear on how participants and others will benefit from knowledge gained in this project. 3. What current literature have you reviewed regarding this topic of research? How does it help you to frame the hypothesis and research you will be doing?

The purpose of the current study is to qualitatively investigate the lived experience of a career-ending injury for elite athletes. By conducting 1:1 interviews with individuals who have experienced this unique phenomenon, it is anticipated that the data will contribute to the limited research that currently exists in this neglected area of sport. Additionally, the injured athletes will be similar in that they all competed at an elite level, which may or may not be a factor in how they experience career-ending injuries. The research question for the current study is: What is the lived experience of a career-ending injury?

Describe your subjects. Give number of participants, approximate ages, gender requirements (if any).

Describe how they will be recruited, how data will be collected (i.e., will names or social security numbers be collected, or will there be any other identification process used that might jeopardize confidentiality?), and/or describe any inducement (payment, etc.) that will be used to recruit subjects. Please use this section to justify how limits and inclusions to the population are going to be used and how they might affect the result (in general).

Five volunteer participants will be included in the current study. These individuals will be selected based on meeting the criteria of having sustained a career-ending injury during their post-collegiate athletic

career. Each participant will have sustained this injury within the past eight years. The expected age range of the participants is 25-35 years of age. Males and females will be contacted for participation, as well as individuals of all races and backgrounds. Subjects will be identified through personal knowledge of the researcher and thesis committee initially based on the above mentioned criteria. If participants are still needed, head athletic trainers will be contacted at colleges and universities in the southeast and asked to submit contact information for possible participants. Individuals will then be contacted, informed of the study via the appropriate informed consent forms, and asked to accept or decline the invitation to participate.

Additionally, two participants were included in a pilot study that was completed in the spring of 2006. IRB approval for the pilot was granted prior to the study. The participants for the pilot will not be involved in the current study; however, the results of the pilot will be utilized and described.

Methodology (Procedures). Enumerate specifically what will you be doing in this study, what kind of experimental manipulations you will use, what kinds of questions or recording of behavior you will use. If appropriate, attach a questionnaire to each submitted copy of this proposal. Describe in detail any physical procedures you may be performing.

Upon agreement to participate, participants will be sent a cover letter, consent form, and demographic questionnaire via the mail. Individual interview times and locations will then be established by an agreement by the researcher and each participant. Classrooms will be used whenever possible, and participants will be encouraged to be comfortable and relaxed. Upon meeting, participants will be reminded of confidentiality, the basis of the study, that the interviews will be audiotaped, and of the estimated length of the interview. Interviews will then be conducted, based on the primary statement of "Please describe to me your experience of a career-ending injury." Additional probing questions will then follow based on the data provided, in an attempt to give the participant ample opportunities to fully and appropriately describe the experience at hand. The researcher will have a pencil and paper and may take notes during the interviews if necessary. Interviews are expected to be no longer than one hour and will end with the researcher asking if there are any other thoughts or comments that they would like to add. At the conclusion of the interviews, participants will be thanked for their participation. Debriefing will not be included.

Data (interview content) will be transcribed verbatim by the researcher. Following transcription, interviews will be emailed to participants for member checking in order to ensure that the data is trustworthy. Data will then be thematically analyzed by subjecting each statement to the question of "What does this information tell us about the experience of a career-ending injury for this individual?" Themes will then be developed within each individual's data based on similar contextual statements. Categories will continue to be developed until remaining data no longer lead to additional, separate categories. The research advisor will be asked to follow the same steps in order to compare similarities and agree on final categories within the data. The same steps will be followed for each of the eight interviews. Following this step, themes from all eight participant's data will be looked at side by side in an attempt to identify similar themes. Final categories will then be developed based on similar themes detected within the participant's data, if existent.

Research involving minors. Describe how the details of your study will be communicated to parents/guardians. If part of an in-school study (elementary, middle, or high school), describe how permission will be obtained from school officials/teachers, and indicate whether the study will be a part of the normal curriculum/school process. Please provide both parental consent letters and child assent letters (or processes for children too young to read).

