Experiences of pain and injury in male and female artistic gymnastics:

A figurational sociological study

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A thesis submitted in partial fulfilment of the requirements for the degree of

Doctor of Philosophy

Loughborough University

Supervisors

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2015
Abstract

Several studies using a sociological approach identified the existence of a culture of risk in sport. These works studied professional, amateur, male and female sport figurations and concluded that this culture of risk enmeshes athletes to practice and compete while in pain and when injured. Particularly, studies about gender acknowledge the existence of similar male and female experiences of pain and injury. However, these studies separately studied male and female sports. No work to date has studied within the same research design athletes’ and coaches’ perceptions about pain and injury experiences and how they are negotiated and socialized. Thus, this study sought to explore whether male and female experiences of pain and injury really are similar, or whether differences would become evident through a study which involved a more direct comparison. The research design of this study was informed by figurational sociology. Data for this work were firstly gathered during 9 months of overt-observation. By including observational notes from the interactions between 11 male athletes, 13 female athletes, 3 coaches of the male team, 3 coaches of the female team and 2 physiotherapists, this research provides a more adequate understanding of the gymnastics figuration, its interdependences and power fluxes. Additionally, 9 male athletes, 8 female athletes, 3 male team coaches and 2 female team coaches were interviewed. Data collected in this research is in accordance with sociological literature about pain and injury in sport. All athletes revealed a willingness to continue training and competing even when injured and in pain. However, data also revealed gendered differences about how male and female athletes are enmeshed in the culture of risk. Particularly, gendered differences were found in the training
environment, coach-athlete power differences, body control, socialization processes and in male and female athletes' expressions of pain and injury. Thus, this research raises several questions about the value of sociological studies of gender in sport that approach male and female experiences separately, as gender is sociologically created through male and female interdependence.

Key words: pain and injury; gender; gymnastics; figurational sociology.
Acknowledgments

Successfully completing a PhD is my long time desire. However, this thesis would have never been completed without the key help and support of several people. Here is where I have the chance to express my overwhelming gratitude! I wish to thank and dedicate this thesis to everyone who has played a role in my academic life. However I would like to make some special references.

Dominic, it is impossible to describe how much gratitude I have for what you have done for me. Yes, you were my supervisor, you constantly read and commented my works, you were always available to talk and to respond to my emails and you really helped me to improve and complete my thesis. But to be truly honest, I feel that you were much more than that! You have done for me, what very few friends do. To me, you are what the expression ‘you have been always there for me’ means. You guided me when I was lost and you showed understanding when I was full of work. But, and as a truly friend also does, you also had congratulation words when I was able to improve my work! And finally, you always received me so well when we met at Loughborough. I feel honoured for having the opportunity to work with you Dominic.

Claudia, when did our journey start? Back in 2007? Well, I really feel that this was a “we” journey. You were the first person to encourage me to start studying abroad. But more than that, you were the first person to believe in what I could accomplish. Since then, you have been an anchor in my life, giving me friendly advice and helping me in several aspects. What I wish is that our journey will continue for a long time!
Dr. Ivan Waddington, your role as my MSc supervisor allowed me to have the opportunity to know you. I will never forget how much you helped me, our meetings and how friendly you have always been! You will always be an example for me, that no matter our position/status, what truly defines us is how much we respect and how much we are able to dedicate ourselves for those near us. Thank you so much for everything!

Katie Liston, well when I think about the first time we meet, my face instantly smiles. When you saw me at the door of your office and realized that I booked a flight to Chester so we could talk in person, but I did not tell you first! I wish to thank the opportunity you gave me to start studying abroad, cleared my doubts and provided logistic help during my stays.

Rui Resende, it feels like it was yesterday when I asked you if I should apply for a scholarship and you clearly told me to try! Who would guess that I was going to win it and how much your advice changed my life? To me, you are really like family.

Júlia Castro, it would be impossible to think about my PhD journey without mentioning you! You are probable one of the persons that better knows the personal sacrifices I have done during the last years! I will be always there for you!

Paulo Sá, my new desktop partner, you always gave me supportive words and understood my difficulties. It is a pleasure to be your friend and at the same time to work with you!
Paula Romão, I really would like to say thank you for all the support you gave me. You know that I will always do my best!

Teresa Figueiras, I finally made it! Thank you so much for the opportunities you gave me (and hopefully will continue to give), but above all, thank you for understanding how difficult my path has been! Thank you for believing in me!

I would also like to extent my thanks to all my friends. During the last years, my dedication to work denied me the time I would like to spend with you. A special thanks to Carlos Oliveira, Paulo Lopes, Ricardo Cayolla, Rui Bettencourt and Vitor Ferreira!

With specific reference to the empirical dimension of this thesis, sincerest thanks to the Portuguese Gymnastics Federation, athletes, coaches and physiotherapists for their valuable time and for allowing me to delve into their lives. It has been a privilege to witness your dedication to gymnastics.

Warmest thanks for my parents. They always gave me strength when I most needed. This PhD is a dream come true not only for me but also for them. I am proud to be able to return the faith they have in me.

Last, but by no means least, to Vânia, my wife, for living through this with me. Your support, encouragement, patience and love are the pillars of my life. I am so sorry for having been unable to give you the attention you truly deserve.
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Chapter 1 – Introduction

1.1 Rationale for the Current Study

Unlike other studies, which focus on the experiences of top international winning athletes (Fasting & Pfister, 2000; Murphy & Waddington, 2007; Roderick, Waddington, & Parker, 2000; Ryan, 2000; Stirling & Kerr, 2007; Stornes, 2001; Theberge, 2008; Warriner & Lavallee, 2008), this study examines gymnastic athletes in a country, Portugal, where international success has been quite limited. According to recent data (Portuguese Institute for Sport and Youth, 2012), gymnastics in Portugal (including all disciplines) is just the 10th most popular sport in the country. Moreover no male or female Portuguese gymnast has ever won a medal in an Olympic competition. In fact, Portuguese artistic gymnastics has only been represented at 11 of the 30 Olympiads to date. More particularly, male artistic gymnasts participated in 6 Olympiads with an aggregate of 11 athletes (2012, 2004, 1988, 1968, 1960 and 1952), and female artistic gymnasts participated in 7 Olympiads with an aggregate of 10 athletes (2012, 1996, 1988, 1968, 1964, 1960 and 1952). The best position a Portuguese artistic male gymnast athlete ever achieved was in London 2012 (placed 35th of 71 athletes). The best position a Portuguese artistic female gymnast ever achieved was also in London 2012 (placed 53rd of 83 athletes). Currently, Portugal has two male and one female gymnasts incorporated in the Olympic project – Brazil 2016. This means that only these three athletes receive specific financial and logistical support in order to obtain the qualifying standard.

Furthermore, in directly observing the training sessions and interviewing male and female athletes from the same sport and at the same competition
level, this thesis provides a more adequate basis on which to try to understand the similarities or disparities in gender perceptions of pain and injury experiences. While there exist several separate studies about pain and injury experiences in male and female athletes, no study to date has explored these experiences within the same research project. This may account for the finding that, in contrast to most analyses of gender and sport and of gender and health more generally, research in the sociology of sport suggests that the pain and injury experiences of male and female athletes are very similar. Assuming that participants will have experienced pain and injury, we will try to understand what they felt during that period, and how this is influenced by gender and the gendered network of relationships of which they are a part. It is also important to understand their perceptions about the differences, if any, in the treatment and reporting of pain and injury between female and male athletes. In understanding these phenomena, it is important to understand the broader gymnastics figuration. Therefore, coaches of the male and female teams will also be interviewed. Once again, the focus will be on how athletes’ acceptance and tolerance of pain and injury is gendered. Accordingly, we seek to observe if their ideas are related to the way they observe and express themselves as male and female athletes.

Indicative of the ubiquity of injury and important role that coaches play in this respect is the following advice published online by the International Gymnastics Federation. This document provides a typology of athletes according to their responses to injury, along with some recommendations to coaches.
Athlete 1: Never Hurt - These athletes have a long history of hard work, are safety and technique conscious, have few previous injuries and really don’t want to be bothered by injury. They are injured rarely and easy to manage.

Athlete 2: Fallen Angel - Their acute injury is usually a fall, hit, cut, twist or “accident”. They get early triage and treatment at the gym for minor injuries or at the emergency room or the doctor’s office for moderate or major injuries. They are more likely to use a sports medicine professional. Solving safety issues and complete rehabilitation before return can prevent a re-injury or a new injury.

Athlete 3: Angel To Be - They are similar to Athlete 2 as they are temporarily injured. The difference is that they may lose their confidence easier and therefore never return to their same level of competition unless you are proactive.

Athlete 4: Too Much Work or I’m Still Hurt - Chronic or overuse injuries have similar symptoms like aching, fatigue, pain with use, often with no specific trauma and usually as a result of repetitive trauma. It commonly affects bones as stress fractures and tendons as slow tears.

Athlete 5: Doesn’t Add Up - There is an odd mechanism of injury, pain is out of proportion or doesn’t fit with other’s description of the injury. They might have a history of multiple previous injuries; maybe they haven’t been with the team long. In some, there may be no objective findings or their findings “don’t make sense”; there may be other issues behind the “injury”. This may not be something you can figure out or fix so the best approach is to be nice, give them a way to leave the gym if they want and let them go or they affect the other athletes.

Athlete 6: Law Suit or Trouble - Preserve, photograph and document any injury including the site, circumstances, safety equipment and get written statements from your staff. If this is all done before they have a lawyer, you are on much firmer ground. Educate your coaches, trainers and staff on safety and risk management to prevent this or limit your liability if something happens. Be nice, be professional and be objective. Learn to recognize potential problem athletes before they occur and gracefully get them out of your gym. (Binder, N/D, p. 3)

According to these recommendations, when facing athletes with recurrent injuries, coaches should try to remove them from the gym, as they may negatively affect other gymnasts.
In sum, this thesis focuses on the Portuguese Artistic Gymnastics national team. It explores gymnasts’ and coaches’ behaviours, perceptions and opinions, in order to better understand what may lead athletes to compete and practice while in pain or injured. Furthermore, this research is designed to illustrate the differences between male and female health perceptions, and the complex ways in which the social relations of gender may impact upon men’s and women’s health within sport.

1.2 Thesis Structure

Chapter Two explores the central theoretical literature on risk, pain and injury in sport, with special focus on sociological studies. It starts by contextualizing athletes’ actions and behaviours within the context of the sport’s network, particularly outlining the culture of risk in sport. Then, it gives a special focus to Nixon’s perspective and definition of the sportsnet, which tries to explain the presence of a risk-pain-injury paradox, with the existence of forces of social control. This chapter also provides several studies that explain and justify the normalization of pain and injury in relation to the growing commercialization of sport. A section about the masculine ethos and sport is also presented. The chapter concludes with an analysis of published studies focusing on female athletes and their experiences of pain and injury.

Chapter Three daws attention to key aspects of gender and sport and gender and health. It discusses not only the idea of male hegemony in sport, but also how this hegemony has been negotiated over time. Thus, one section
is concerned with the disparities of media attention between male and female sport, and how this can reinforce male hegemony. The sections about the social construction of illness and the medicalization process, seek to be a foreword to the discussion about masculinity and health. While the section about masculinity examines how male paradigms can influence them to take more risks during sporting activities. This section also contends that the hyper-masculine stereotype may help to explain why male athletes, especially young males, are less sensible about the healthy risks of their activities. Additionally, the section about illness reporting presents several articles showing that females have lower levels of injury report when facing similar injuries. The last section of Chapter Three provides a discussion about gender and health in work contexts.

Chapter Four develops several key concepts about figurational sociology, as well as several discussions about figurational sociology and the study of gender issues. Thus, the concepts of figurations, process, civilizing process, power, involvement and detachment, and established-outsider relations are explored. The chapter explores a figurational critique of the work of Nixon and the concept of sportsnets. The last sections of this chapter provide a discussion between the feminist and figurational sociologists. The ideas embodied in figurational sociology underpinned this research, both in the theoretical/conceptualization stage, and during the fieldwork and data collection process.

Chapter Five provides an outline of, and a rationalization for, the data collection and research methods employed in this research. It outlines the
philosophical and ethical assumptions underpinning both quantitative and qualitative social research paradigms. It also provides a justification of the use of overt observation and semi-structured interviews from a figural perspective, as well as a discussion of the objectives of data triangulation. Subsequently, it offers an account of how the research was carried out. In particular, it explains the duration of the field research and several strategies used to maximize the depth and validity of data gathered. Finally, the chapter offers a reflective commentary of the field research.

The empirical findings are presented in Chapters Six to Eight. **Chapter Six** provides an appreciation of the specificities of the Portuguese artistic gymnastics national team figuration. Gathering data about several aspects of the athletes’ social life, as well as the medical care, facilities and treatment received, developed a key rationale that helped to understand gymnastics sportsnet and several aspects of the pain and injury culture.

**Chapter Seven** draws attention to the principal findings about male and female athletes’ shared perspectives and experiences of pain and injury. This chapter also includes an analysis of the coaches’ perspectives about the normalization of pain and injury, and how they use pain as way of punishment.

**Finally, Chapter Eight**, focuses on the role of gender in the socialization processes and subsequently different experiences, perspectives and expressions of pain and injury by male and female athletes. The findings presented in this section highlight the importance of studying male and female athletes within the same research project.
As we will see, this research shows that the networks of relations in high level competitive sport enable a particular pattern of power balances which lead to the relatively high tolerance of pain and injury. However, because gender fundamentally structures aspects such as bodily perceptions, training environments and coach-athlete relations, expressions of pain and injury, perceptions of recovery time and health, and the access to and use of medical treatment differ markedly between male and female athletes.
2.1 Introduction

In contemporary sport, violence and risk are highly controlled by game laws. However, risk, pain and injury are still present in most sports. It is then relevant to understand how these factors affect athletes’ performance and behaviours. This chapter highlights the key sociological studies of the risk, pain and injury culture in sport, and the different theories and perspectives employed. More specifically, it aims to discuss the culture of risk in sport, as well as how pain and injury are often perceived in the sports context. The work of Nixon and the definition of the ‘sportsnet’ are also explored. Additionally, this section offers a comprehensive overview of works that reflect upon pain and injury and the culture of risk in sport, within different contexts – professional; amateur; male; and female sports.

2.2 The Culture of Risk in Sport

Risk is a concept that is defined by its social and cultural context, and as Dunning (1999) has noted, sport is probably one of the last socially accepted expressions of physical violence and risk in contemporary society. The fact that risk and violence are highly controlled in our daily lives could help to explain why some athletes try to practice sports in which their limits could be tested (Dunning, 1999). This sheds light on the work of Hughes and Coakley (1991), particularly the notion of the ‘culture of risk’ in sport.
Hughes and Coakley (1991) argue that in contrast to a ‘culture of control’, there is a ‘culture of risk’ in sport that can be acknowledged in four key features:

- a willingness to make sacrifices;
- a striving for distinction;
- an acceptance of risk and the possibility/probability of participating while enduring pain;
- and, a tacit acceptance that there is no limit to the pursuit of the ultimate performance.

Athletes’ overconformity to the ‘culture of risk’ that strives for excellence above all, is not seen by these authors as deviant. They contend that athletes “see it as confirming and reconfirming their identity as athletes and as members of select sport groups” (Hughes & Coakley, 1991, p. 311). Hughes and Coakley also assert that not all athletes accept and ‘embrace’ equally the sport ethic. Rather there are two conditions leading to overconformity amongst athletes:

1. Those athletes who have low self-esteem or who, for other reasons, are vulnerable to group demands and less able to withstand pressures to sacrifice themselves for the group;
2. Those athletes who see sport as an exclusive mobility route, and for whom mobility demands an extreme commitment to achievement and a willingness to make great personal sacrifices as they strive for achievement (Hughes & Coakley, 1991, p. 312).

According to these ideas, acceptance of the sport ethic is closely related to the athlete’s insecure personal identity, and their desire to be accepted in the sport context. However, it is questionable whether it would not be preferable to also try to understand athletes’ behaviours in relation to actions, thoughts and customs of other sport network members (see section 4.5 about the Figurations
and the Sportsnet). The authors emphasize the idea that athletes essentially accept the sport ethic in order to pursue their personal identity. This leads them to argue that “it is expected that overconformity to the sport ethic would be more characteristic among men than women (since men are more likely to use sport as an exclusive identity and/or mobility source)” (Hughes & Coakley, 1991, p. 312). However, research suggests that female athletes’ acceptance of the sport ethic appear to be broadly similar to that of male athletes (Charlesworth & Young, 2004, 2006; Cooky & McDonald, 2005; Maguire & Pike, 2003; Malcom, 2006; Nixon, 1994; Pike, 2004, 2005; Ryan, 2000; Theberge, 2006).

Published in the same year, Frey (1991, p. 137) argues that sport is a vehicle by which athletes are socialized to put themselves at risk to reach success. According to Frey, sport emphasizes risk and those “with courage and a willingness to incur a short-term cost such as pain in return for a long-term benefit such as profit or success”. However, it may be questionable if pain is indeed a ‘short-term cost’ in a sporting career. Pain can be, in some cases, a temporary experience. Still, it can also be a sign of severe injury and, if neglected, those injuries can become a long-term or permanent cost. Nevertheless Frey (1991, p. 142) goes on to mention that athletes “rarely have the power to decide what is an acceptable risk”. Therefore, athletes inevitably accept and reproduce coaches’ ideas and directions. According to Frey (1991, p. 142), the idea that “risk is just a part of the game” is just “an excuse for management not to assume any responsibility for the risks faced only by athletes”. This would seem to imply that managers always intentionally aim to transfer risk acceptance to the athletes. But outcomes which no one planned or intended are a commonplace occurrence in everyday social life, thus it is
important to note that one does not have to assume deliberate intent in this regard (Murphy & Waddington, 2007).

Howe (2004a, p. 108) points out that elite athletes regularly deal with risk, “which suggests that in the field of play, when their body is ‘absent’, choices about risks and whether to take them may be unconscious”. This is a different perspective to Hughes and Coakley, emphasising athletes’ ‘full consciousness’ and intentionality in risk taking. While some of the risks taken in sport may be unconscious, they will become objectified and rationalized by the presence of pain and injury when practicing and competing (Howe, 2004a). The culture of risk is present in an elite performer throughout their elite sporting career. However, the author also argues that the risk culture goes beyond elite sport, and “is present in every level of sport” (Howe, 2004a, p. 108). It is then a characteristic enmeshed in all sport competitions. Howe’s (2004a, p. 184) viewpoint is also that only when an elite athlete reaches “a secure position at the highest level can a reliance on risk culture be minimalized”. He goes further, arguing that the risk culture would be easily observable “on an average club with sub-elite aspiring athletes” (Howe, 2004a, p. 184).

Athletes’ propensity to acquire injuries opens the discussion about Kotarba’s (1983) work. Kotarba (1983) discusses the field of athletic injuries and chronic pain, in terms of its potential to compromise athletic identity. He notes that athletes, when in presence of injury or pain, make rational choices based on variables such as “visibility and severity of the injury, age, and the location of the problem in the athletic career continuum” (Kotarba, 1983, p. 137). It is suggested that elite players, due to their participation in sport, are unable to
make a clear distinction between normal and chronic pain. Kotarba (1983) uses the expressions “play with pain” or “injury talk” to develop these two concepts and the options a player has in determining what to do about physical problems. Like Hughes and Coakley (1991), Kotarba notes that players with insecure athletic identities are more susceptible to the culture of pain and injury acceptance. An insecure identity can be based upon such “factors as ethnicity, rookie status, veteran status, low skill level, poor minor league career” (Kotarba, 2004, p. 102). Again, this is a perspective centred on the athlete’s pursuit to construct his/her personal identity and thus marginalizes the impact of the broader relevant social relations.

2.3 The Concepts of Pain and Injury in Sport

Malcolm and Sheard (2002) refer to the important conceptual distinction between pain and injury amongst English rugby players. In this regard, the professionalization of rugby appears to “have entailed an increasing acceptance of playing with pain, but a decreasing tolerance towards playing with injury with its associated risk of longer term physical damage” (Malcolm & Sheard, 2002, p. 154). In the view of a Premiership director of rugby, the ‘ideal’ players are those who are “indifferent to pain but intolerant of injury” in order to prevent the “risk of exacerbating an injury” (Malcolm & Sheard, 2002, p. 154). Malcolm and Sheard highlight that within this context an injury is defined as a condition which restricts playing or training. This perspective is different to the physiological distinction given by Howe (2004a). For Howe, while an injury can be understood as a “breakdown in the structure of the body that may affect its functioning”;
pain is an “unpleasant sensory and emotional experience associated with actual or potential tissue damage” (2004a, p. 74). Therefore, pain is the physical response to injury, acting as a marker to the injured person. However, as a female rower interviewed by Pike described, there coexist three types of pain, “the general masochistic agony each time you train”; “enjoyable pain”; “and your body saying stop, something’s wrong” (Pike, 2005, p. 204). More recently, British dancers in describing pain, tended to distinguish between “good” and “bad” pains; ‘the former being “those which were tolerable and brought on by stretching or training”, and ‘the latter being “those which were unbearable, unexpected, or constant, and would tend to indicate injury” (Tarr & Thomas, 2011, p. 147).

Howe also discusses several types of pain, – “playable and unplayable pain” (Howe, 2004a, p. 75), “public acute pain” “private pain” (Howe, 2004a, p. 76) and also “positive pain” (Howe, 2004a, p. 85) – but largely to identify the potential implications for the athlete’s sporting career. For example, a pain in the shoulder may oblige a gymnast to stop practicing (“unplayable”), while a runner may try to continue competing (“playable”). “Public acute pain” is generally associated with chronic injuries, and these expressions of pain can be witnessed by other sport members during competition and training. On the other hand, “private pain” can be subdivided into “personal experience, where it is not revealed to others at all, and shared private experience, where only individuals close to the sporting performer are aware of the pain the participant is in” (Howe, 2004a, p. 76). On her work on gymnastics, Ryan (2000) contends that athletes tend to develop a ‘code of silence’, not revealing their experiences of pain, which means they avoid talking about what happens inside the sport’s
network. Moreover, a ‘positive pain’ might be desirable in sport, meaning that the training is being fruitful and the performance enhanced. In this case, pain may be a sign of short-term fatigue, and not a severe injury.

Injuries can also be distinguished on the basis of time. The International Rugby Board (2006, p. 5) defines two kinds of injuries:

An injury that results in a player receiving medical attention is referred to as a ‘medical attention’ injury and injury that results in a player being unable to take a full part in future Rugby training or match play as a ‘time-loss’ injury.

This time division in injuries is also described by Roderick (2004) in professional football. In his research he observed that “players conceive of their injuries largely in terms of ‘putting in time’ rather than in terms of the changes which occur physically” (Roderick, 2004, p. 140). He also argues that these conceptions of time “tend to predominate in the minds not only of the players towards injuries, but also of medical personnel” (Roderick, 2004, p. 141). In these discussions, the severity of pain is measured by recovery time; or more precisely, the time necessary to be able to return to competition, which may not be the same as a complete and full recovery.

When exploring sports-related risks, a tendency to overemphasize the physical risks in sport may occur as they are tangible, and have clear consequences for the athlete’s health (Killick, 2007). However, “curtailed involvement in sport may have powerful and significant social implications for the individual” (Killick, 2007, p. 54). Therefore, the risk of damage to social identity may be a potent and commanding factor in the individual’s risk/pain/injury experiences. Thus, whilst an individual’s quest for athletic
identity is considered as an explanation for athletes’ normalization of pain and injuries and the culture of risk, other authors have shifted their emphasis towards the particular structural features of sporting organizations.

Nixon (1992, 1993a, 1994, 1996, 2004), was one of the first sociologists to place significant emphasis on how the network of relationships in sport may pressure athletes to continue competing despite being injured and/or in pain. It is these networks of relationships, with special reference to Nixon's body of research, that we will focus upon next.

2.4 The ‘Sportsnet'

Nixon employs a variant of ‘social network theory’ to systematize and interpret his research in sport, pain and injury. Nixon gives emphasis to the interrelationships within a sport network, attempting to identify and explain the patterns of involvement, the social interactions and the power relations, which may reinforce the culture of risk. In particular, Nixon underlines the webs of interaction between athletes, coaches and medical staff. Nixon (1992) introduced the term ‘sportsnet’ to define the webs of interactions and relations of power, which directly or indirectly link members of the sport social network. These sportsnets help to explain the presence of a “risk-pain-injury paradox” which “rationalizes the risks of athletic participation and normalizes injuries and playing hurt in order to continue competing”, even if the chances of success are diminished (Roderick, 2006b, p. 20). The more deeply athletes are involved in “sportsnets, the more likely it seems that the culture of risk will provide the only
terms or ‘stories’ for them to deal with the risks of pain and injury” (Nixon, 1993a, p. 190). As they become more enmeshed in the sportsnet, the athletes will be likely to be more influenced by other members of the sportsnet. Therefore, “athletes’ efforts to deal with pain and injuries are likely to reflect prominent beliefs from the culture of risk held by coaches, medical practitioners or teammates to whom they turn within their sportsnet” (Nixon, 2004, p. 85). Nixon (1996, p. 83) surveyed (closed questionnaires) male and female athletes of different sports and concluded that “the absence of differences related to the expression of a pain threshold in sport may be attributed to the fact that being injured and playing while hurt are common, expected experiences in sports of all types and at all levels, as the sport ethic implies”. A further conclusion of Nixon’s work is that high level competitive sport “can only exist if athletes are willing to accept the risks of pain and injury, since pain and injury actually are inevitable to some extent in all sports over time” (Nixon, 2004, p. 84). The sportsnet and its ‘culture of risk’, normalize pain and injury, and glorify athletes who are predisposed to play with pain and injuries. Therefore, the "forces of social control, power and institutional rationalisation conspire to constrain or induce athletes to accept the risk and pain of sports injuries" (Nixon, 1994, p. 79). Athletes that have the willingness to make sacrifices for the team and ignore personal consequences playing while in pain and/or injured “are ‘heroicized’ by coaches, team-mates, supporters and the media” (Killick, 2007, p. 55). Those in relatively powerful positions in the sportsnet (such as coaches or club boards) desire to improve the chances of success, encouraging athletes to play and practice through pain and injury. In relation to this, Nixon asserts that those members in relatively powerful positions may, intentionally or not,
“disregard or exploit athletes in pursuit of their own self interest” (Nixon, 1992, p. 133). Nixon (1992, pp. 131-132) identifies that athletes are more likely to become enmeshed in the culture of risk when the networks are

(a) larger (and athletes are more easily replaced); (b) denser (network members have more contacts with each other than with people outside the sportsnet); (c) more centralized in their control over the flow of information and resources; (d) higher in the reachability of athletes to coaches and other authorities; (e) more closed for athletes (or more restricted in permissible contacts with people outside the sportsnet); (f) more homogenous in the transactional content of member relations; and (g) more stable in their social relational patterns.

In sum, Nixon (1992, p. 127) indicates that there is a “conspiratorial alliance” inside the sportsnet that normalizes risk and pain and injuries in elite sport. These webs of interaction reinforce a specific ideology surrounding the image of a successful/ideal athlete from a young age.

### 2.5 Professional Sport and the Normalization of Pain and Injury

While Nixon’s empirical work mainly focussed on college athletes, professional sport has been a field where studies about pain and injury acceptance have regularly been conducted. Waddington (2004) argues that the increasing competitiveness of sport in modern days, leads players to a higher commitment and dedication. This growing competitiveness is according to Murphy and Waddington (1992), associated with an increasing politicization and commercialization of sport. For example, an injury might mean that an athlete will lose their place in the team, and/or miss important competitions, leading to a loss of both income and self-confidence, which is very detrimental for a professional athlete. Professional players are often pressured to show good
results no matter ‘what it takes’, in order to achieve victories and so coaches are associated with several forms of pressure, such as abuses, intimidation and violence (Kelly & Waddington, 2006). This section outlines relevant works on the culture of risk inside professional sport.

Professional sport is, by any measure, a dangerous occupational setting. White (2004) points out that over 19.3 million new injury incidents occur every year in England due to participation in vigorous activities. In rugby union, an injury episode involving a professional player occurs for approximately “59 minutes of competitive play” (Garraway, Hutton, Lee, Macleod, & Russell, 2000, p. 350), and in the case of English professional football the overall risk of injury is 1000 times greater than the risk of injury in other occupations normally considered high risk such as construction and mining (Fuller & Hawkins, 1999). Garraway et al. (2000) analysed the impact of professionalism on injuries in rugby union. Their findings indicate that “the penalties for accepting the financial and other rewards accompanying professionalism in rugby union appear to include a major increase in player morbidity” (Garraway et al., 2000, p. 350). In comparison to the amateur season, a higher level of recurrent injuries was observed during the early part of the professional season. In the opinion of these authors, this incremental rise in injuries is due to a lack of rest or a preseason break, overtraining or carrying existing injuries into the start of the season. Moreover, sociological studies at the workplace show a rather more complex, socially determined, pattern of pain and injury.

Roderick (2006a, 2006c), at times with other authors (Roderick et al., 2000), studied professional footballers in UK and their responses to pain and
injury within a framework that focuses on the shared culture of professional sport. Interviewed players acknowledged that they would do almost anything to continue playing, even if this meant playing on when injured during matches. Hence the authors argue that in order to understand players’ behaviour it is necessary to “understand the culture of risk in professional football and the associated constraints within which players – as well club doctors and physiotherapists – work” (Roderick et al., 2000, p. 169).

Inside professional football, players with a ‘good attitude’ are those who accept pain and injuries, and continue competing despite worsening their physical condition and health. This “keenness to play is viewed by managers as a demonstration of their good attitude” (Roderick, 2006c, p. 77). This view is shared by physiotherapists, directors and other players. There is a social bonding among work colleagues in which the power relations may have unintended consequences, for those who do not embrace a ‘good player’ attitude, are often seen as being of little use to the club and may be stigmatized, ignored or otherwise inconvenienced (Roderick et al., 2000). Consequently, players with long term injuries may experience a loss of self-esteem and self-confidence, guilt, depression and frustration as a result of their inability to take part in the one activity which, above all others, sustains their positive self-image. These findings are in accordance with Brock and Kleiber (1992) whose work indicates that the pattern of investment in sport makes athletes particularly vulnerable to the effects of injury. They note that this “is suggested in the lower degrees of life satisfaction and self-esteem reported 5 to 10 years later” (Brock & Kleiber, 1992, p. 73).
Roderick et al. (2000) suggest that studies of pain and injury must be understood within the context of interactions and relationships with other human beings and thus recognize how significant others have a potentially significant impact on how athletes experience pain and injury. Professional footballers have contracts with playing bonuses and, therefore, not being able to play may imply a huge relative loss in total income, especially in lower division clubs. This is more pronounced where lack of income will have an impact on their family and life outside sport. In sum, Roderick et al. (2000, pp. 177-178) point out several factors that affect the extent to which players are constrained to play hurt:

- the degree to which a player has established himself in the team,
- the stage of the season and significance of the forthcoming matches,
- the number of fit players available to the manager,
- the size of the first team squad and the extent of competition for places,
- the more or less financial resources of the club to replace player.

Other conclusions are that “players learn to cope with ‘routine’ pain and injury, but also to protect their sense of self from critical audiences that include people – e.g. club managers – some of whom view them as commodities” (Roderick, 2006a, p. 96).

Howe (2001, 2004a, 2004b, 2006) uses an ethnographic approach to shed light on the social relations of managing pain and injury in a professional rugby club in Wales, on distance runners and on Paralympic runners. He also examines the effects of professionalization and commercialization on sport medical staff and their methods of treatment. Howe employs the concept of habitus to examine his research findings and suggests that athletes develop particular behaviours (such as the culture of risk) that become ‘second nature’
to themselves, coaches and medical staff. To Howe, athletes come to incorporate the norms, values, beliefs, dispositions and behaviour patterns of the broader sports group, thus developing their ‘habituses’. In relation to the medical staff, the professionalization of sport stresses the objectives of a fast recovery, to the detriment of more cautious (and slower) medical practices. Therefore, the goal is to have the athlete injury free as fast as possible, which leads to medical staff being pressured by other members inside sport to ‘fix’ the injuries immediately. In professional sport, the importance of being able to compete, even if not in the best physical conditions, may overwhelm the desire to be perfectly fit. Consequently, medical teams prioritize the time of the recovery to the detriment of a full and adequate recovery.

In his work on professional rugby, Howe (2004b, p. 238) notices that “injury is generally accepted within the culture that surrounds the game”. He argues that the habitus of individuals linked to a club was transformed through professionalization such that injury may come to represent a symbol of social distinction (Howe, 2001). Players showed a desire to talk about injuries related to training or to the goal of becoming a better player. If pain and injury were the result of physical inadequacy, then the consequences of the injury on the player’s life outside sport were highlighted by the athlete. This touches upon a point previously stressed by Roderick et al. (2000), where family responsibilities (monthly income) may have a significant influence on an athlete’s desire to compete. Howe’s work also outlines the idea that with professionalization, players start to be seen as “commodities” (Howe, 2004b, p. 239). This provides a useful segue into the work of Malcolm and Sheard (2002), astutely titled ‘Pain in the Assets’.
Malcolm and Sheard’s (2002) research examines the management of injuries in men’s elite rugby union in England and, in particular, how this has altered as a consequence of the (formal) professionalization of the game in 1995. They identify three particular types of transformation in rugby union as an outcome of professionalization, namely: “changes in medical provision; changes to players’ desire to play through pain and/or with injuries; and changes to the pressure applied on players within the sportsnet, and by coaches in particular” (Malcolm & Sheard, 2002, p. 154). This work is premised on the idea that commercial changes have increasingly re-positioned players as the club’s assets. With professionalization, rugby clubs became structures with the potential of money-making, and their visible assets are the grounds, buildings, shares and obviously the players themselves (Malcolm, Sheard, & White, 2000). Therefore, there may be increasing pressure to handle players more carefully in order to preserve their physical condition and club’s wealth. Some measures taken to reduce the players’ injury risk were: the limitation of the number of matches in which players are required to take part; clubs could carry large squads of players of similar or complementary abilities so that player rotation can take place and to ensure that adequate replacements are always available; the improvement and/or protection of the physical condition of players; the employment of trained physiotherapists and medical personnel, and finally the use of protective equipment, not only for matches but also for training and practicing (Dunning & Sheard, 2005). This increase in the desire to protect players may explain Malcolm et al. (2000) findings in which, the professionalization of rugby seems to have entailed a growing acceptance of competing with pain, but a decreasing tolerance towards competing with injury.
with its related risk of longer term physical damage. Their data present little support to the existence of a risk-pain-injury paradox, because players appear to be reluctant to play with injuries which entailed a risk of further, or compounded, damage, despite accepting playing with pain as a normal part of this sport. Coaches had become less rather than more willing to expose their players to health risks, and clubs had directed increasing resources to improving medical care for players. Thus, while undoubtedly pain and injury are common in professional sport, commercialization has had complex and contradictory impacts upon the experiences of players. Such ideas are supported by further studies which suggest that this culture of risk is not exclusive to professional sport.

2.6 Amateur Sport and the Normalization of Pain and Injury

Starting from the work of Nixon and the idea of the ‘sportsnet’, Walk (1997) interviewed student athletic trainers in order to test the idea that ‘conspiratorial’ networks fuel athletes’ acceptance of pain and injury. Walk’s results mark a different interpretation of sportsnets compared to that offered in Nixon’s and Frey’s work. To Walk (1997), a sportsnet may be characterized by “flaws in its systems of control, relegated negotiation and conflict, and some measure of freedom for its members, even those with the least power” (Walk, 1997, p. 50). In Walk’s research, the relationships among students often resulted in resistance to the ‘intentions’ of the sportsnet. Although athletes tend to compete while injured and in pain, to Walk this did not appear to stem from activities of the student trainers, but rather stemmed from pressures from
university coaches in certain sports as well as decisions made, for whatever reason, by athletes themselves (see section 3.5 for a further discussion of these themes).

Similar research with non-professional athletes (Safai, 2003) examined the relationships between the culture of risk and the negotiation of treatment between sports medicine clinicians and student-athletes at a Canadian University. In so doing Safai (2003) expressed the desire to acknowledge and to question the influences of other key characters in competitive sport systems, such as the medical staff. Findings in this work are in accordance with the culture of risk shown in Walk’s research. Safai argues that athletes appear to tolerate pain and injury as something that will inevitably occur in their sporting career and that this was true for athletes in contact or collisions sports, non-contact sports and team or individual sports (Safai, 2003). Thus, the nature of the sport made little difference to how athletes interpreted the culture of risk. Additionally, interviews with the clinicians showed that the “culture of risk is a far more complex concept than simply overconformity to a sport ethic” (Safai, 2003, p. 142). Other factors such as the amount of off-season time available to recovery, the stage of varsity career and/or the importance of upcoming competitions (some of which are in harmony to what Roderick et al. (2000) argued before), have a high influence on pain and injury acceptance among athletes. Safai observed that the ‘culture of risk’, although being dominant, is not absolute, thus it occurs alongside with a ‘culture of precaution’. This ‘culture of precaution’ resists the promotion and tolerance of injury as part of sport. Therefore, in sport there is a concern for the health and safety of athletes. The severity and the type of injury are factors that may increase (or decrease) the
existence of a ‘culture of control’. In conclusion, Safai (2003) argues that the relationship between the ‘culture of risk’, the ‘culture of precaution’ and ‘the promotion of sensible risks’, will help to better conceptualize pain and injury negotiation. All the members of the sportsnets influence and are influenced by the connections and power fluxes between these concepts.