Non-applicable

Deception. Describe the deception and how the subject will be debriefed. Briefly address the rationale for using deception. Be sure to review the deception disclaimer language required in the

informed consent. **Note:** All research in which deception will be used is required to be reviewed by the full Board.

There will be no deception included in the current study. Participants will be fully aware of the purpose of the current study. Because there will be no important information withheld, participants will not be debriefed.

Medical procedures. There will be no medical procedures involved in the current study.

Risk. There will be no risks greater than minimal in the current study. Minimal risk consists of the possibility of feeling negative emotions as a result of reliving or describing this potentially negative experience.

Cover page checklist: None of the items listed on the cover page checklist apply.

COLLEGE OF Health and Human Sciences

DEPARTMENT OF Jiann-Ping Hsu School of public Health

INFORMED CONSENT

Hello. You are being asked to participate in a study being conducted by Crissy Rapp from Georgia Southern University. I am a current second year graduate student obtaining my Master's degree in Kinesiology with an emphasis in Sport Psychology at Georgia Southern University. The researcher is interested in analyzing the lived experience of career-ending injuries.

The purpose of this research is to interview elite athletes who have experienced career-ending injuries in order to better understand the experience. Participation in this research will include completion of an interview with the researcher. Your interview will be audio taped and transcribed verbatim and you will be given the opportunity to review the transcript and make changes to your comments. You will not be asked your names during the interview so responses will remain anonymous. The audio tapes will be stored in a locked file in the researcher's office. The tapes will be destroyed one year after the completion of the study. The researcher and a professional transcriptionist will be the only people with access to the tapes. The interview will take approximately 60 minutes and will be conducted at a location of your choice. The results of this study may help other athletes as well as professionals by better understanding this unique experience of career-ending injuries.

There are no anticipated risks. There are no direct benefits to you for participating in this research study.

The information that you give in the study will be handled confidentially. Your information will be assigned an alias name. The list connecting your name to this alias name will be kept in a locked file. When the study is completed and the data have been analyzed, this list will be destroyed. Your name will not be used in any report.

You have the right to withdraw from the study at any time without penalty. You may decline to answer certain questions. If you wish to withdraw from the study then tell the researcher who will immediately stop the interview. If you decide to withdraw after data has been collected then contact the researcher who will not destroy the data collected. You will receive no payment for participating in the study.

Participants have the right to ask questions and have those questions answered. If you have questions about this study, please contact the researcher named above. To contact the Office of Research Services and Sponsored Programs for answers to questions about the rights of research participants please email oversight@georgiasouthern.edu or call (912) 486-7758.

You must be 18 years of age or older to consent to participate in this research study. If you consent to participate in this research study and to the terms above, please sign your name and indicate the date below. Your participation in the study is completely voluntary. You will be given a copy of this consent form to keep for your records.

Title of Project: Understanding career-ending injuries: A phenomenological analysis.
 Principal Investigator Christina Rapp, 1210 Fair Road, Statesboro, GA. 30458, 513-518-3180
 CMRapp11@aol.com
 Other Investigator(s): Dr. Dan Czech, P.O. Box 8076, Statesboro, GA. 30458, 912-681-5267,
 drczech@georgiasouthern.edu

 Participant Signature

 Date

I, the undersigned, verify that the above informed consent procedure has been followed.

 Investigator Signature

 Date

CERTIFICATION OF INVESTIGATOR RESPONSIBILITIES

By signing below I agree/certify that:

1. I have reviewed this protocol submission in its entirety and I state that I am fully cognizant of, and in agreement with, all submitted statements and that all statements are truthful.
2. This application, if funded by an extramural source, accurately reflects all procedures involving human participants described in the proposal to the funding agency previously noted.
3. I will conduct this research study in strict accordance with all submitted statements except where a change may be necessary to eliminate an apparent immediate hazard to a given research subject.
 - a. I will notify the IRB promptly of any change in the research procedures necessitated in the interest of the safety of a given research subject.
 - b. I will request and obtain IRB approval of any proposed modification to the research protocol or informed consent document(s) prior to implementing such modifications.
4. I will ensure that all co-investigators, and other personnel assisting in the conduct of this research study have been provided a copy of the entire current version of the research protocol and are fully informed of the current (a) study procedures (including procedure modifications); (b) informed consent requirements and process; (c) anonymity and/or confidentiality assurances promised when securing informed consent (d) potential risks associated with the study participation and the steps to be taken to prevent or minimize these potential risks; (e) adverse event reporting requirements; (f) data and record-keeping requirements; and (g) the current IRB approval status of the research study.
5. I will not enroll any individual into this research study: (a) until such time that the conduct of the study has been approved in writing by the IRB; (b) during any period wherein IRB renewal approval of this research study has lapsed; (c) during any period wherein IRB approval of the research study or research study enrollment has been suspended, or wherein the sponsor has suspended research study enrollment; or (d) following termination of IRB approval of the research study or following sponsor/principal investigator termination of research study enrollment.
6. I will respond promptly to all requests for information or materials solicited by the IRB or IRB Office.
7. I will submit the research study in a timely manner for IRB renewal approval.
8. I will not enroll any individual into this research study until such time that I obtain his/her written informed consent, or, if applicable, the written informed consent of his/her authorized representative (i.e., unless the IRB has granted a waiver of the requirement to obtain written informed consent).
9. I will employ and oversee an informed consent process that ensures that potential research subjects understand fully the purpose of the research study, the nature of the research procedures they are being asked to undergo, the potential risks of these research procedures, and their rights as a research study volunteer.
10. I will ensure that research subjects are kept fully informed of any new information that may affect their willingness to continue to participate in the research study.
11. I will maintain adequate, current, and accurate records of research data, outcomes, and adverse events to permit an ongoing assessment of the risks/benefit ratio of research study participation.
12. I am cognizant of, and will comply with, current federal regulations and IRB requirements governing human subject research including adverse event reporting requirements.
13. I will notify the IRB within 24 hours regarding any unexpected study results or adverse events that injure or cause harm to human participants.
14. I will make a reasonable effort to ensure that subjects who have suffered an adverse event associated with research participation receive adequate care to correct or alleviate the consequences of the adverse event to the extent possible.
15. I will notify the IRB prior to any change made to this protocol or consent form (if applicable).

16. I will notify the IRB office within 30 days of a change in the PI or the closure of the study.

Christina Rapp _____
Principal Investigator Name (typed) **Principal Investigator Signature** **Date**

Dr. Dan Czech _____
Faculty Advisor Name (typed) **Faculty Advisor Signature*** **Date**

***Faculty signature indicates that he/she has reviewed the application and attests to its completeness and accuracy**

Georgia Southern University

Checklist for Developing An Informed Consent Form REQUIRED FOR SUBMISSION

For electronic submission: You should have already completed the proposal narrative and cover page and saved them to your computer or disk. Now complete the Informed Consent Checklist and “Save As” a word document to your computer or disk named “infconchecklist_day/month/yearyourlastname, First initial.doc”. Informed consent, parent informed consent, and/or minor informed consent documents must also be submitted with the proposal narrative, cover page, and informed consent checklist. You may use the informed consent template and sample informed consent documents to assist you in creating these necessary forms. The informed consent documents will also be saved as a word document to your computer or disk named “informedconsent_day/month/yearyourlastname, First initial.doc”, “parentinfconsent_day/month/yearyourlastname, First initial.doc”, and “minorinfconsent_day/month/yearyourlastname, First initial.doc”. After all necessary informed consent documents are completed, please go to the [Forms](#) web page to submit all parts of your IRB application.

The Informed Consent Form must include these required elements:

- Title of the study, exactly as it appears on the human participants application
- Affiliation with Georgia Southern University (clearly identify who you are and your role in project)
- Investigator contact information (and advisor contact information, if investigator is a student)
- Purpose of the study
- Procedures to be followed
- Discomforts or risks (if none are known, state as such)
- Benefits of the study to participants and society
- Duration/timeframe of participation
- Compensation (if applicable)
- Statement that participation is voluntary
- Statement that participants may withdraw their participation at any time (if data collection is not anonymous)
- Statement that participants can decline to answer specific questions, if applicable.
- Confidentiality assurances, procedures (How the data will be kept secure and confidential. Please remember that Georgia is an “Open Records” state and you cannot guarantee confidentiality.)
- Statement that participants must be 18 years of age or older to participate. If subjects are minors, parental consent and minor’s consent is required.
- Signature and date lines (for participants and investigators), unless using *passive consent*
- Connecting page numbers if more than one page (e.g. Page 1 of 2, Page 2 of 2)

- To contact the Office of Research Services and Sponsored Programs for answers to questions about the rights of research participants please email oversight@georgiasouthern.edu or call (912) 486-7758.