An additional and significant study of amateur sport (Liston, Reacher, Smith, & Waddington, 2006), sought to examine some of the ways in which non-elite rugby union and rugby league players respond to and manage pain and injury. It is initially recognized that all the studies with professional players, “have pointed to a high level of tolerance of pain among such athletes, coupled with a willingness to continue training and competing even when injured and in pain” (Liston et al., 2006, p. 388). Concerning their own body of research, Liston et al. (2006, p. 398) contend that “the attitudes and behaviour of the non-elite rugby players in our sample appear to be broadly similar to the attitudes and behaviour of elite and professional athletes in other sports”. These authors also draw upon Nixon’s (1992) ‘culture of risk’ in order to highlight the normalization of pain and injury among athletes who are not part of the large, dense, centralized and closed sportsnets that Nixon (1992) delineates as distinctive of those subcultures that persuade athletes into tolerating pain and injuries. Instead, Liston et al. (2006) distinguish a subculture that is small, open, loose, and decentralized, but in which athletes still rationalize and normalize pain and injury experiences. Distinct from the justifications with professionalism and commercialization, the data collected in this research suggest that “the ‘culture of risk’ cannot be adequately explained in terms of relatively recent commercial and financial pressures in professional and elite sport to “play hurt”, but that it
may be a more deeply rooted characteristic of sport at all levels” (Liston et al., 2006, p. 388). While it can be difficult to determine whether the commitment to ‘playing hurt’ on the part of these non-professional rugby players is as deep or strong as in the case of professional athletes, “there are, nevertheless, some startling similarities” (Liston et al., 2006, p. 399).

One way to explain this uniformity between professional and amateur sports, and between different types of sports, is to argue that athletes choose to compete in order to prove the virility and masculinity and thus to link the culture of risk with the ‘masculine ethos’. The next section discusses ‘masculinity and sport’ and the impact of these ideas on athletes’ experiences of pain and injury.

2.7 Masculinity, Violence, and the Culture of Risk in Sport

The early research undertaken by Messner (1987a, 1987b, 1988, 1989, 1990, 1992) in the area of masculinity and sport is of keen importance to a review of pain and injury. Messner (1990, pp. 63-64) identified that “in order to properly conceptualize the masculinity/sports relationships, it is crucial to recognize that young males do not come to the institution of sport as ‘blank states’ ready to be ‘socialized’ into the world of masculinity”. He also contends that male and females develop their identities differently and so one would expect them to approach sports differently. Thus, males appear to be predisposed to view aggression within the rules of sports as legitimate, natural, and by some means safe (Messner, 1990). With the increasing regulation of
violence in the late 19th and early 20th century, men feared that society itself was becoming ‘feminized’. Dunning (1986, p. 80) develops this idea arguing that,

the power chances of men will tend to be reduced and those of women correspondingly increased whenever relations in a society or part of a society become more pacified, when the chances for women to engage in unified action come to approximate or to exceed those of men, and to the degree that the segregation of the sexes begin to break down.

Therefore and according to Messner (1992), sport is a ‘gendered institution’, constructed by men in response to the needs and fears of a threatened masculinity. In sport, due to the internal structure of masculinity, athletes are likely to accept practicing and competing while hurt. In general, men are less emotionally expressive and engage more commonly in more dangerous or unhealthy activities (driving recklessly, drinking). Also coaches and teammates pressure male athletes to accept pain and injury in order to avoid being seen as malingerers and thus, less masculine. These dynamics together with the predisposition of men to view their bodies instrumentally (as weapons) are amplified in the competitive field of sport (Messner, 1992). Thus, this alienated relationship between males and their bodies may help to explain why injuries in sport are commonly disregarded until they cannot be ignored any longer. This conception of masculinity may present some short and long term “health costs” (Messner, 1992, p. 152).

Young (1993, 2000, 2004a) at times with other authors (Young, McTeer, & White, 1994; Young & White, 2000) has also made a significant contribution to the masculinity, violence and sport, body of research. Young contends that a number of researchers, particularly feminists, have developed literature that "has begun to look at pain and injury in sport as a gendered and gendering
practice" (Young, 1993, p. 374). In his earlier works Young (1993), used a ‘victimologial’ approach to examine how sports injuries result not only from the nature of athletic acts, but also from their organization (management or administration at the elite and professional level) and supervision (coaching) in an often hyper-masculine culture that places extraordinary emphasis on winning at all costs and, in the professional setting, profit. In connection with notions already presented he also contends that "sport is viewed as a context for the expression and reproduction of hegemonic masculinity where violence and its results, including injury, are legitimated and indeed ‘make sense’" (Young, 1993, p. 374). It is noted that the influence of masculinity is manifest not only in contact sports or where force is required, but “masculinity can also be constructed through traits such as discipline and endurance” (Young et al., 1994, p. 392). Male athletes who demonstrate pain, or stop competing because of an injury, may be stigmatized by peers as less than fully masculine, particularly if the injury is not perceived as serious. On the other hand, those who continue playing with a perceived serious injury, are viewed as a symbol of ‘ultramasculinity’ (Young et al., 1994). This expression of masculinity will have costs (like Messner (1992) mentioned) such as short term and long term injuries compromising their health. Overuse injuries are also “examples of negative outcomes that may be associated with dominant forms of masculinity” (Young & White, 2000, p. 116), even in non-contact sports.

Pringle and Markula’s (2005) research built on these ideas using ‘Foucauldian’ theorizing to examine the articulations between masculinities and men’s rugby union experiences of pain, fear, and pleasure. Their findings differ with the ones presented before in that their data support the judgment that sport
does not unambiguously produce culturally leading conceptions of masculinities, but acts as a contradictory and complex medium for masculinity construction. Negotiation processes of formative understandings of masculinities and self, result in the constitution of diverse, complex, and seemingly paradoxical understandings of masculinities. These negotiation processes “were often undertaken with varying degrees of tension, particularly in relation to the fear of injury and an amalgam of multiple and, at times, competing discourses, including discourses of ethics, health, violence, and feminism” (Pringle & Markula, 2005, p. 491). In this respect, their work has similarities with the ‘culture of precaution’ observed by Safai (2003). Pringle and Markula further conclude that when athletes get older, they stop wishing to prove masculinity through meeting the physical and often painful challenges of rugby. Although some players appeared to continue accepting pain and injury as relatively normal, they were no longer uncritical about corporeal damage. This may be explained because with time, athletes will be able to construct a broader and detached perspective of the sport network.

An example of how athletes may be pressured to prove their masculinity, can be seen in the work of Adams, Anderson, and McCormack (2010). The authors examined how football coaches and players constructed and regulated masculinity in organized sport. They observed that two predominant discourses were present: the ‘masculinity establishing discourse’ and the ‘masculinity challenging discourse’. It is acknowledged that coaches still perpetuate the orthodox ethos expressed by Dunning (1999), through which sport has conventionally served as a vehicle for the generational transmission of homophobic, misogynistic, and ‘femphtobic’ attitudes, where boys and men
are socialized to exhibit toughness, violence and aggression. The use of a masculinity-establishing discourse helps to institute this orthodox ethos. This discourse consists of situating football as a game for men, a game for warriors, and delimiting the (homophobic and violent) behaviours that make a player suitable for the game. By the same token, the masculinity-challenging discourse “served as a mechanism for gender and player performance regulation, when coaches felt that their players had not attained the appropriate form of masculinity established for them” (Adams et al., 2010, p. 287). It is a disciplinary strategy, using a reproachful discourse which also includes insults, questioning ‘heteromasculinity’ and players’ performance.

Another article about masculinity and sport (Chimot & Louveau, 2010), shows how young men who take part in a ‘feminine’ sport (rhythmic gymnastics), construct their masculine identity. It was observed that fathers and other peers may stigmatize such athletes, especially during very young ages. In order to be considered as men, boys performing rhythmic gymnastics have to struggle to construct their identity, a construction which depends both on their personal projects and on their relationships with family and friends. Thus, this research shows that “gender transgressions are not simple and can even be violent” (Chimot & Louveau, 2010, p. 453). Older athletes may desire to prove their masculinity by having muscular bodies or acting violently outside of sport. Young athletes’ may struggle against the stigma of playing a ‘feminine’ sport, leading them in some cases to abandon sport. In light of the above review, it may seem remarkable that Theberge (2006, p. 645) noted that there is an “‘epidemic’ of injuries in women’s sport”. What this illustrates is that masculinity, is just one of a number of factors influencing attitudes towards pain
and injury. Thus, it is also important to outline studies of female athletes in order bring the impact of masculinization into sharper relief.

2.8 Female Athletes, the Sport Ethos and Pain and Injury

In one of the first such studies, Ryan’s (2000) *Little Girls in Pretty Boxes*, brought to public awareness the pressures and pains that young athletes have to accept in order to achieve success. According to Ryan (2000), gymnasts have intensive training and suffer abuses in gymnastics that often result in quite serious physical and psychological problems. The data gathered by Ryan presents several examples of eating disorders, athletes with low self-esteem, recurrent physical and/or psychological injuries that may last through an athlete’s entire life. Evidence also suggests that gymnasts are highly susceptible to a variety of forms of exploitation, humiliation or abuse that can range from extreme diets and weight control, to verbal and emotional abuse, overtraining, corporal punishment, over-use injuries and training and competing while in pain or injured (Ryan, 2000). Parents are so “immersed in this aberrant subculture of elite sport” (Ryan, 2000, p. 149) that they lose the ability to protect their children and will start treating them like commodities, and accept coaches’ decisions. Despite the journalistic-style of this expose, it provides a useful illustration of the way pain and injury may be mediated within female sport, and may exist in separation from cultures of masculinity. Relatively little academic research has focussed on the pain and injury experiences of female athletes.
Engaging in ethnographic research with United Kingdom female rowers, Pike (2004, 2005) (see also Maguire and Pike, 2003), examines the meaning systems that underpin female athletes' willingness to experience pain and injury at an amateur level so as to maintain a socially appropriate self. They concluded that the same pattern of the culture of risk and pain and injury acceptance observed in male athletes was present. It is argued that there appears to exist a tendency for athletes to tolerate injury “in order to maintain their athletic self” (Maguire & Pike, 2003, p. 245). According to this study, pain and injury seem to be fully embodied in the sporting experience. Female rowers (like professional footballers, in Roderick et al.’s (2000) work) were then expected to have ‘the right attitude’, which consisted of normalizing risk and accepting pain and injury. Another idea is that the desire to be accepted in the sports subculture will lead athletes to create a self-identity that will be formed around the ideals associated with that subculture. Maguire and Pike (2003, p. 245) state that the athletes in their study “adopted compensatory behaviour, including taking further risks and participating while injured, to negotiate the epiphany which is presented by the injury experience”. To accomplish and preserve their athletic identity, rowers’ performances have to include “making and taking risks, and enduring pain in front of an audience of significant others” (Maguire & Pike, 2003, p. 239). The same authors also concluded that coaches regularly say that athletes should be able to accept and in some cases, desire pain. Most of the athletes “admitted to continuing to train with their injury, even though they were aware that they were risking further damage” (Pike, 2004, p. 156). Ignoring or hiding pain was therefore a normal and ‘appropriate’ behaviour.
Another contribution to literature on female athletes is provided by Charlesworth and Young (2004, 2006). Examining their data, it is suggested that most women “are as likely as men to take risks with their bodies when they are involved in a range of sports at a range of levels” (Charlesworth & Young, 2006, p. 91). ‘No pain, no gain’ is also a necessary part in female sports involvement, and regarded as routine and normal if they want to strive for success. Female athletes desire ‘hidden pain’ or in other words, they try to find strategies in order to ignore, avoid, block out and forget pain. They also show signs of ‘disrespecting’ pain and in some cases show irreverence towards injuries. These stances in sport are reinforced by what Charlesworth and Young (2006) call ‘significant others’ – coaches and peers. A network of significant others influences women athletes to tolerate injuries and ignore pain.

In a participant-observation study investigating young girls’ reactions to pain and injury and their conformity to the ‘sports ethic’, Malcom (2006, p. 503) witnessed that “during softball practices and games, coaches and others introduced the girls to the idea that an athlete should accept minor injuries and pain as a part of the game and should learn to shake off the pain and tough it out”. In Malcom’s (2006) research, it is clear that young girls playing sport were expected to accept pain and injury, otherwise, they could be stigmatized or considered as being constantly faking injuries.

Thus, the sportsnets can be a site where athletes become exposed to exploitation and different kinds of abuse. Furthermore, female athletes are in a relatively weaker position and therefore may be particularly vulnerable to specific kinds of abuses, such as: sexual abuses (Brackenridge, 1997, 2000;
Daniels, 2009; Fasting, Brackenridge, & Sundgot-Borgen, 2003; Fasting, Brackenridge, & Walseth, 2007; Fasting & Branckenridge, 2009; Fasting & Sand, 2015; Stirling & Kerr, 2007; Tomlinson & Yorganci, 1997) and eating disorders (Anderson & Petrie, 2012; Greenleaf, Petrie, Carter, & Reel, 2009; Krentz & Warschburger, 2011; Scoffier, Woodman, & D'arripe-longueville, 2011; Sundgot-borgen, 1994). Pinheiro, Pimenta, Resende, and Malcolm (2014) reviewed several articles about abuse and also conducted a study of female gymnasts. Their conclusions are that female gymnasts in particular, are highly vulnerable to different kinds of abuse.

In conclusion it must be stressed that gender is a “dynamic relational process” (Messner & Sabo, 1990, p. 17) constructed within several social networks (e.g. sportsnets). Each one influences the way gender is understood. In the sport network, it is important to observe that regardless of gender, there is an ethic leading those who desire to improve performance and results, to normalize pain and injuries at some point of their career. This is a key question that is closely related to the objective of this work and will be explained through the empirical data.

2.9 Conclusion

This review has demonstrated that the culture of risk, as well as pain and injury, are present in sport at all levels and affects male and female athletes. However, while both male and female, amateur and professional athletes experience frequent pain and injury, the contextual factors, or relationships that
contribute to those experiences are not necessarily homogenous. This calls for a perspective that avoids micro and macro social research divisions, and tries to study sport in a developmental and processual way. It requires a framework sensitive to the multipolar and polyvalent character of human interdependencies. These issues will be explored in Chapter 4. Before that, it is important to discuss the particular relationships between gender and sport and health.
Chapter – 3 The Gendering of Sport and Health

3.1 Introduction

The social construction of gender is accepted and theorized within various sociological discourses. It is, consequently, necessary in the context of this thesis to explore the ways in which gender is seen to impact upon the two main fields of analysis – sport and health. Thus, the current chapter starts by defining the concept of gender before moving on to explore the ways in which sport and health practices can be said to be gendered.

3.2 Conceptualizing Gender

Gender is commonly viewed as a cultural, psychological and social process, through which masculinity and femininity are constructed and reproduced (Connell, 1995; Lorber, 1994; West & Zimmerman, 1987). For instance, Emslie and Hunt (2008, p. 808) contend that gender is “a dynamic set of socially constructed relationships embedded in everyday interaction, rather than a simple attribute of individuals”. West and Zimmerman (1987) similarly conceive of gender as premised on three considerations. First, they suggest that gender is dependent on context. Different masculinities and femininities are enacted in different situations. Consequently gender is an emergent process contoured by the specifics of social context. Second, gender is collectively or relationally created and not a characteristic inherent to an individual. Rather, consciously or unconsciously, people produce or “do” gender. While it is individuals who “do” gender, this process can only be oriented and constructed...
in relation to others. Third, both men and women adopt particular gender displays and characteristics that others expect of them; in other words, they intentionally or unintentionally adopt features commonly related to their gender.

Gender construction is a process that may start with the assignment to a sex category on the basis of what genitalia look like at birth. Subsequently, a sex category becomes a gender status through naming, dress, adornment and the use of other gender markers. The ongoing process of ‘doing gender’ is such a familiar part of our lives that it is frequently only perceived when a disruption of our expectations of how women and men are supposed to act occurs. Consequently, “gender signs and signals are so ubiquitous that we usually fail to note them – unless they are missing or ambiguous” (Lorber, 1994, p. 14).

Gender is therefore best seen “as an organizing principle of culture and a basic structural element of society” (Zimmerman & Hill, 1999, p. 483). Through interaction with parents/guardians, socialization in childhood, peer pressure in adolescence, and gendered work and family-roles, people are divided into two groups and made to be different in behaviour, (expressed) emotions and rationalization. The content and intensification of differences may be influenced by the society’s culture, values, family and economic structure, and past history. Thus, “the gendered social order produces and maintains these differences. There is a continuous loop-back effect between the gendered social order and the social construction of gender at the organizational, relational, and individual levels” (Lorber & Moore, 2002, p. 4).

Notions of process, interdependence and the mutuality of the biological and the social are central characteristics of a figurational approach to gender
(see Chapter 4). With these fundamental principles of gender defined, we can begin to look at the variety of ways in which gender influences aspects of social life. While the process of gender analysis “involves identifying, analysing and informing action to address inequalities between men and women arising from their roles and power relationships” (Saunders & Peerson, 2009, p. 93), sport and health provide two contrasting examples, for while all people experience and have relatively little choice over their (ill)health, sport is a relatively voluntary pastime. While (ill)health is often experienced relatively privately, sport is a public and highly visual social phenomenon.

### 3.3 Sport and Gender

Sport embodies prominent cultural ideologies about gender. Most notably it remains one of the main social institutions in which men and women are routinely segregated. Additionally, research illustrates both male-female differences and female exclusion from male dominated sport. However, it is important also to take into account the distinctiveness of times and places, and the complex ways in which gender has interacted with social class or with different stages of the life cycle (Guttmann, 1991). In this respect sport research illustrates how gender is created and negotiated. Accordingly, the objective of this section is: to discuss the production and ideology of masculinity and male power through sport; and to discuss the media practices through which dominant notions of femininity are reproduced.
3.3.1 Gender Ideologies and Sport

Sport is traditionally a figuration dominated by males. According to D. Gill (1994), resistance to changes in male hegemony in sport have been more marked than in other social contexts. Messner (1987a, p. 54) also contends that “sport has become one of the last bastions of male power and superiority over – and separation from – the feminization of society”. Due to the traditional male hegemony, women’s experiences are seen as variations or even deviations on men’s psychosocial and biological characteristics and behaviours. In fact, the term “gender” in sports studies often has implicit “the assumption that gender means women (and not men)” (Hall, 2002, p. 7). Thus, the common approach to gender in sport entails a perspective about how and why women are different from men, but rarely is the reverse questioned (Birrell, 1984). However, power and hegemony are in a constantly shifting process “which incorporates both reactionary and liberating features of gender relations” (Hargreaves, 1994, p. 23). The concept of hegemony itself means that male dominance is never absolute.

Nevertheless, “there has never been a time, from the dawn of our civilization to the present, when women have been as involved in sports, as participants or as spectators, as men have” (Guttmann, 1991, p. 1). The sport figuration often closely relates to the beliefs and gender inequalities of a society at a given time. For instance, during the 18th century, aristocratic women could be seen riding to hounds and lower-class women fighting and boxing. But more generally the ideology of femininity and the “perfect lady” has traditionally been associated with domestic roles, such as nurturing, cooking and cleaning.
Therefore, practicing sports could be seen as a threat to those activities, not only in terms of consuming time, but also due to biological beliefs drawn from Social Darwinism.