*A **parental informed consent form** used when minors are involved must also contain the above elements, but will need to be reworded to reflect that the parents are consenting for their children to participate.

Additional Considerations of Informed Consent:

1. All wording must be at an 8th grade reading level or below. A layperson or someone unfamiliar with your research should easily understand it. Avoid highly technical terms, jargon, etc.
2. Injury clause should be included if any risk of injury exists (physical or psychological): *"I understand that medical care is available in the event of injury resulting from research but that neither financial compensation nor free medical treatment is provided. I also understand that I am not waiving any rights that I may have against the University for injuries resulting from negligence of the University or investigators."*
 *Referral information (including a phone number) for those who wish to seek assistance should also be included (e.g. Counseling and Psychological Services)
3. For surveys that are anonymous, also known as *passive consent*, the Informed Consent Form does not need to be signed, but the following statement must be included. *"Completion and return of the survey, questionnaire, etc. implies that you agree to participate and your data may be used in this research."* (If there is any means of identifying a participant, a signed consent form is required.)
4. If surveys are to be administered electronically, but not anonymously,
 - a. state that there is only limited assurance of confidentiality due to the technology of the Internet;
 - b. space for participants to type their names and the date will replace the signature lines
5. If audio- or videotaping will be used, state:
 - a. where tapes will be stored;
 - b. when tapes will be destroyed (within a definitive timeframe such as "by the year 2005");
 - c. who will have access to the tapes.
6. If deception is involved and the full purpose of the study will not be disclosed to participants until their participation has ended, a statement such as the following needs to be included: *Because the validity of the results of the study could be affected if the purpose of the study is fully divulged to me prior to my participation, I understand that the purpose of the study cannot be explained to me at this time. I understand that I will have an opportunity to receive a complete explanation of the study's purpose following the completion of the study.*
7. Participants must receive a copy of the consent document for their records. Therefore, it cannot be attached to or be part of the instrument.
8. If extra credit or course credit is offered as compensation for participation, the consent form must state what the alternatives to participating are to earn equivalent extra credit or course credit.

9. If compensation is offered, the following statement may need to be included in the consent form, *“If you are an employee of Georgia Southern University, the compensation you receive for participation will be treated as taxable income and therefore taxes will be taken from the total amount. If you are not employed by Georgia Southern University, total payments within one calendar year that exceed \$600 will require the University to annually report these payments to the IRS. This may require you to claim the compensation that you receive for participation in this study as taxable income.”*

****For samples of informed consent forms, please go to the [forms](#) webpage. Do not simply copy a sample if your study is significantly different from the sample provided.**

APPENDIX D
BIOGRAPHICAL SKETCH

Christina M. Rapp

Crissy is originally from Cincinnati, Ohio and has always been involved in the world of athletics. While earning a psychology degree from Georgetown College she was a four year starter on the softball team and set several school records during her career. She additionally played overseas with USA Athletes Inc. for a summer. Crissy has also coached at the collegiate level, been a personal trainer and worked as a baseball and softball private instructor. Always having an interest in the mental side of athletic performance and also coaching, Crissy returned to GSU to earn a Sport Psychology Master's degree. Crissy has served as a Graduate Teaching Assistant, teaching several body conditioning and volleyball courses each semester. While at GSU she has gained consulting experience working primarily with football players, equestrians, the GSU softball program, and also exercise adherence clients. Crissy is an active member of GAHPERD and the Association of Applied Sport Psychology, in which she is currently working towards certification. Following graduation, Crissy will be moving to Atlanta to continue providing mental conditioning services for student athletes.