During the 19th century the notion of the survival of the fittest and the idea that maternity was the premier function of womanhood became fashionable (Dyhouse, 1976). Guttmann (1991) cites several “scientific” texts from that century (Clarke, 1875; Maudsley, 1874; Pfeiffer, 1888) which emphasized the significance of biological differences between males and females. Those “scientific” texts claimed that the physiology of the female sex was governed by a fixed degree of energy for all physical and mental social actions and, therefore, that women could not menstruate and engage in physical and intellectual pursuits without serious health consequences. In 1887 the chairman of the British Medical Association recommended that in the interests of social progress, national efficiency and the progressive development of the human race, women should be denied education and other activities which would cause constitutional overstrain and inability to produce healthy descendants (Guttmann, 1991). These supposedly scientific ideologies have helped to create the gap between male hegemony and female power. Hargreaves (1994) contends that these beliefs started to be fully integrated into people’s attitudes and behaviours so that they became a material reality, part of everyday consciousness and sustained by the practices and attitudes of women themselves. Many women believed, or were constrained to believe in their inferiority, thus supplying a further rationale to validate male dominance. Additionally, “there were insufficient women who were visibly healthy and energetic, or who participated in sports, to provide a substantially different
image” (Hargreaves, 1994, p. 47). Therefore, sport reproduces the ideology of male hegemony because it, 

acts as a constant and glorified reminder that males are biologically, and thus inherently superior to females. Ultimately, this physical, biological, ‘natural’ supremacy of males in sport becomes translated into the ‘natural’ supremacy of males in the larger social order. (Kane & Snyder, 1989, p. 77)

Despite the increasing sophistication of the scientific process, and changes in the perceptions about male hegemony and female sport, many gender stereotypes and biases continue to prevail in the 21st century. For example, the most recent Eurobarometer (2014) concluded that males still practice more sport than females. Thus, 33% of men participated in vigorous physical activity or sports during the previous 1-3 days, and 20% during the previous 4-7 days. On the other hand, 26% of women participated in similar activities during the previous 1-3 days and 12% during the previous 4-7 days. Conversely, 61% of females compared to just 46% of men were not involved in any sporting activity. Similarly, Portuguese statistics for 2009 indicate that out of a total of 512,000 sport participants, 76% are male and 24% are female. Males and females also participate in different types of sport. In Portugal, the sport with most female athletes is volleyball (ranks 5th in males) and the sport with more male athletes is football (ranks 6th in females). In England, data from 2011 indicate that females mainly practice individual sports such as swimming, athletics and cycling, and consistently have lower overall levels of sport participation: 43.2% vs 54.7%.
Participation patterns such as these have led sociologists to discuss the continued impact of traditional gender stereotypes. In particular, several authors (Buysse & Embser-Herbert, 2004; Lenskyj, 2003; Liston, 2005b; Riemer & Visio, 2013; Ross & Shinew, 2008) focus on the work of Metheny (1965) who proposed three general principles of socially accepted sports competition for women:

1 – It is not appropriate for women to engage in contests in which:

The resistance of the opponent is overcome by bodily contact;

The resistance of heavy object is overcome by direct application of bodily force;

The body is projected into or through space over long distances or for extended periods of time.

2 – It may be appropriate for women identified in the lower levels of socioeconomic status to engage in contests in which:

The resistance of an object of moderate weight is overcome by direct application of force;

The body is projected into or through space over moderate distances or for relatively short periods of time.

3 – It is wholly appropriate for women identified with the more favoured levels of socio-economic status to engage in contests which:

The resistance of a light object is overcome with a light implement;

The body is projected into or through space in aesthetically pleasing patterns;

The velocity and maneuverability [sic] of the body is increased by the use of some manufactured device;

A spatial barrier prevents bodily contact with the opponent in face-to-face forms of competition. (Metheny, 1965, pp. 51-52)
Although Metheny offered her analysis about 50 years ago this typology continues to structure gender differences in sports participants. Women are generally attracted to sports in which major emphasis is given to physical expression (gymnastics, dance) and men prefer close combat sports, team sports, motor and extreme sports (Talleu, 2011). Several studies (Colley, O’Donnell, & Restorick, 1987; Kane & Snyder, 1989; Koivula, 1995, 2001; McCallister, Blinde, & Phillips, 2003; Riemer & Visio, 2013; Snyder & Spreitzer, 1983) building upon Metheny’s (1965) original framework have determined that particular sports are still more acceptable for women, meaning that traditional ideologies of femininity persist. For instance, American researchers collected questionnaire data from students aged 4-19 years old and found that Metheny’s classification system was still adhered to. Specifically, sports such as football and wrestling were viewed as male-appropriate, while aerobics and gymnastics were seen to be female-appropriate (Riemer & Visio, 2013). “The strong cultural association between sport and masculinity has resulted in women and girls being discouraged from participating in sports and in discrimination against those who do participate” (Weidman, 2010, p. 148).

Consequently we can see that traditional beliefs about gender differences in sport are very difficult to overturn. In fact Hargreaves (1994, p. 8) has perceptively observed that “because the whole history of modern sports has been based on gender divisions, even radical accounts of women’s sports tend to focus on perceived differences between men and women, rather than on the less obvious relations of power between them”. Ironically given Hargreaves (1992) antipathy towards figuralizational sociology, this call for a fundamentally relational analysis of gender is consistent with the theoretical framework
developed by Elias. This will be discussed in section 4.6.5. More immediately we must examine one of the institutions that traditionally serves to reproduce and maintain dominant notions about masculinity and femininity, namely the media. It is to this that we turn in the next section.

3.3.2 Sport, Gender and the Media

Media coverage plays a key role in extending the social significance of contemporary sports. Many televised sport spectacles, for example the Football World Cup Finals or the Super Bowl, are now a focus of worldwide attention. Moreover, these mediated events tend to reinforce many of the gendered traditional concepts about sport and gender. Reflecting on over 30 years of different theoretical and methodological approaches to the media coverage of women’s sport, Bruce (2012) concludes that studies of sport and gender media in various countries have highlighted the under-representation, trivialization and sexualization of female athletes. Furthermore, Bruce argues that even new media formats sources of news, such as Facebook or Twitter, remain dominated by male athletes and coverage of men’s sport.

Creedon (1994) has attempted to explain these patterns by exploring audience preferences for televised sports involving women. This research offers three theoretical constructs that can account for the privileging of, and higher audiences for, televised male sports: i) people do not like the unknown; ii) female sports are perceived as inferior; and iii) echoing the conclusions of the previous section, some sports are viewed as inappropriate for women.
However, and as Schoch and Ohl (2011) have noted, acknowledging the existence of a media bias towards coverage of male sport is not to argue that media deliberately or consciously try to marginalize women’s sport. Rather, “It is the discourses through which they construct knowledge that leads to shared understandings and practices that reinforce rather than challenge existing relations of power” (Bruce, 2012, p. 130).

The image of male hegemony in sport is represented by the less frequent coverage of female sports. In a study conducted in the US, Messner and Cooky (2010), found that men’s sports received 96.3% of the television airtime, women’s sports 1.6% and gender neutral topics 2.1%. They observed that the airtime devoted to women’s sports was the lowest since they started to conduct surveys in 1989. Several authors (Duncan & Hasbrook, 2002; Duncan & Messner, 1998; Duncan, Messner, Williams, & Jensen, 1990; Kene & Lenskyj, 1998; Messner, 2007) suggest that less coverage, and consequently lower revenues, are mechanisms to preserve sport as a male domain and foster the ideology of masculinity.

However, gender inequalities cannot simply be overcome by quantitative research. For instance, Liston (2001) found an increase of women’s sports televised and print coverage largely in Ireland. However, as she notes, this coverage represents caricatured feminine images and constitutes “a modernized attempt to reinforce traditional stereotypical images of femininity and female sexuality” (Liston, 2001, p. 257). Conversely media discourses about male sports tend to emphasize power, strength and risk activities, while discourses about female sport tend to emphasize lower body weight and
elegance (Sterkenburg & Knoppers, 2004). Male sports are often associated with war metaphors and language (e.g. battle, kill, weapons, shots). In male sports coverage, violent acts are often overemphasized “in a sarcastic language that suggested that this kind of action, although reprehensible, is to be expected” (Messner, 2007, p. 147). Media coverage of sport therefore assists with discourses that reproduce and reinforce wider ideologies that stipulate that males and females should look and behave differently. Commercials during sports coverage compound these ideas by frequently showing men doing high risk activities, and on the other hand, females in sexy poses (Messner, 2002). Thus, as Buysse and Embser-Herbert (2004) argue, sexist treatment and images are very popular in the media.

The sexualization of female athletes has been (and still is) one of the most common strategies used to promote female sports. The downside of this exposure is that “the willingness of athletes to display their bodies and accentuate feminine traits and heterosexuality takes away from their athletic achievement and status as athletes” (Carty, 2005, p. 134). However, it is the case that significant changes have occurred during the 21st century. Many male athletes are also starting to pose in sexy positions and carefully attend to their image. Also, many female athletes are starting to be known not mainly due to their physical appearance, but due to their skills (Cashmore, 2010). But it remains the case that the overall patterns of male and female representation in the sports media remain distinct, that women have more limited opportunities and that sport continues to be depicted as something of a male preserve.
For figurational sociologists, the broader context of the gender differences is the civilizing process through which, “sport emerged as a male preserve, a fact which helps to account for the strength of male resistance to attempts by females to enter it or develop sporting enclaves of their own” (Dunning, 1999, p. 237). As previously argued, male hegemony is relative and not absolute. Thus, power balances are in constant flux. Kane and Snyder (1989) contend that there is a state of social flux with respect to women’s participation in sport, because male domination is constantly being challenged but also re-asserted. Weidman (2010, p. 156) reflecting on Kane and Snyder’s research, observes that “we are still in a state of flux with respect to social acceptance of women in sport”, and that current media are “a reflection of the confused and conflicted attitudes surrounding women’s sports in our culture”. The growing direct involvement of females in sport represents in and of itself an equalizing trend, but is balanced by opposing trends such the disproportionate representation, and the glorification of ‘masculine’ behaviours (Dunning, 1999). While the power balance between male and female sports should be conceived of as in constant negotiation, it is impossible to deny that males continue to be hegemonic in sport.

3.4 Health and Gender

In contrast to sport, in which the majority of events are formally sex-segregated, health is an inherent cross-sex phenomenon. Therefore, incorporating research on gender differences in health behaviours requires not that we regard gender as primarily a characteristic of individuals, but that we
explore how perceptions of male and female characteristics contribute, often in unequal ways, to the distribution of social power. Gender norms and values can strengthen gender inequalities - that is, differences between men and women which may empower one group to the detriment of the other. Gender differences can give rise to inequities between men and women in health status (World Health Organization, 2012).

Because social roles are often taken to “stand in” for experience, we may lose the sense in which gender is made and constructed though interaction. The complex and continuous “shifting nature of the gender order, as it concerns men as well as women, poses significant problems in the conceptualization of research on health inequalities” (Annandale & Hunt, 2000, p. 24). Diversity should be taken in account when seeking to understand “newly emerging patterns of inequality which open up new divisions or differences within men and within women, and foster new commonalties of experience between (some) men and (some) women” (Annandale & Hunt, 2000, p. 24). It can be asked, for example, to what extent should the ongoing social change in men’s and women’s figurations in the worlds of work, domestic and family relations, leisure and consumption be understood in terms of greater equality or greater inequality? This theoretical sensitivity is central to research on health inequalities, and Annandale and Hunt (2000) identify the need to embrace the complexity of debate; to recognize that “similarity is crosscut by diversity”; and to appreciate that health varies in response to a “maze of interlocking variables”.
Nevertheless, we can argue that a gender comparative approach is essential. To argue this point is not in any way to suggest that “all things are equal”, but rather that in times of significant and regular change, “it is crucial that we consider the operation of the social relations of gender as they impact on the health of men and women” (Annandale & Hunt, 2000, p. 27). To highlight these points is not to suggest that research on gender and health must always and in every case be comparative (since there may be occasions where it is appropriate to concentrate upon differences within women or men), but simply to highlight the complex ways in which the social relations of gender may impact upon men’s and women’s health. Furthermore, the researcher should be sensitive to the interaction of gender with other factors, that is, to appreciate social complexity while also holding on to gender-as-difference. However, a problem may arise because, “the closer we move towards embracing complexity, inevitably the closer we simultaneously move towards undermining the primacy of gender-as-difference (that is, male/female as a binary division of power)” (Annandale & Hunt, 2000, p. 27). Possibly, the key to this tension is to conceptualize complexity itself as a product of a new form of gender order – i.e. a causal structure itself – which, rather than being predicated upon the male/female binary, is productive of a more complex and fluid social relations of gender (Annandale & Hunt, 2000, p. 27).

The following sections address a number of areas of health and medical practice that have been identified as particularly gendered. Specifically, we examine how the medicalization of society has been identified as a gendered process, how the behaviour characteristic of masculinity contributes to the generation of greater health risks, how there are gender differences in the
First, however, it is important to say something about the social construction of illness.

3.4.1 The social construction of Illness (and health)

In most contemporary societies, the culture and language of illness, disease and medical knowledge comes from scientific experimentation and is interpreted through what health care providers know and do. On this matter, the biomedical model of illness assumes that disease is a deviation from normal physiological functioning, that diseases have specific causes that can be located in the ill person's body, that illnesses have the same symptoms and outcome in any social situation, and that medicine is a socially neutral application of scientific research to individual cases (Lorber & Moore, 2002, p. 2).

However, illness should not be perceived just as a physical state, but also as a social phenomenon. What is normal and what is deviant depends on the social environment – when, where and who is being compared to whom. Even medical knowledge and medical concepts are deeply biased by practice situations and the social characteristics where they occur. Different cultures consider some physical states as illnesses, which others may regard as normal or healthy. This principle underpins much of the research on sport, pain and injury.

Westerners generally consider “physical health as a state in which people can do what they have to do and want to do, and illness as something that disturbs the physiological equilibrium of the body” (Lorber & Moore, 2002,
Therefore, the illness experience is a disturbance in a person’s social life such that he/she cannot perform his/her “normal” tasks, a situation which may or may not be the result of actual bodily dysfunction. In this regard, Field (1976) makes a clear distinction between disease and illness concepts. Disease “refers to a medical conception of pathological abnormality which is indicated by a set of signs and symptoms” (Field, 1976, p. 334), while illness, “refers primarily to a person’s subjective experience of ‘ill health’ and is indicated by the person’s feelings of pain, discomfort, and the like” (Field, 1976, p. 334). According to these definitions, it is then possible to be ill without having a disease, or to have a disease without being ill. A disease is then a “concrete” dysfunction or abnormal condition of the body, which can be detected through the use of medical exams such as x-rays. Conversely, illness is more “loosely” experienced, and transcends the boundaries of biological or physical disorders, entering also on the social field. An illness experience affects one’s social life in relevant, deviant and (generally) undesirable ways.

Therefore, illness is a condition moulded in specific social contexts. The perception that something is wrong and assumptions about the cause are always experienced in a social setting, consequently leading to the social construction of the illness state. Symptoms, pains, and weaknesses regarded as “being sick or ill” are shaped by cultural and moral values, experienced through interaction with members of one’s immediate social circle and/or visits to health care professionals and influenced by beliefs about what defines a health or illness state (Lorber & Moore, 2002). The outcome of this process is a conversion of physiological symptoms into illnesses stereotypes, and the labelling of people who have them as “patients”.
Illness bias is detected “in terms of what doctors call symptoms, but experienced by the ill persons as real, diffuse, and often unspecifiable subjective states” (Field, 1976, p. 335). However, and because illness is socially constructed, health care providers and patients may see the same set of symptoms (or absence of them) entirely differently. Health care professionals tend to look first for detectable physical symptoms or clear test results, while patients may tend to see first the consequences of the disease and possible changes and effects in their lives and regular activities. Symptoms occur in the context of patients’ lives, and may become an illness through the process of seeking professional help. Nevertheless, the social experience of being a patient also involves family, colleagues and friends; in other words, one’s place in the social world. Therefore, an illness state is moulded not necessarily only by interaction with medical staff or medical concepts, but through interaction with various members of a figuration. For many, e.g. an office worker, a knee with the ligaments damaged may be a “noncritical” condition and simply an annoying temporary encumbrance, while for a professional athlete it may threaten to end a career. On the other hand, a common and visible bruise resulting from practicing a contact sport is regarded differently from a bruise acquired in a domestic or working context. The same injury may therefore easily have different “illness” implications. Accordingly, the way a person deals with and expresses an injury will almost inevitably be affected by their place in the gender order. Depending on the context where it occurs, it may be a sign of “pride”, a sign of “shame”, or simply regarded as normal.
3.4.2 Gender and ‘Medicalization’

As the process of transforming a disease into an illness condition is heavily influenced by power relations, and as not all patients are equal, it logically follows that “gender, racial ethnic category, social class, physical ability, sexual orientation, and type of illness produce differences in social worth” (Lorber & Moore, 2002, p. 2). Similarly, “not all health care workers are equal, either – their place in the professional hierarchy determines their power to set research priorities, determine treatment modes, and produce what is considered legitimate medical knowledge” (Lorber & Moore, 2002, p. 2).

Traditionally, medicalization “refers to the rise in the use of medical definitions and frameworks to interpret an expanding array of human behaviours and conditions” and is “thought to replace moral interpretations of human behaviour” (Kanieski, 2010, p. 336). In other words, medicalization describes a process by which “nonmedical problems become defined and treated as medical problems, usually in terms of illnesses or disorders” (Conrad, 1992, p. 209). More broadly sociologists use the term medicalization to explain how social events, including all aspects of the aging process, and social problems such as alcoholism and obesity, come to be defined and managed by health care professionals (Lorber & Moore, 2002). Ultimately, medicalization allows people with “stigmatized” problems to gain access to the “privileges” of the sick role.

This sociocultural process “may or may not involve the medical profession, lead to medical social control or medical treatment, or be the result of intentional expansion by the medical profession” (Conrad, 1992, p. 211).
Thus, medicalization occurs any time that a medical frame or definition is applied by a person inside or outside the medical class, to understand or manage a deviant physical, mental and social state. In sport, the medicalization process may lead athletes or physicians to define an illness state in terms of recovery duration and/or its implication for their professional life (see section 2.2).

Gender can be seen to contour the medicalization process. According to Bell and Figert (2010, p. 109) initial research about this body of interest focused on the idea that “medicalization is entirely a top-down process and that women were passive recipients (as opposed to active proponents) of medicalization by a primarily male medical profession”. Feminist work (Figert, 1996; Plechner, 2000) started to emphasize the distinct ways in which women’s bodies can be more susceptible to medicalization than men’s bodies through processes such as childbirth, premenstrual syndrome and menopause. However, and according to Conrad (2007), the belief that men are not as vulnerable to medical surveillance and control as women is not tenable. Contemporary studies are now turning their analysis to the male related issues such as hyperactivity disorders, sexual dysfunctions, post-traumatic stress disorder and the development of the diagnostic category of “andropause” (Bell & Figert, 2010). Thus various masculinity concepts and stigmas continue to exert a significant influence on social behaviour. It is on the possible relationship between masculinity and health that the next section will focus.
3.4.3 Is ‘Masculinity’ dangerous for health?

Until daring has been eliminated from the rhetoric of masculinity, men will die as a result of their risk taking. In war, in sex, in driving fast and drunk. In shooting drugs and sharing needles. Men with AIDS are real men, when one dies, a bit of all man dies as well. Until we change what it means to be a real man, every man will die a little every day (Kemmel & Levine, 1992, p. 327).

The active construction of masculinities has been highlighted as central to the understanding of men’s health and has also been related to the occurrence of injuries in sport (see section 2.7). Hegemonic masculinity can be defined as the “traditional and most influential and culturally accepted notion of ‘manliness’, which includes an expectation of independence, self-reliance, strength, assertiveness, emotional control, competitiveness and aggressive and physical competence and dominance” (Saunders & Peerson, 2009, p. 94). In the male world, the cultural message is “kill or be killed”, and “the statistics show that this violent moral is being heard, internalised, and to some extent, grafted onto men's gender identities” (Annandale, 1998, p. 139). A significant number of male deaths are associated with risk taking behaviour that leads to accidents and injury. Therefore, the fit healthy male who avoids a heart attack is also likely to be the person who plays dangerous sports and drives too fast and who would probably find his macho image somewhat dented by seeking counselling or support if experiencing mental health problems (West Midlands Regional Health Authority, 1994). Masculinity as it is conceived by sociologists of gender, has a plural character. Hegemonic or traditional masculinity has been most closely linked with poor health. According to Annandale (1998, p. 141) there is a
marked tendency for the sociology of masculinity to view ill health as an assault on a man's sense of self and to neglect the association between masculinity and health through patterns of power and domination, including, it is important to appreciate, the effects of power/masculinity on women's health.

There is a connection between this attention to the male self and the later broader social changes that have been conceptualized by sociologists. Thus, sociologists looking at men's health should attend not only to personal experiences, but also to broader figurations, or what Annandale (1998) calls 'structures of power', to counter the tendency of the sociology of masculinity to turn inward to individual experience and men's incapacity to fulfil their emotional needs. When attention is centred exclusively upon men's personal health, “the reality of male power tends to be washed away with the tears shed for men's underlying vulnerability” (Segal, 1992, p. 68).

Male social power can be related to strength and muscular bodies, while for females social power can be related to flexibility, grace and lighter bodies (Markula, 1995). Fernandez-Aranda et al. (2004) contend that men are not as worried about body weight as they are about the muscular shape of their bodies. According to Young et al. (1994, p. 178) there is a symbolic significance “in the association of strength, body size, and aggression with male success. Annexation of physical force and celebration of risk by men more than by women are clearly socially constructed and motivated”. Thus, male athletes with a muscular body acquire a privileged social position while female athletes who develop fit but also thin bodies, possess a corporeality which is fundamentally empowering, but relatively less empowering than the equivalent for men.
The more socially valued “masculine” concept incorporates a more positive sense of self-esteem which in turn prompts a more positive self-evaluation of health. On the other hand, this “culturally exalted” (Connell, 1995, p. 77) hegemonic masculinity, also called hyper-masculinity, would fit well with the features of masculinity that are seen as negative for health (Annandale, 1998). Atkinson (2007) detected networks of relations between the risked consumption of sports supplements and men’s social and self-perspectives of masculinity. He contends that sport supplement consumption is an indicator of how some men “feel doubt, confusion, and anxiety with regard to what constitutes acceptable masculinity and how ‘healthy’ bodies are to be ‘built’ and represented in the pursuit of masculinity” (Atkinson, 2007, p. 183). For male participants, “sports supplements are, at least partially, predictable solutions to ambiguous cultural problems like the changing roles and statuses of men” (Atkinson, 2007, p. 183), and can eventually become a threat to their health if not carefully consumed. In other research, R. Gill, Henwood, and McLean (2005) explored the ways in which men talk about their own bodies and bodily practices, and how risky health body modification practices, including working out intensively at a gym, tattooing, piercing and cosmetic surgery, were influenced by masculinity. Some of their conclusions are that these risky body modifications were read as an indicator of a whole range of lifestyle and identity choices, and their body transformations and health risks were implicated in a project of “regulating normative masculinity” (R. Gill et al., 2005, p. 23). Emslie and Hunt’s (2008) research also found data indicating that being a man imposes greater danger to health due to the macho or masculine behaviour. As
we have seen (section 2.7) being macho may lead males to practice sports in ways which increase the risk of injury.

In sum strong socially constructed concepts of masculinity, in conjunction with an insecure or in-construction self, are perfect contexts for the occurrence of health-risky and health-threatening events.

3.4.4 Gender differences in Illness Reporting

A correlative of masculine stereotypes is the notion that it may be culturally more acceptable for women than for men to admit 'weakness' and seek help from others. This in turn would suggest an under-reporting of male morbidity. Some popular stereotypes lead us to believe that women are either intrinsically weaker or less stoical than men and unreasonably “fussy” about their physical condition (Lenskyj, 1986, 2003). The myth of female frailty, with its roots in the 19th century medicine, had a crucial role in creating and reinforcing these stereotypes (Dowling, 2001). It is plausible, however, to suggest the opposite: that women are more sensitive to and commonsensical about matters of health and sickness, and that there are social pressures on men which lead them to take risks with their health and to fail to protect themselves (Scambler & Hillier, 1997).

However, the point that women “over-report and men under-report illness assumes that there are objectively identifiable categories of illness or symptoms to be expressed and acted upon which are in some senses more real than people's subjective accounts of them” (Annandale, 1998, p. 146). Who can act
as the “objective” arbiter of experience? Some studies conclude that women are not over-reporting illness. In fact, “not only there is no evidence for women's over-reporting, but there is little support for men's under-reporting” (Annandale, 1998, p. 147). Indeed, men may actually be more willing to report since, although women's disease was rated as more severe than men's, at all levels of severity men reported a higher level of pain (Annandale, 1998). The myth of female frailty may have an impact on females under-reporting: females may try to avoid being seen as more fragile, and therefore they may try avoid expressing illness symptoms.

Despite this, it has been suggested that since milder forms of illness allow greater discretion in terms of perceptions of symptoms and health actions (such as visiting the doctor), differential rates by gender may reflect a greater propensity among women to admit to illness and men to deny it, as well as a greater inclination for others, such as doctors, to define women as ill. However, Macintyre’s (1993) study found that, while men and women were both likely to 'over-rate' the severity of their cold compared to the observer, this was true for significantly more men (20%) than women (14%). Macintyre (1993) suggests that this may either be a consequence of men being more likely than women to complain (“the whingeing male” explanation), or doctors being more likely to observe and diagnose symptoms in women (the “chauvinist interpreter” explanation).

To conclude, while gender differences in illness might not conform to gender stereotypes, there is evidence to suggest that gendered socialization
patterns influence women and men to “do illness” differently, but in complex and not necessarily predictable ways.

3.4.5 Work, Gender and Health

Finally, it should be noted that notions of femininity and masculinity are particularly influential in shaping attitudes towards physical labour, of which elite sport can be considered congruent. Jobs and families are complex variables with enabling and constructing effects on the physical and mental health of women and men. Both are areas for social support which may be beneficial to health; both are sometimes hazardous environments with detrimental physical effects; both produce stress. For instance, it is now widely recognized that “paid employment in and of itself generally has a beneficial effect on health” (with those in paid work tending to be in better health than those who are not) (Annandale & Hunt, 2000, p. 11). However, this principle may not be more broadly generalizable to the professional sports context which, as we have seen, may often have uniquely high levels of injury incidence. Thus, the key question is not whether paid work in general benefits the health of all women and all men, but rather what are the conditions under which specific types of work are harmful or beneficial to those men and women who experience them.

Men are more likely to engage in activities which are injurious to health, both at work and during leisure activities: they drink more, smoke more, drive faster and work in more physically hazardous occupations than women. On the other hand, women's time is more and more divided between work and
household tasks, leading to higher rates of stress (Kelsh & Sahl, 1998; Verbrugge, 1988). Another explanation for higher rates of stress in women’s work is that, as a consequence of their minority status, women may feel that they are under more scrutiny (Wharton, 1993). However, women generally experience less premature death due to illness. For instance, during adolescence men are more likely to experience a fatal or nonfatal injury than their female peers (Alexander, Somerfield, Ensminger, Kim, & Johnson, 1995; Borse et al., 2008), probably because during these ages they tend to prove their masculine status.

3.5 Conclusion

Albeit in varied and sometimes contradictory ways, gender relations play a major role in constructing sport and health experiences. In sport, men and women are often segregated, participate in varying “quantities”, and tend to have qualitatively different experiences. Longstanding stereotypes of male and female physical abilities influence these patterns and are produced and reproduced through the sports media. In relation to health, gender is likely to be one of the core characteristics of difference that influences the social construction of health/illness, in terms of both patient perception and clinical diagnosis. Masculinity and femininity may contribute in different ways to the construction of health risks and individual responses to illness events.

These factors help to explain why several studies indicate a higher prevalence of injuries in male, especially during young ages, but not why
current research suggests that male and female experiences of pain and injury are relatively similar, with both sexes accepting these things as a normal and recurrent part of their lives (see section 2.8). This paradox represents a core rationale for undertaking this thesis. However, before exploring the method and empirical data, it is necessary to discuss in more detail the theoretical perspective which underpins the thesis.
Chapter 4 – Figurational Sociology and Sport

4.1 Introduction

Since the beginning of the 20th century, at least, sport has increased in social significance such that sport and society have been studied in several forms and from various perspectives. The sociology of sport was the first subdiscipline concerned with the study of sport as a social phenomenon to emerge in an institutionalized form, to have a named professional body (The International Committee for Sport Sociology), its own dedicated journal (the International Review for Sport Sociology) and to be studied and taught in several universities and centres of higher education in specifically named and dedicated courses.

There is a diversity of sociological perspectives on sport. The perspective that informs this study is figurational sociology. By giving emphasis to this theory, it is not my purpose to dismiss what ‘classical’ and what many may consider as ‘mainstream’ sociological theories have to offer, nor to propose a single, general explanation of the social world. It is also not my intention to provide blind and unconstructive criticisms of those ‘classical’ theories. Instead, this section seeks to demonstrate a set of ideas and a body of knowledge advocated by figurational writers that provides the theoretical framework for this thesis. Thus, this work (in accordance with figurational principles) tries to create an informed body of knowledge that can serve as a basis for understanding an ever-changing collection of social relationships and the unpredicted issues often associated with them. In this chapter, the concepts of figuration, process, interdependence and civilizing process, commonly discussed in figurational
sociology will be outlined. Furthermore, several criticisms of the concept of the ‘sportsnet’ will be summarized. The chapter also includes a discussion of figurational approaches to the study of gender (and sport) and the relationship between figurational sociology and feminist theories.

4.2 Figurations, Process and Interdependence

One of the areas of interest of the sociologist Norbert Elias, was social networks and how they may influence people’s convictions and behaviours. Elias (1978b, 1983, 1986, 1987b, 1991, 1994, 2001) (Elias & Scotson, 1994) developed the perspective commonly known as ‘figurational sociology’. He reflected on the presence of social networks that affect people’s convictions, perceptions and behaviours. Elias also commonly used the term ‘process sociology’ to express his concern to explain the social world, as produced and reproduced by acting people whose social bonds represent a long term structure and the dynamics of which cannot be explained solely in terms of the properties of individuals. With his writings, Elias tried to develop a new view in the social sciences. He demonstrated that societies can be understood not only through macro and micro sociological theories, but also through a theory that fills the gap present in these two different ideologies. He was clearly critical of what he regarded as “misleading and unhelpful dualisms and dichotomies, such as that between the individual and society, and also the tendency towards what he called process reduction, in which everything that is experienced and observed as dynamic and interdependent is represented in static, isolated categories” (Murphy, Sheard, & Waddington, 2000, p. 92). Therefore, figurational theory tries to avoid a static and isolated social approach, and seeks
to offer an approach determined to study, understand and explain social phenomena in a more developmental, processual and interdependent way. The challenge posed to sociological theory is the construction of empirically-based concepts which, overcoming the traditional dichotomy between the individual and society, would allow us to understand the webs of interaction that bond humans together. Following Elias, we can see society as a whole, but we cannot ignore the influences that exist between its members as individual characters.

According to Elias (1978a, p. 261), a figuration is a dynamic network of interdependency ties and power balances of mutually orientated and dependent people. Since people are more or less dependent on each other first by nature and then through social learning, through education, socialization, and socially generated reciprocal needs, they exist, one might venture to say, only as pluralities, only in figurations.

In other words, by figuration is meant “the totality of relationships which, created by interdependent people as a whole, undergo different magnitudes of development over time” (Maguire, 1988, p. 188). These relationships may be direct or indirect and while they cannot be precisely measured, they can be felt by people who constitute multiple and co-existing figurations. Humans are always and everywhere part of these figurations, which may increase in size and complexity as societies change. Figurations can be more or less complex, stable, durable, harmonious and regulated. They can exhibit one or several degrees of integration, high or low power differentials and large or small number
of participants who in turn, may also belong to other configurations, where they may exercise different roles.

A key stimulus for Elias’s theoretical framework was his reflection on the practice of other sociologists. He noted that many sociologists seek to investigate behaviours, opinions and experiences of individual people and then seek to process their results individualistically and statically. By focusing on component parts, sociologists hope to bring to light the characteristics of these composite units - as if the “all” would be equal to the sum of the parts (Elias, 1978b). In contrast, the concept of figuration, “serves as a simple conceptual tool to loosen this social constraint to speak and think as if ‘the individual’ and ‘society’ were antagonistic as well as different” (Elias, 1978b, p. 130). Elias argued that the more closely integrated the components of a figuration are, or the higher the degree of mutual interdependence is, the less possible it is to explain and study the properties of “society” in terms of the “individual”. Therefore, it becomes essential not just to explore a composite unit in terms of its component parts, but also to explore the (processual) way in which these individual components are bonded to each other in order to form a complex and fluid unit. In an Eliasian sense, since a figuration is not the simple sum of individuals but a web of interacting people, in order to understand any figuration it is crucial to think about the interdependent relationships between people, the established positions they occupy within the figuration, as well as the relationships across the multiple figurations that people hold (Elias, 2001).

Continuing this theme of interdependence, Elias regarded as misleading and unhelpful the dualisms and dichotomies that pervade sociology, such as those between the individual and society, cause and effect, objectivity and
subjectivity, agency and structure. He argued that it was more adequate to view “individuals” and “society” as being inextricably linked and therefore, two different but “inseparable levels of the human world” (Elias, 1978b, p. 129). With his writings, he tried to develop a new view in the social sciences. Elias demonstrated that societies can be understood not only through macro and micro sociological theories, but also through a theory that fills the gap present in these two different ideologies. Accordingly, society cannot be analysed as an abstraction, as being above individuals and having an autonomous and independent existence from the people who form it. We can see society as a whole, but we cannot ignore the influences that exist between its members as individual characters. From a figurational perspective, society and individuals are not separate, they are two different but inseparable levels of the human world.

Additionally, Elias tried to avoid the tendency towards what he called “process reduction”. Specifically he identified the tendency in sociology to reduce processes conceptually to a steady state in the name of analysis, citing the presence of this mode of thinking in our daily language as evidence of its influence on sociological thought (Dunning, Malcolm, & Waddington, 2004). One thinks and consequently speaks by means of objectifying reality, which ends up isolating and paralyzing the processes and relationships to which sociological concepts refer:

Our languages are constructed in such a way that we can often only express constant movement or constant change, in ways which imply

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1 Elias referred to this as ‘*homines aperti*’ - a notion that defines people as open to others and bonded in dynamic figurations – see Section 4.4 – ‘Behind the Scenes’.
that it has the character of an isolated object at rest, and then, almost as an afterthought, adding a verb which expresses the fact that the thing with this character is now changing. For example, standing by a river we see the perpetual flowing of the water, but to grasp it conceptually, and to communicate it to others, we do not think to say, ‘look at the perpetual flow of the water’; we say, ‘look how fast the river is flowing’. We say ‘the wind is blowing’, as if the wind were actually a thing at rest, which, at a given point in time, begins to move and blow. We speak as if the wind was separate from its blowing, as if a wind could exist which did not blow. And this reduction of processes to static conditions, which we shall call ‘process reduction’, for short, appears self explanatory to people who have grown up with such language. They often imagine it is impossible to think and speak differently, but that is simply not so. Linguists have shown that many languages have structures which make it possible to assimilate such experiences differently (Elias, 1978b, pp. 111-112).

Again, examining human language, and more specifically personal pronouns, Elias (1978b, p. 123) argued that they may “represent the elementary set of coordinates by which all human figurations can be plotted out”. More explicitly, the definition of the pronoun “I” in human communication can only be understood in the context of all the other pronouns to which the other terms in the series refer. All the personal pronouns are intrinsically inseparable, “for one cannot imagine an “I” without a “he”, or a “she”, a “we”, “you” (singular or plural) or ‘they”’ (Elias, 1978b, p. 123). Elias observed that personal pronouns, together in all their forms, are in fact an elementary expression of the fact that
every person (“I”) is fundamentally related to other people and that every human is fundamentally an interdependent social being. In short, societies should not be conceived of as groups of single individuals, but people bonded together in interdependent relations. Or as he mentions: “the concept ‘individual’ refers to interdependent people in the singular, and the concept ‘society’ to interdependent people in the plural (Elias, 1978b, p. 125)”. Hence, the second field should be the concern of sociologists and social psychologists.

Humans are mutually interdependent even before birth, not only because children depend on their mothers for survival, but also because their conceptualization as social individuals can only exist in relation to others’ social individualities. For instance, being pregnant ascribes a peculiar social role for a woman in which she may be expected to act differently. Further, Elias warned against conceiving of the pressures and influences upon people, as if they emerged from social structures that exist apart from individuals; that is, as if social structures were above people, abstract social forces exerted and intentionally leading people to adopt some behaviours and attitudes and to accept certain values and norms. However, Elias emphasizes that such social pressures do not derive from abstract non-human entities. In fact, other individuals, who are also elements of figurations, exert such pressures. This means that they are intentionally/non-intentionally and consciously/non-consciously socially moulded by others within a network of interdependencies.

These dynamic networks of interdependency ties are not simply face-to-face relationships. Notwithstanding the influence of people physically or emotionally close to us, we have relationships with and are dependent on people we have never met, and thus influence and are influenced by many
humans. In this regard, it is important to note that according to Elias, for an adequate understanding of contemporary figurations, it is important to understand their past transformations. Figurational sociologists differ from “that of the conventional sociologist in the sense that we are concerned with a long-term social process” (Dunning & Sheard, 2005, p. 1). The transformations that occurred in a figuration are the result of gradual, and at times, unplanned and unforeseen processes. All the characteristics of the existing figurations are linked to those from which they developed, but contemporary figurations are just one of the possible outcomes from previous figurations and not the only possible (or even predictable) outcome. In truth, we do not only inherit physical things such as buildings and technology, but also less tangible things like language, culture, ideologies and beliefs. So all aspects of human social life, such as sport, politics, leisure, economy, family and education, “involve people struggling to create a present out of their inheritance from the past, in that way pointing yet again to the fundamental need for a sociology which is above all historical in its orientation” (Dunning, 2008a, p. 10). It is then reasonable that in order to understand a figuration and all the interdependencies at a given time, one should refer to the “constant flow of figurations”.

In The Court Society (1983), Elias provides a critical examination of the popular belief, epitomized by the philosopher Popper in his book The Poverty of Historicism (1957), that history and historical sociology cannot possibly be “scientific” because of the uniqueness and unrepeatability of historical events; in short, that “science” is only possible with recurring events and phenomena because only then can you test and formulate “laws”. However, Elias (1983) challenges these ideas suggesting that there are different and diverse degrees
of uniqueness and unrepeatability, and what is unique and unrepeatable on one level can be seen on another as repetition, a return of the never-changing, at another. In fact, unique, unrepeatable and rapidly changing individuals form relatively persisting figurations, which are just as real as the individual people forming them. Thus, “uniqueness and unrepeatability are not inherent in history either as an “object” or independently of the values and interests of people like Popper who make claims of this kind” (Dunning et al., 2004, p. 5).

Understanding historical transformations while at the same time continuing to pay due attention to individuals, their present actions and achievements, that is, of striving to strike a more object-adequate or reality-congruent balance between “society” and “individuals”, is of crucial relevance for students of sociology (of sport) who wish to carry out process-orientated/developmental studies (Dunning, 2008a). The objective then is to search for evidence, not simply of individuals and their actions, or of structures independently of the individuals who form them, but of people living, acting and forming “figurations”, by virtue of interdependencies which, although they may vary, e.g. in terms of qualities such as the length and density of the chains involved, are an inescapable part of human beings’ existence (Dunning, 2008a). In this regard the term “development” is used in figurational sociology distinctly from, and separate to, the term ‘change’ because “it more adequately captures the complexity of figurations in flux” (Maguire, 1988, p. 188). Thus, a developmental approach may allow the probability of understanding the processes which involve movements towards higher or lower levels of differentiation and integration and the connections between stages in such processes. The use of this concept is essential for processual sociologists, because it enables tracing
'movements' over time and explaining how later social formations arise out of earlier ones.

In summary, Goudsblom (1977, p. 105) suggests that there are four key themes to Elias’s work, which illustrate the principles of figurational or process sociology. These are:

1. Sociology is about people in the plural – human beings who are interdependent with each other in a variety of ways, and whose lives evolve in, and are significantly shaped by, the social figurations they form together. People do not exist in a vacuum or in an asocial context.

2. These figurations are continually in flux, undergoing changes of many kinds – some rapid and ephemeral, others slower but perhaps more lasting.

3. The long-term developments taking place in human figurations have been, and continue to be, largely unplanned and unforeseen.

4. The development of human knowledge takes place within human figurations and is one important aspect of their overall development.

These themes provide the underlying framework for this thesis.

4.3 Elias and the Civilizing Process

These conceptual ideas are all evident in Elias’s most famous work – The Civilizing Process (1994). Throughout this text, Elias examines empirical data which indicate that a long-term social development occurred in the societies of Western Europe between the Middle Age and the early years of the
20th century. In order to acknowledge and identify different stages of long-term social development, with a relatively high degree of detachment, he offered what he called “the triad of basic controls”:

The extent of control-chances over non-human complexes of events, that is, control over what are generally called ‘natural events – usually related to technological developments;

The extent of control-chances over interpersonal relationships, that is, control over what are usually called ‘social relationships’ – usually related to the development of social organization;

The extent to which each societies’ individual members have learned to exercise self-control, that is, the greater or lesser degree of control over himself – usually related to what is known as the ‘civilizing’ process (Elias, 1978b, pp. 156-157).

Although not increasing or decreasing at the same level and time, these three types of control are interdependent, both in their development and in their functioning at any given stage of development. However, Elias’s theory of the civilizing process is more concerned with the second and the third of this ‘triad of basic controls’.

It is important to realize that Elias does not use the concept of civilizing process in an evaluative way – as if people commonly described as “more” civilized are straightforwardly morally superior to those whose behaviour is defined as “less” civilized. With the marginal exception of the unborn, there is no “zero point” of civilization and wholly uncivilized society or individual. In this
regard, Elias contends that in order to understand “civilization” in the technical
sense, researchers have to distance themselves from the everyday value-laden
connotations of the word. Accordingly, “civilization is not, any more than
rationalization, a product of human “ratio” or the result of calculated long-term
planning” (Elias, 1994, p. 443).

On the other hand, the civilizing process is characterized by a set of
changes regarded by Elias (1994) as omnipresent and a normal condition of
social life. The term “social change” should then be applied to changes in any
consistent direction, “whether towards greater or lesser differentiation and
complexity” (Elias, 1978b, p. 155). These ‘social changes’ are a result of mainly
unplanned processes. It would be difficult to conceive that a gradual
‘rationalization’ “had been set in motion by people with that long-term
perspective, that specific mastery of all short-term affects, considering that this
type of long-term perspective and self-mastery already presuppose a long
civilizing process” (Elias, 1994, p. 443). Many of these long-term developmental
trends can be traced over hundreds or thousands of years, suggesting then that
it is “beyond human power or foresight to plan and carry out such structured
changes” (Elias, 1978b, p. 155). In addition, these movements of society and
civilization do not follow a straight line. Within the overall movement there are
repeatedly greater or lesser “counter-movements” (also mentioned as short-
and long-term “regressions”; “counter-civilizing” developments; “de-civilizing
spurts”) in which the contrasts in society and the fluctuations in the behaviour of
individuals, their affective outbreaks, increase again (Dunning, 1993). According
to Mennell and Goudsblom (1998, p. 20) “there is a certain asymmetry between
civilizing and decivilizing processes: the former can only be relatively long-term,
while the latter can become dominant very quickly”. Despite not being dominant at certain times, the civilizing processes go on continuously because “even if there are no noticeable changes in behaviour, people continue to struggle to solve the problems posed to them in their lives by decivilizing pressures” (Mennell & Goudsblom, 1998, p. 20). The key question, then is which forces gain the upper hand in the short or the long term?

Nevertheless, despite not being rationally planned, not intended but an unsystematic coming and going of diverse patterns, these ‘centuries of changes’ are not merely unstructured and chaotic (Elias, 1978a). They are defined by a set of plans, actions and also emotional and rational impulses of individual people that constantly interweave in a friendly and hostile way, resulting in changes and patterns that no individual person has planned or created. Consequently, “from this interdependence of people arises an order sui generis, an order more compelling and stronger than the will and reason of the individual people composing it” (Elias, 1994, p. 444). It is then this “order” of interdependent people, their impulses and strivings, which underlie the civilizing process.

It is neither conceivable nor desirable in this thesis to specify in detail the entire spectrum of factual developments which Elias perceived as constituting the Western civilizing process. Nevertheless, it is important to stress that Elias’s work on the civilizing process operated on two distinct yet interdependent levels:

On the one hand, it involves an empirical generalization about the overall trajectory of personality structure, habitus formation and social standards;
On the other, it involves the hypothesizing of an explanatory connection between what Elias sought to establish was an empirically demonstrable civilizing trajectory at the levels of personality, habitus and standards and an equally demonstrable tendency towards more effective forms of state centralization and control (Dunning, 1999, p. 43)

Thus, according to the data gathered by Elias (1994), this long-term civilizing trajectory is characterized in general by: the overall refinement of manners and social standards; an increase in the social pressure on people to exercise stricter, more continuous and more even self-control over their feelings and behaviours (regarding also all aspects of bodily functions); a shift in the always socially necessary balance between external constraints and self-constraints in favour of the latter; an advancing threshold of repugnance regarding habits and conducts related to bodily functions such as eating, drinking, defecation, urination, sex and sleeping, a process in terms of which these functions and the connected bodily organs came to be increasingly laden with taboos and surrounded by feelings of anxiety, embarrassment, guilt and shame; and an developing threshold of repugnance regarding participation in or simply witnessing violent acts and bloodshed.

4.4 Behind the Scenes

More particularly, Elias’s theory refers to a decline in people’s desire and capacity for obtaining pleasure from attacking others, to the tendency to push violence increasingly behind the scenes, and also the internalization of a stricter
taboo on violence as a self-regulation. Whenever this taboo is violated the arousal of guilt feelings occurs along with the susceptibility to label those who desire violence or obtain pleasure through it in psychopathological terms. On the other hand, as Dunning (2008b, p. 225) contends, “this same social process has increased people’s tendency to plan, to use foresight, and to use longer-term, more rational strategies for achieving their goals”. As a result, it has contributed to an increase in people’s propensity to use violence in a more calculated manner and in specific situations (for example, during sport practice). Thus, Dunning tries to move beyond Elias, by conceptualizing the long-term civilizing transformations with respect to violence as a “change in the balance between some of the forms of violence distinguished in the typology” (Dunning, 2008b, p. 223). He then suggests that this flux in the balance between forms of violence that can be empirically witnessed is ascribed, in large measure, to an observable shift in the forms of social bonding, that is, to different forms of relationships that are “observably socially produced” (Dunning, 2008b, p. 223). Within this context, Dunning (1981, p. 224) offers eight possible distinctions that can be made among the forms of human violence:

1. Whether the violence is actual or symbolic, i.e. whether it takes the form of a direct physical assault or simply involves verbal and/or non-verbal gestures;
2. Whether or not weapons are used;
3. Where weapons are used, whether or not the assailants come directly into contact;
4. Whether the violence is intentional or the accidental consequence of an action-sequence that was not intentionally violent at the outset;
5. Whether the violence is initiated without provocation or is a retaliatory response to an intentionally or unintentionally violent act;

6. Whether the violence takes a “mock” or “play” form, or whether it is “serious” or “real”. This dimension might also be captured by the distinction between “ritual” and “non-ritual” violence. Ritual and play, however, can both have a highly violent content;

7. Whether the violence is legitimate in the sense of being in accordance with a set of socially prescribed rules, norms and values, or whether it is non-normative or illegitimate, i.e. in contravention of accepted social standards;

8. Whether it takes an ‘instrumental’ or ‘affective’ form [also referred as rational or expressive form], i.e. whether it is rationally chosen as a means of achieving a given end or whether it is engaged in as an emotionally satisfying and pleasurable end in itself. Retaliatory violence that is undertaken immediately in response to a violent attack also has a high affective content, that of anger as opposed to pleasure. However, retaliatory violence can also be engaged in rationally and instrumentally as part of a longer-term campaign of revenge.

These distinctions are between “ideal types”, however, it is more adequate to conceptualize them in terms of interconnected polarities and balances. Consequently, the different forms and dimensions of violence, in sporting and other contexts, overlap and can be transformed into one another. Sport in particular, is an enclave for the socially acceptable ritualized expression of physical violence.
Besides an increasing self and external constraint in violent acts, Elias perceived an increasing constraint in how emotions are bodily expressed and pushed behind the scenes. Smith (2001) contends that Elias’s work carries a cover message: “It is that becoming civilized is, in one sense at least, like leaving the Garden of Eden. Just like Adam and Eve, men and women acquire knowledge but also become ashamed (...) of their bodies and emotions, frightened to reveal them” (2001, p. 151).

The work of Norbert Elias discusses the rationalization of the human body and emotions and the concept of “civilized bodies” underpins his more general concern with civilizing processes. Elias studied the body in terms of its relevance to historical transformations in behavioural codes and forms of affect and emotion control. He also developed a long-term and processual perspective of individualization, rationalization and socialization of the body, which may help to address how people relate to their bodies in different historical epochs. Therefore, Elias can be regarded as a “notable exception to those who have traditionally adopted a dual approach to the body in sociology” (Shilling, 1993, p. 150). Thus, the work of “Norbert Elias can be used to help overcome many of the biology/society, mind/body and nature/culture splits apparent in naturalistic and social constructionist approaches to the body” (Shilling, 1993, p. 14).

Mennell (1998) contends that the work of Norbert Elias helped to stamp an almost indelible mark on sociological theorizing from Durkheim and Weber to Parsons and also other writers who were influenced in one way or another by phenomenology. This consists of identifying a pattern in the use of a conception where a singular person is seen as the “subject” of knowledge, thus being “a single thinking mind inside a sealed container from which each one looks out
and struggles to fish for knowledge of the ‘objects’ outside in the ‘external world’” (Mennell, 1998, p. 188). These singulars interact with other minds, equally confined inside sealed containers and, therefore, the problem lies in the question of how one thinking “subject” inside its own container can ever know anything of what is being thought and what is known by other sealed subjects. People may be to believe that “their actual ‘selves’ somehow exist ‘inside’ them; and that an invisible barrier separates their ‘inside’ from everything ‘outside’ – the so called ‘outside world’” (Elias, 1978b, p. 119). Elias labelled this conception as the *homo clausus* (closed man), or an image of people as “thinking statues”, where the body is just an “object” trapping the “subjects”. The *homo clausus* is a static and dualistic perspective, “associated with a doubt that the world ‘outside’, ‘external reality’, really exists or is as it seems” (Mennell, 1998, p. 189). *Homo clausus* perspectives observe an individual not only as a single isolated mind, but also as a single isolated adult mind. They neglect the long-term socialization process and the intergenerational transmission of symbols and knowledge in general.

In contrast, the image of *homines aperti* is what underlies “the civilizing process”, tracing as it does changes in personality structure along with changes in the structure of human relations in societies as parts of an overall and constant process. The traditional use of a *homo clausus* image during the Renaissance period cannot be disassociated from the fact that a major spurt of the civilizing process occurred during that period. The *homo clausus* perspective can therefore be an externalization of a “self-experience” perspective in which humans sense themselves as trapped in a sealed object civilized by self-controls. Elias counterpoises this with his own conceptual
starting point of *hominæ aperti* (open people), observing that people are bonded together in several ways and degrees. The *hominæ aperti* perspective contends that instead of recognizing a struggle to search for knowledge of the ‘objects’ outside in the “external world”, we should recognize that no person’s knowledge has its beginning in him or herself. Our reflections, perceptions, institutions, experiences, behaviours and ways of communications are inevitably constructed and shaped during our interactions with others. Humans are constantly adapting “themselves to new surroundings with the help of a sequence of social transformations: that is, transformations in the form of a social development, and without further evolutionary transformations breaking the biological unity of their species” (Elias, 1991, p. 107). This adaption also represents an increasing regulation over how humans (bodily) express their emotions.

In this regard, Elias (1991) gives a set of three hypotheses that may help to elucidate certain unique characteristics of the human species. The first hypothesis starts by recognizing that most animals combine their instinct of unlearned behaviour with a capacity for learning behaviour. However, in all animals except human beings, the mainly unlearned forms of conduct are far more significant than the learned forms of conduct, including the feeling components of their emotions. Therefore, “human beings represent an evolutionary breakthrough” because “for the first time in the evolutionary process, mainly learned ways of steering behaviour became clearly and unmistakably dominant in relation to mainly unlearned ways” (Elias, 1991, p. 108). Moreover, (this being the second hypotheses) human beings cannot only learn far more than any other species, they also *must* learn more; that is,
because the repertoire of unlearned ways of behaviour humans have has been “softened and weakened to such an extent that human beings can neither orientate themselves in their world nor communicate with each other without acquiring a great deal of knowledge through learning” (Elias, 1991, p. 109). Some, though not all, unlearned forms of human behaviour (smiling, or crying in pain) lose their genetic rigidity. They become more malleable, and in a number of cases even merged or “absorbed” along with learned forms. Elias develops these ideas observing that it would be easier to recognize the particular relationship of unlearned and learned human features if one is not so influenced by isolationist and dualistic routines of thinking, such as the nature-nurture controversy. Instead, one should develop studies of embodied people that explore “the hinge”. For Elias, “the hinge” is a way of expressing how the development of bodily habitus has been, and continues to be, shaped by an interweaving of people's biological, psychological and cultural identities. The third and last hypothesis consists in the element that no emotion of a grown up human person is ever an exclusively unlearned, genetically fixed reaction pattern. In fact, human emotions result from a blend of unlearned and learned processes (like language). Concisely, emotions and the related movements help to shape and outline a person's relationship with other persons and, in a wider sense, with nature at large. Thus, “emotions and the related movements or ‘expressions’ are, in short, one of the indications that human beings are by nature constituted for life in the company of others, for life in society” (Elias, 1991, p. 125).

Taking a long-term developmental view, Elias emphasizes that human beings learn to control not only their emotions, but also their bodily appearance
and actions, according to changing social environments. Elias does not suggest that history has observed human progress in any simple or linear manner, but he does argue that there has been a long-term change in the way our bodies and emotions are controlled within the chains of interdependency which bind people together. This civilized body encompasses the skill to rationalize and exert a high degree of control over its emotions, to monitor its actions and those of others, and to internalize a demarcated set of rules about “appropriate behaviour”. What are observed as civilized bodies, at least in contemporary western societies, are characterized by self-restraint and rationalization, learned via processes of constant human interaction. In fact, the historical development of western countries moves towards more self-controlled and less externally controlled behavioural and emotional acts. These controls become so internalized that, even when alone, humans tend to act in ways that are socially expected. Instead of being imposed from the outside through the threat of sanctions, codes of behaviour become adopted, partly at a subconscious level, to the point where they are followed irrespective of the presence of others.

With the fundamental principles of a figurational sociological approach outlined, we move to a discussion of the more direct application of these ideas to the central empirical foci of this thesis. First we explore some figurational criticisms of Nixon’s work before we examine aspects of an Eliasian approach to the study of gender relations.
4.5 Figurations and the ‘Sportsnet’

Roderick (1998), working within the figurational perspective, offered a number of ways in which Nixon’s work (previously discussed in section 2.4) might be developed. He notes that Nixon’s research is athlete-centred, concentrating on direct relationships such as athlete-athlete, athlete-coach. For instance, Nixon (and also Hughes and Coakley (1991)) argues that athletes are aware of the influence of “significant others”, on the way in which they experience the social world, or in this case, in which they deal with pain and injury. However, within sport, there are several direct and indirect actors, that should also be studied, such as the medical staff, supporters, media, parents, teachers, peers and so on. Only a wide-ranging knowledge of them all will enable researchers to better understand sport, pain and injury. Thus, Roderick (1998, p. 70) noted that

Elias emphasized that people do not have to be aware of or interact with others to be within the same relational network and influenced by others, and he argued that a perspective which is confined to direct relationships tends to limit one’s understanding of social processes.

While we are not always completely aware of others’ influences on our behaviour/beliefs, it is also true that we are not always completely aware of our influence on others’ behaviours/beliefs. Commonly our actions lead to unintended, unpredicted and undesired consequences. Thus, a problem with Nixon’s work seems to be the tendency to develop the idea that athletes constantly have full consciousness of why they accept pain and injuries, and coaches intentionally and consciously desire to normalize the culture of risk. Roderick also critics Nixon perspective that sportsnets “operate conspiratorially
or collusively to influence the choices and decisions and block the alternatives of athletes so that they act in ways that reinforce the values and norms of the culture of risk that perpetuates these networks” (Nixon, 1993b, p. 316). Conversely, Roderick’s (1998, p. 77) perspective is that the “purposive actions of interdependent people often interweave to produce trends which no one has planned or intended and which constitute and constrain the perceptions, goals, and actions of people”.

By belonging to the sport figuration athletes are invariably influenced by the thoughts and actions of the other members. It may be that they are so involved in the sportsnet that in some cases they are not fully aware of the influences other members may have on their behaviour. The widening and differentiation of the chains of interdependence can make it difficult for individuals to recognize a global figuration as a web that they themselves constitute. In some cases, players are so involved in the sportsnet that they may not be able to see the possible dangers of neglecting an injury. Figurational sociology conceptualizes involvement and detachment in terms of degrees (see section 4.6.2). This is held to be more adequate than conventional arguments because; it does not involve a radical dichotomy between categories such as “objective” and “subjective”; it is relational and processual, providing a framework with which we can examine the development, over time, of more object-adequate from less object-adequate knowledge (Murphy et al., 2000).

Roderick further critiques Nixon by invoking Elias’s conceptualization of process. He notes that figurations are historically produced and reproduced, and thus beliefs, ideologies and cultures are passed on from one generation to another. Consequently, Roderick suggests that Nixon’s work could be
developed with a study incorporating “an awareness of the long-term unplanned developments which produced the conditions necessary for the creation of a sporting culture” (Roderick, 1998).

By way of illustration, Roderick’s final comment on Nixon’s work is that the culture of risk in sport is a socialization process which may influence athletes from early ages and continue throughout their career. This means that the culture of risk is a process that occurs at all stages of a sporting career. Athletes are enmeshed in this culture from a young age, which may lead them to reproduce these cultural norms across amateur or professional, male or female, sport. Maguire (2002) observed that this sports ethic is learnt early on and becomes normalized and taken-for-granted by the performer. Young athletes even “seem to be far more likely to take risks than older people” (Donnelly, 2004, p. 38). Injuries are viewed on many occasions as a spectacle and according to Young (2004b) the media marginalize pain and analyse it as a sign of athletic commitment. The mass media “celebrate the willingness of an athlete to endure extreme amounts of pain and injury” (Curry & Strauss, 1994, p. 196). This socialization is observed in Ryan’s (2000) work, where young gymnasts, with the ambition of competing and winning medals in the Olympics, are anything but novice to the sporting world and its risk acceptance ethic. In his work in a recreational basketball league, Singer (2004, p. 229) concluded that most of the players were already “very much involved in the management of pain and injuries” and they “played through pain and they discounted injuries that were not perceived as “serious””. In a participant-observation study investigating young girls’ reactions to pain and injury and their conformity to the “sports ethic”, Malcom (2006, p. 503) witnessed that “during softball practices
and games, coaches and others introduced the girls to the idea that an athlete should accept minor injuries and pain as a part of the game and should learn to shake off the pain and tough it out”. Even those athletes that were new to the game of softball and that were initially resistant to accept pain and injuries as normal, eventually adopted the traditional ballplayer attitude over the course of the season (Malcom, 2006). Therefore, “the particular notions, attitudes, and beliefs connected to sports participation become embedded subconsciously by athletes, that is, come to be an aspect of the athletes ‘second nature’” (Roderick, 1998, p. 78).

Another point that may also be highlighted is that athletes are not necessarily always, as the work of Nixon and Frey (1991) seems to argue, in a less powerful position. A central dimension of figurations or dynamic interdependency ties is power, conceptualized not as an element or property possessed only by particular individuals and groups, but as a characteristic of all human relationships and a central aspect of the concept of interdependency (Elias, 1978b). Figurational sociology focuses on the understanding of the structures that mutually dependent human beings establish and the transformations they undergo, both individually and in groups, in part due to the increase or decrease of their interdependencies and gradients of power. Power is always a question of relative balances, never of absolute possession or absolute deprivation, for no one is ever absolutely powerful or absolutely powerless. Power is not static because the chains that link us to other members of the sport figuration are dynamic and always in a constant flux. Every member of any figuration has some kind of power and influence over other members. Thus it seems more adequate to speak of power differentials, balances of
power or power ratios; to consider that athletes are more or less interdependent with those with whom they have relations.

Walk (1997) argues that his own study offers “a far different picture than that suggested by Nixon, where in medical personnel, in concert with similarly inclined others, compel athletes to play with injuries, do not relay accurate medical information, and withhold proper care”. Furthermore, he contends that Nixon’s “model of an insulated, culturally homogeneous, and ‘conspiratorial’ sportsnet is both intuitively suspect and without empirical support” (Walk, 1997, p. 50). In other words:

at least intuitively, it should be anticipated that even a sportsnet may be characterized by flaws in its systems of control, related negotiation and conflict, and some measure of freedom for its members, even those with the least power - in the present case, student athletes and student athletic trainers (Walk, 1997, p. 50).

Safai similarly suggests that the “culture of risk” in sport is “far more complex than Nixon implies”. She acknowledges “that there is widespread acceptance and tolerance of pain and injury in competitive sport” but, at the same time, she also recognizes “the complex ways in which athletes and others produce and respond to this culture” (Safai, 2003, p. 128). One of Safai’s (2003, p. 138) research conclusions is that “no evidence was found to suggest that sport medicine clinicians working with athletes at this large Canadian university deliberately reinforced and promoted the “culture of risk” and/or value the performance of the athlete above his/her health and well-being”. In addition, whereas Nixon argued that an institutional and conspiratorial alliance helps to
perpetuate the acceptance of a “culture of risk” by athletes, “more recent research shows that such structures are not monolithic” (Safai, 2003, p. 138).

More recently, Waddington (2012) discusses Walk (1997) and Safai’s (2003) criticisms of Nixon’s approach. Waddington’s standpoint is that the empirical work of Walk and Safai makes a useful contribution to the subject. He acknowledges that these authors “are correct to point out that sportsnets are not monolithic, are not equally closed or insulated and are not culturally homogeneous” (Waddington, 2012, p. 215). But, on the other hand, he also contends that “their critique of Nixon appears to be based, at least in part, on an oversimplification of his argument” (Waddington, 2012, p. 215). The existence of “empirical variations in the structures of sportsnets do not undermine Nixon’s argument, for not only does he not imply that sportsnets are monolithic, but, on the contrary, he explicitly recognizes that they are likely to vary in significant respects” (Waddington, 2012, p. 216). Nixon (1993b, p. 317) identifies several processes that are “likely to entrap athletes in a culture of risk and foster a self-abusive pattern of risk, pain, and injury when the networks”. Therefore, these processes are less likely to entrap athletes where they have the opposite characteristics. Taking these variables into consideration, “can help to explain not only what Walk and Safai take to be the inconsistencies between Nixon’s model and their own findings, but also some of the variations between their findings and the findings in relation to professional sport” (Waddington, 2012, p. 216). Waddington’s (2012, p. 217) conclusion is that:

the implication of the studies by Walk and Safai is not that Nixon’s framework is fundamentally flawed but, rather, that more attention needs

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2 For a more detailed description of these processes see section 2.4 – ‘The ‘Sportsnet”.'
to be paid to the dimensions identified by Nixon – size, density, centralization, etc. – in terms of which sportsnets vary. Where sportsnets are relatively large, dense, more centralized, more closed and more stable – as appears to be the case in professional sport – then the constraints on sports medicine practitioners to deviate from what is generally considered good medical practice are likely to be relatively strong; however, where sportsnets are smaller, less dense, less centralized, less closed and less stable – as appears to be the case in the college sport described by Walk and Safai – then the constraints on sports medicine practitioners to make medical compromises and to engage in health-threatening practices are likely to be less strong.

Despite agreeing with the sports networks dimensions depicted by Nixon, Waddington also tries to offer another dimension. He mentions that “the peculiar features of the situation of the club doctor in professional sport mean that this type of practice is characterized by an even higher degree of client control than is normally the case in community-based practice” (Waddington, 2012, p. 219). Hence, club doctors work within an “organization in which the key values are not professional values relating to health, but lay values relating to sporting success” (Waddington, 2012, p. 219). Significantly, doctors’ remuneration and status (they earn often much less than the players and they are isolated) within the clubs is often consistent with their position as service workers. This work situation of club doctors constrains them to pay greater attention to sport ethic than to medical ethics. In sum, “the work situation of club doctors constrains them to ‘buy into’ the sport ethic and to the key goal of sporting success and, at least to some degree, to ‘buy out of’ medical ethics” (Waddington, 2012, p. 220).
4.6 Figurational sociology, gender and sport

Feminist writers’ critique of the figurational approach is based on the claim that figurationalists give little importance to gender issues (Hargreaves, 1992, 1994; Horne & Jary, 1987) and lack consideration of gender differences (Colwell, 1999). Nevertheless, many figurational studies have commented upon the importance of gender in sociological analyses (Dunning, 1992, 1999; Krieken, 1998; Liston, 2008; Mansfield, 2002, 2007, 2008; Mennell, 1998; Murphy et al., 2000; Pinheiro, 2014; Waddington, Malcolm, & Cobb, 1998). Thus, the focus of this section is on the gendered themes and issues of figurational sociology and its importance in the debate between feminist and figurational approaches. Particular attention is paid to three main figurational discussions that shed light on the process of gender relations in sport: power relations and the civilizing process; involvement and detachment; and established-outsider relations. We then consider the implications of the development of post-structural feminist research for figurational sociology.

4.6.1 Gender and power shifts and the civilizing process

Elias himself, around 1971, wrote a book-length typescript about the changing balance of power between the sexes in ancient Rome. However, all copies of that work were accidently destroyed before publication. Later, Elias (1987a) reconstructed that research and published a small part of the lost book. He described how Roman women’s relative lack of power was legitimized by: violence; obedience; a legal status equivalent to a man’s possession; and through being denied a name of their own. However, in the 2nd century BC,
gender inequality among the Roman elite diminished due to at least two main reasons: political and strategic matters and civilizing changes in manners and self-control. Consequently, Elias argues that shifts in the balance of power between male and female continually occur, thus the social status of both sexes is continually challenged.

In long-term perspective, these shifts tend to challenge men’s higher status, however, this trend towards a more equalized power ratio is characterized by several processes that increase and at times decrease women’s power. Thus, the relationship between changes in social manners and equalization trends is not linear. In addition, the power balance between the sexes tends to differ in various social strata. Dunning (1999, p. 226) argues that “like all other social relations, the relations between males and females are fundamentally affected by the character and overall structure of the society in which they are lived”. Furthermore, during the Middle Ages and in modern urban societies, along with the industrialization process, the idea of a household led by a wage-earning male was strengthened. Women’s struggle for emancipation during the 19th century was supported by a more equal distribution between the sexes, including the reduced importance of: physical strength, knowledge and organization (Brinkgreve, 2004).

Sport, however, remains a primary social context in which male dominance is reproduced and masculinity-validating experiences are created (Dunning, 1999). So, while women are constantly making strides towards emancipation in sport, male dominance is still intentionally or unintentionally preserved. Thus, the increasing direct involvement of females in sport embodies, in and of itself, an equalizing trend. Still, “this growing female
participation in what started as an exclusive male preserve has tended to involve two specific sets of penalties for sportswomen which show that modern sport and society still remain predominantly andrarchic” (Dunning, 1999, p. 238). In contrast to the confirmation of their masculinity through participation in sport by males, the femininity of sportswomen tends to be compromised in the eyes of others (and sometimes in their own eyes too), especially as a result of their participation in combat/contact sports. As we saw in Chapter 3, females face numerous obstacles with respect to participation in sport which are not experienced by males.

A distinct feature of the figurational approach to gender is the analysis of civilizing changes in the way violence is regarded. Since the 18th century humans have become increasingly compelled to exercise greater control over violent expressions. Thus people increasingly feel guilt, shame and embarrassment whenever the violence taboo is violated. The regulation of violence and aggressive acts has direct implications in the sporting context. Violence control (in sport and in other contexts) has a significant impact on gender power relations because “men became gradually deprived of using one of their greatest advantages over women, that is, their physical force” (Pinheiro, 2014, p. 759). Thus, women’s power chances started to increase, yet, in response men started to create and protect privileged areas, such as sport, where their traditional dominance could be maintained. Sport, a traditional field where strength, aggression and physical skills were celebrated, became a context where traditional male characteristics and skills could prevail. Thus, sport became “an enclave for the legitimate expression of masculine aggression and for the development and expression of more traditional masculine
habituses involving the use and display of physical prowess and power” (Dunning & Maguire, 1996, p. 308).

In sum, gender power differences are not stable, and back and forth movements towards equalization/differentiation are constantly occurring. Civilizing changes may help to increase female power ratios but, at the same time, may increase male desire to maintain their privileged sites and strengths. While feminists tend to focus on gender differences, or in the particular ways that females are constrained (Hargreaves, 1994; Lenskyj, 1994), figurational studies focus on the civilizing process, and try to contextualize changes and movements in gendered power ratios. Thus, figurational approaches try to develop theory that also explains the processual, historic and current movements that may influence gender power differences. This contextualization is crucial if one wants to adequately study gender. Therefore, studies of gender should be “historically located and embrace a time perspective which is capable of considering long-term processes of change as they are interlinked with more medium and short-term relationships in social life” (Malcolm & Mansfield, 2012, p. 408).

4.6.2 The figurational search for detachment

A further distinct characteristic of the figurational approach to gender is the attempt to strive for relatively detached approaches that try to explain the role of gender in different social contexts. However, feminist writers associate this “quest for detachment” with the perceived neglect of gender in figurational accounts of sport. Hargreaves (1992, p. 162) embodies the idea that figurational
sociologists believe that they can “exceptionally, impartially separate themselves from their own histories and consciousness”. Hargreaves contests the figurational discussion about involvement and detachment because “it claims to be objective and uncritical, in a subtle but fundamental manner it is supporting the popular idea that sport is more suited to men than to women and represents a celebration of the work of male bonding and male sport” (Hargreaves, 1992, p. 165).

Mansfield (2008, p. 102) argued that Hargreaves has misinterpreted the theory of involvement and detachment, claiming that “Elias did not claim to be neutral, objective and have the ability to escape from personal ideals and commitments”. Rather, Elias’s central point was that involvement and detachment were better observed in terms of degrees and that having this perspective in mind might help to develop more reality-congruent data and better informed discussions. He avoided the traditional dichotomy between objectivity and subjectivity, or value-free and value-laden. The webs of interaction and interdependences, that underline the “figuration” concept, are not compatible with an idea of value-free individuals, or the dominance of “autonomous evaluations”. On the other hand, the perspective of power balances, and the idea that no one is absolutely powerless, is contrary to “heteronomous evaluations”. According to Elias (1987b) autonomy and heteronomy are better regarded in terms of balance. Furthermore, this balance does not just relate to the character of research paradigms, but also at all levels and at every step of the research process. Thus, “involvement-detachment should be thought of as an ever-changing balance of emotional involvement-
4.6.3 Gender and established-outsider relations

Hargreaves’ (1992) critique of the figurational perspective is that ‘detachment’ is masculinist because it supports the status quo and thus the popular idea that sport is more suitable to men than to women. Hargreaves criticizes the value-neutral stance applied in figurational research, because it is uncritical in a male dominated world. However, the objective of having a neutral perspective is not to perpetuate the reality in study. The intention is to provide data and reflections that can improve knowledge, without being highly influenced by a particular ideology. Not starting research with the particular objective of gender equality, is not the same thing as desiring or uncritically accepting male dominance. In fact, searching for a particular outcome will inevitably create a distorted image of reality. Having said this, it is also important to mention that figurational sociologists do not regard male dominance, or any other culture and race, as absolute.

In this respect, Elias and Scotson (1994, p. 17) argue that the “established-outsiders relations are the normal concomitants of a process in the course of which formerly more or less independent groups become more interdependent”. Thus, Elias and Scotson’s (1994) theory of established-outsider relations can offer important insights to the gender field. It is a theory about power relations and the social dynamics between dominant and subordinate groups. Greater social cohesion, long-standing integrated social
networks and greater power generally characterize established groups (e.g. males). Additionally, exclusion and stigmatization of outsiders by the established group can be powerful weapons used by the latter to maintain their identity and to assert superiority.

Using an Eliasian framework, Dunning (1986) contends that the increasing interdependence of males and females in sport was manifested in the ways in which males perceived females’ increasing participation as a threat to their hegemony and as a challenge to their sense of “masculinities”. For Liston (2005a, pp. 26-27), “the forms of resistance by males to females’ incursion into male-associated sports reflect the traditional importance of these sports to masculine dispositions or ways of looking at the world, including, most importantly, interaction with other people”. Therefore, the social dynamics of stigmatization, tends to maintain the established (male) groups hegemony through control of the outsider group (females). According to Mennell (1998, p. 135) “it is a general characteristic of established outsider relations that the outsiders identify with and “understand” the established better than the established do the outsiders”. In this regard, “feelings of superiority on the part of males and inferiority on the part of females reflect the increasing interdependence between males and females” (Liston, 2005a, p. 27). Furthermore, an “established group tends to attribute to its outsider group as a whole the “bad” characteristics of that group’s “worst section”” and, on the other hand, “the established group tends to be modelled on its exemplary section” (Elias & Scotson, 1994, p. xix). This struggle between males and females is, according to Mennell (1998), a characteristic of all figurations, including sport. The increasing female empowerment movements have been responded to with
male driven power struggles. This has resulted in continuous changes in the
gender power balances.

The theory of established-outsiders relations can therefore help to shed
light on the pattern and process of gender power relations in sport. Female
struggles to enter traditional male sports, have been contested by a male
movement that tries to maintain sport as a male preserve. While females with
good sporting performances can increase their social status, failure can
reinforce the stigma of the outsider group. Thus, lower sports performance, or
even injuries, can be a sign of failure. This can increase women’s desire to
prevail, as well as to disregard or hide pain and injury from others.

4.6.4 The ‘new’ post-structural feminisms and figurational approaches to
gender relations

According to Pinheiro (2014), there is a tendency amongst feminist
624) argues that dichotomous themes in feminist research include debates
about “structure/agency’, race-, class- and gender-based dominations, and
studies of sexuality and sexual politics”. These themes tend to reflect
dichotomies that are rejected by figurational approaches. While they are
particularly evident in more traditional strands of feminist thought, as for
example liberal and radical feminisms (Scraton & Flintoff, 2002),
poststructuralist feminisms have produced analysis which in some ways, are
closer to the figurational approach. Poststructuralist feminisms prioritized not
only the differences between gender, but also multiple dimensions of power
relations. Studies in this strand of thought argue that the image of powerful masculinity in sport is not only about being a dominant man in opposition to a subordinate femininity. It is also a radicalized image that differentiates (and discriminates) black athleticism and white athleticism (Dworkin & Messner, 2001; Messner, 1993). According to Scraton and Flintoff (2002), the works by black feminists represent a greater awareness of the needs of different women. These “poststructuralist feminists provide conceptual challenges to the macro analyses” of feminist approaches because they argue that “it is no longer relevant to seek the truth or a single explanation to a particular issue” (Scraton & Flintoff, 2002, p. 39). In other words, “poststructuralist feminists have sought to challenge current and popular ways of dichotomous thinking about femininity/masculinity, heterosexuality/homosexuality, black/white and so on, not least because people negotiate multiple identities” (Liston, 2007, p. 625). They moved from a uni-dimensional focus on male control of the structures of society towards a more multi-dimensional approach to inequalities between sexes (Wearing, 1998), advocated by figurational writers such as Pinheiro (2014, p. 762):

if one wants to have a better understanding of sex/gender relations, the experiences of different kinds of men and also of different kinds of women have to take into account, for example, the different experiences of men and women of different class, age and ethnic groups, or different sexual orientations.

In a (intended or unintended) movement towards figurational ideas, post-structural feminism started to “emphasize the social construction of gender and...
sexuality and thus how ‘false’ binaries can be challenged and transgressed” (Scraton & Flintoff, 2002, p. 41).

Poststructuralist feminists have, however been criticized for “slipping into a relativism that emphasizes difference and thus loses the notion of women’s shared experiences in relation to gender” (Scraton & Flintoff, 2002, p. 40). The focus on females’ experiences avoids the understanding of the gendered processes that negotiate social interdependences. When studying gender, instead of focusing on female or male experiences separately, one should study the interdependences between all members of a figuration, and analyse the continuous and shifting role of gender within the figuration. Thus, the study of gymnasts’ experiences of pain and injury can be better understood if both male and female teams are studied within the same research context. This premise has informed the research of this thesis. One example of a feminist perspective centred in females is the tendency to focus on the male-perpetrator and female-victim paradigm. According to Colwell (1999, p. 222) this paradigm fails to acknowledge the fact “that some women impose their values on other women, and that women have their own sources of power in relation to one another and to men”. This privileged focus on the male-perpetrator female-victim paradigm indicates a greater involvement in ideological assumptions, which may lead feminists to ignore the growing evidence of male abuse and female abusers (Pinheiro, 2014).

Furthermore, feminist work intentionally desires to decrease female discrimination, and entails a pre-conceived and unquestioned image of male dominance. These are clear indications that feminists may be highly involved in the subject in study and ultimately this will interfere (negatively) in their analysis.
Despite a (positive) move towards the study of female differences, feminists still need to focus their studies on the processual developments of gender, the movements between male and or female greater power balance, and on the interdependences between several male and female members of several figurations.

4.6.5 The figurational-feminists challenge

Despite the convergence identified in the previous section, differences between figurational and feminists approaches are clearly a challenge for anyone wishing to use both within the same research. Nevertheless, Maguire and Mansfield (1998) conducted a study which they describe as a “feminist-figurational” approach. Maguire and Mansfield (1998) argue that the pursuit of the social body is a negative strategy for all women, and that aerobics is a response to the “exercise-body” complex to stay young slim and healthy. However, the pursuit of the social body may not be a negative strategy for all women, and not all women do aerobics in an attempt to respond to the pressure to which they are submitted (Pinheiro, 2014). Thus, despite the claims that “in their study they would treat women as a heterogeneous group they fail to do so and there are numerous instances where women are treated as a single, undifferentiated group” (Pinheiro, 2014, p. 766).

Other feminist studies, (Birrell & Ritcher, 1994; Scraton, 1992) recommend that all women should reject the competitive ‘macho’ values of the sporting ethos, as a ‘remedy’ for what is ‘wrong’ with female sports, and also because sport does not particularly well serves the needs of women. However,
as Colwell (1999) argues, these perspectives present a view of women as a homogeneous group, and as such, they are misleading because sports may serve the ‘needs’ of some women very well. Furthermore, not all women respond equally to similar contexts and they may also have different contexts and webs of interaction. A standardized perspective about females, and the idea that women are equally oppressed and constrained, raises several questions:

Is it the women in Maguire and Mansfield's work that perceive these notions of femininity as distorted, or is this the authors’ own value judgement?

Is it the women in the study who feel they are oppressed in their pursuit of the social body or it is what the authors think? (Pinheiro, 2014, p. 767).

Pinheiro (2014, p. 767) concluded that “these kinds of statements tell us more about the authors’ views and beliefs than about the women they studied; in a word, they are ideologies”. For these reasons, a figurational-feminist approach may not advance our understanding of gender to any significant degree.

Figurational and feminist sociologists reveal different perspectives and commitments. While feminists declare ideological commitment to its subject matter and the desire for change, figurational sociologists do not necessarily hold an ideological commitment to one particular social group. Figurationalists “retain an ideological commitment to the generation of knowledge (over change) in the first instance, thereby leaving open the continuing charge of value neutrality and maintenance of the androcentric status quo” (Liston, 2009, p. 7). Additionally, feminists privilege a subject matter – women over men, while
figurational sociologists argue the contrary – that the ways in which male and female athletes are actually “bonded to each other makes them pursue the objectives and human requirements they actually do pursue” (Mennell, 1998, p. 138). Liston (2009) draws a sport analogy, mentioning that studying females independently of males, is like studying a football game, but neglecting the strengths and patterns of play between the two teams. Liston (2009, p. 7) concludes that “in developing a distinctly feminist apparatus for understanding gender, perhaps we miss an opportunity to delve into the fundamental interdependence between the sexes”. To highlight these differences is not to claim that one theory is better than another. Rather,

the point here is the degree to which a theory contains ideological presuppositions and assumptions, the extent to which it is oriented more towards ideological issues over the generation of knowledge, and the ways in which it might advocate for change in a particular direction (Liston, 2008, p. 125).

4.7 Conclusion

This chapter has provided an exposition of the core theoretical principles which underpin this thesis. Drawing specifically on the work of Norbert Elias’s figurational or process sociology, it has examined Elias’s conceptualization of power, the importance of interdependence in understanding human relationships, and the socio- and psychogenesis entailed in the changing self-perceptions and emotional and behavioural control of humans over time.
Subsequently these ideas have fed into a critical analysis of the two main foci of this thesis: attitudes towards pain and injury in the “sportsnets”, cultures of risk, etc. that athletes inhabit and construct; and the ways in which we might perceive of sex and gender impacting upon human behaviour and experiences, particularly in relation to pain and injury in sport. In so doing, these discussions have highlighted ways in which the figurational sociological conceptual model might be applied in this study. Before we can undertake that application, however, in the next chapter we must explore the methodological issues pertinent to this study, and outline the specific research design employed.
Chapter 5 – Research Methods

5.1 Introduction

According to May (2001, p. 60) research is a central part of the social sciences and a means to produce knowledge, through which the intellectual development of the social sciences is enhanced. Research is a process that tries to achieve answers to possible questions, which in the case of the social sciences are about the dynamics, context and structure of the social world. This chapter discusses the research strategies, processes, techniques and theoretical considerations that have framed the study of pain and injury in male and female gymnasts. It provides an outline and a justification for the methods used to generate knowledge. It will approach several qualitative and quantitative paradigms and develop several methodological (and ethical) concerns such as "involvement and detachment". Furthermore, it provides in-depth examination and justification of the research tools selected and the suitability of these tools in research underlined by figurational theory. Finally there is a section that develops the processual way used to enter the field and to collect richer data.

5.2 Social Research

Investigators regularly “use social research to raise children, reduce crime, improve public health, sell products, or just understand one’s life” (Neuman, 2007, p. 2). Social research is therefore “a process in which people combine a set of principles, outlooks, and ideas (i.e., methodology) with a collection of specific practices, techniques, and strategies (i.e., a method of
inquiry) to produce knowledge” (Neuman, 2007, p. 2). Applying these ideas to social research in sport, Gratton and Jones (2004, p. 3) argue that our understanding of sport is far from complete, since “changing social, political, technological and economic contexts all influence, and are influenced by, sport. Thus, our knowledge is never absolute, and it is only through continual research that our understanding of sport is maintained and enhanced”.

Elias (1986, p. 4) contends that the aim of social research is “to make known something previously unknown to human beings. It is to advance human knowledge, to make it more certain or better fitting and, in somewhat more technical terms, to extend the fund of human symbols to areas not covered by it before”. In sum, “the aim is (...) discovery” (Elias, 1986, p. 4). Thus, “the discovery, not the method, legitimises research as scientific” (Elias, 1986, p. 4). However, that simple substantive aim (discovery) has been constantly obscured by formalistic discussions, also known as “paradigm wars”, about the “method” of scientific research.

A common subject to arise out of the paradigm wars is that “paradigms are considered to be incommensurable or incompatible in their ontological and epistemological assumptions, as well as their axiology (stance on bias), research strategy (simplified to inductive and deductive) and rhetoric (style of language)” (Blaikie, 2010, p. 223). In this regard, Bloyce (2004) argues that Elias’s work questioned many of the conventional and taken-for-granted assumptions within social research methods. Differently to what numerous social research methods texts might lead us to believe, “rarely can the research process involve such taken for granted, falsely dichotomous decisions as
whether to adopt a qualitative or quantitative research strategy” (Bloyce, 2004, p. 145). Dunning (1996, p. 191) also considers that mainstream textbooks and theories are seen as “falling on the negatively valued side of a set of conventionally perceived and overlapping dichotomies”. The purpose of research then, “stripped of a good many philosophical encrustations (...) is to find out in what way perceived data are connected with each other” (Elias, 1987b, p. 12). Researchers should seek a “two-way traffic between two layers of knowledge: that of general ideas, theories or models and that of observations and perceptions of specific events” (Elias, 1987b, p. 20).

Throughout the previous section of this work, it has been attempted to provide a fairly comprehensive overview of several theoretical assumptions, and sensitizing concepts related to a figurational approach. It seems adequate at this point, to discuss in greater depth the way in which this approach has guided the choice of research strategy, design and thus methods that have been used to generate knowledge. However, it also seems pertinent to discuss certain paradigms and concepts frequently present in research methods texts, which the figurational perspective tries to avoid.

5.3 Epistemology and Ontology

The concepts of epistemology and ontology generally refer to two distinctive subjects and strategies. The researcher’s theoretical concerns are ordinarily underpinned by his philosophical assumptions related to ontological and epistemological positions of the social reality. As Mason (2002, p. 26)
notes, "what you see as a potential data source, or what you see as a method of generating data, will both depend upon and express your ontological and epistemological positions".

Epistemology is “concerned with whether or how we can have knowledge of reality” (Sumner, 2006, p. 92). It is a field that tries to understand “the possibility, nature, sources and limits of human knowledge” (Sumner, 2006, p. 92). Epistemology refers to the “methods of procedure leading to knowledge, or the 'nature of knowledge’” (Bloyce, 2004, p. 146). In relation to one’s epistemological considerations, Bryman (2008, p. 13) argues that a particularly central issue “is the question of whether the social world can and should be studied according to the same principles, procedures, and ethos as the natural sciences”. Epistemological questions should therefore lead “to a consideration of philosophical issues involved in working out exactly what you would count as evidence or knowledge of social things” (Mason, 2002, p. 16). At least three broad epistemological positions can be identified in several research methods literature: “positivism”, “critical-realism” and “interpretivism” (Bryman, 2008; Gratton & Jones, 2004; Neuman, 2007).

A positivist position advocates that the social world exists autonomous of our knowledge of it and that knowledge results from clear “facts”. It sustains “the application of the methods of the natural sciences to the study of social reality and beyond” (Bryman, 2008, p. 13). This position may therefore be characterized “in terms of the prediction and explanation of the behaviour of phenomena and the pursuit of objectivity, which is defined as the researcher’s “detachment” from the topic under investigation” (May, 2001, p. 10). From this
epistemological approach, absolute facts cannot be influenced by the researcher's values or subjectivities. Thus, the research process should have at least these characteristics: “control” (the researcher is able to control one variable and assess the influence that it has on another variable), “replication” (the same results should occur if the experiment is repeated) and “hypothesis testing” (the creation of a hypothesis which can then be systematically tested) (Gratton & Jones, 2004). Positivists believe that “different observers looking at the same facts will get the same results if they carefully specify their ideas, precisely measure the facts, and follow the standards of objective research” (Neuman, 2007, p. 42).

Realism shares with positivism not only the aim of explanation, but also the believe that the natural and social sciences “can and should apply the same kinds of approach to the collection of data and to explanation, and a commitment to the view that there is an external reality to which scientists direct their attention” (Bryman, 2008, p. 14). This perspective argues that the knowledge people have of their social world affects their behaviour and, unlike the propositions of positivism, the social world does not simply “exist” independently of this knowledge (May, 2001). Therefore, causes are not simply determining of actions (like the “cause-effect” positivism perspective) but “must be seen as “tendencies” that produce particular effects” (May, 2001, p. 12). In other words, the objective of social research is not simply to gather observations on the social world, but “to explain these within theoretical frameworks which examine the underlying mechanisms which inform people’s actions and prevent their choices from reaching fruition” (May, 2001, p. 12). Bryman (2008) contemplates the existence of two distinct forms of realism:
“empirical-realism” and “critical-realism”. Empirical-realism perspective asserts that reality can be understood with the use of “appropriate” methods. It is also known as “naïve realism” because it assumes that there is a perfect, or at least very close, correspondence between reality and the term used to describe it. On the other hand, critical-realism is a specific form of realism that “consists not only of events that are experienced but also of events that occur whether experienced or not, and of the structures and mechanisms that produce these events” (Blaikie, 2010, p. 101). According to critical-realism, the aim of science is to “identify the structures at work that generate those events” (Bryman, 2008, p. 14).

The third possible epistemological position is interpretivism. Contrarily to realism, it is a term given to a contrasting epistemology to positivism. It is “predicated upon a view that a strategy is required that respects the differences between people and objects of the natural sciences and therefore requires the social scientist to grasp the subjective meaning of social action” (Bryman, 2008, p. 16). According to Mason (2002, p. 56) interpretive approaches are distinctive because they “see people, and their interpretations, perceptions, meanings and understandings, as the primary data sources”. An interpretive approach therefore not only sees people as a primary data source, but seeks their perceptions and experiences or what Blaikie (2010, p. 87) calls the “‘insider view’”, rather than imposing an “‘outsider view’”. Therefore, the process of understanding this socially constructed reality is “dialogic” because it “allows individuals to communicate their experiences within a shared framework of cultural meanings” (Blaikie, 2010, p. 52). Contrariwise, the process in the natural sciences is “monologic” as it frequently implicates the “technical
manipulation by the researcher of some aspect of nature” (Blaikie, 2010, p. 52). Thus, “in the latter, the researcher is a “disengaged observer” who stands in a subject-to-object relationship to the subject-matter while, in the former, the researcher is a “reflective partner” whose relationship is that of subject to co-participant” (Blaikie, 2010, p. 52).

Ontology is considered a distinct concept from epistemology and is “concerned with the existence of, and relationship between, different aspects of society, such as social actors, cultural norms and social structures” (Barron, 2006, p. 202). Epistemology refers to the nature of knowledge, while ontology refers to the nature of reality (the nature of social entities). Ontological assumptions include “what kinds of social phenomena do or can exist, the conditions of their existence, and the ways in which they are related” (Blaikie, 2010, p. 92).

Ontological considerations often divide their discussions between two positions: 1 – social entities can and should be regarded as objective entities that have a reality external to social actors (objectivism); and 2 – social entities can and should be regarded as social constructions built up from the perceptions and actions of social actors (constructionism) (Bryman, 2008). Objectivism is then an ontological position that entails that social actors are objective entities that exist independent of our awareness. This perspective also identifies that social phenomena and their meaning have an existence that is independent and beyond our reach or influence. This perspective may complement epistemological positivism and these positions are often observed
in the natural sciences such as physics and chemistry and, within sports sciences, the disciplines of biomechanics and physiology.

The other ontological position, constructionism, is concerned with the study of ways in which the social world is constructed through social interactions. Thus, human beings are seen as ‘produced’ through social interaction “rather than through genetic programming and biological maturation” (Hepburn, 2006, p. 38). This ontological position asserts that social knowledge is not definitive. Rather, it is a version of a social reality so it requires a continuous state of revision. Furthermore, the knowledge and interpretations of social phenomena are understood as able to impact upon the construction of social reality. This position may complement epistemological interpretivism, with both perspectives seeking to explore: socially constructed realities; how social actors perceive social phenomena; and the ways in which actors behave according to that perceived social phenomena.

In sum, and according to the authors previously cited, epistemology refers to the nature of knowledge, and on the other hand, ontology refers to the nature of reality. Figurationalists however, tend not to write about this dichotomy “because there are more object-adequate ways of understanding the focus of our study: human relationships” (Bloyce, 2004, p. 146), and because epistemology and ontology may represent a false dichotomy. Specifically, even though they represent two opposed considerations, they are integrally related and interdependent, so there seems little sense in discussing them independently. That is to say, “knowledge and reality are not separate entities”
(Bloyce, 2004, p. 146). Indeed, knowledge is part of the reality, they are part of the same process. Elias (1986, p. 4) also criticizes “natural scientists” who, together with the type of philosophers of science who are deeply committed to the belief in the primacy of law-like natural sciences, have used all their intellectual strength and their social power in order to convince others that the ‘method’ of the natural sciences, and in particular that of classical physics, is the only legitimate method of scientific discovery.

Elias (1986, p. 4) asserts that the defenders of this view recurrently have very little experience in social science research, so “their research strategy is mostly philosophical or orientated towards a ‘history of ideas’ tradition”. The researcher should realize that social structures “can be better explained and understood if these structures are thought of not simply as congeries of particular individuals known by name, but also as impersonal and to some extent self-regulating, self-perpetuating configurations” (Elias, 1978b, p. 78). Elias (1986, p. 4) is certain “that it is possible to advance knowledge and to make discoveries in the field of sociology with methods which can be very different from those of the natural sciences”. For instance, within the social phenomena we call sport, participants are influenced by several social “forces” or actors, but also have a degree of “free will” to respond to such forces in an active way. They are not inanimate objects, whose behaviour can be interpreted purely in terms of casual relationships, or predictions that X will always cause Y (Gratton & Jones, 2004). It is then important to take into account intangible concepts in explaining our sporting behaviour, such as feelings, emotions and freedom.
5.4 Inductive and Deductive Approaches

Another common dichotomy in research textbooks is between the deductive and inductive approaches. Gratton and Jones (2004) distinguish these two theories arguing that the deductive approach is applied to collect data to test existing theories, and the inductive approach is applied to collect data to develop a theory. Induction is generally described as moving from the specific to the general, while deduction begins with the general and ends with the specific. It is common to associate deduction with positivist and quantitative research and to associate induction with interpretative and qualitative studies. On the other hand, Elias (1978b, p. 58) argues that “the separation of theory and method proves to be based on a misconception”. He “recognised that the human thought processes are an intricate and continuous combination of movements from the specific to different levels of generality and vice-versa” (Bloyce, 2004, p. 152). In fact, there is a “constant relationship that exists between social research and social theory” (May, 2001, p. 29). Dividing research into inductive and deductive approaches is a simplistic, formalistic and distorting characterization of this process. Instead of just applying an existing theory, we should try to test it and only by doing that, will we be able to achieve greater levels of detachment. There should be an ongoing relation between theory and research. This process “involves researchers in an attempt to come to terms with the mutual contamination of theory and evidence and to continually probe the adequacy of their findings” (Maguire, 1988, p. 192). That is to say, “if we approach research in a frame of mind that is more committed to a desire to understand more adequately rather than a greater commitment to sustaining pre-formed views, then we are more likely to want to test as opposed
to confirm theories” (Bloyce, 2004, p. 152). This does not mean that theory must be always tested through empirical research. Instead, figurational sociologists advocate “a constant relationship between social theory and social research in which both endeavours are modified through a combination of reflection, experience and practice” (May, 2001, p. 29). The processes of theory formation and empirical enquiry are therefore interwoven and indivisible.

Although research is more or less guided by theory, the theory should not be seen as static and closed to modifications. Bryman (2008, p. 11) recognizes an association between deduction and induction arguing that “just as deduction entails an element of induction, the inductive process is likely to entail a modicum of deduction”. After analysing (and interpreting) the data gathered, the researcher may want to collect further data “in order to establish the conditions in which a theory will or will not hold” (Bryman, 2008, p. 11). Such a general strategy is often called “iterative” as it involves a weaving back and forth between data and theory testing. In conclusion, theory (and the entire research process) should be treated as sensitizing and open to adaptation if it is found to be relatively unproductive or too limiting.

Having outlined several “theoretical underpinnings” guiding figurational research, it now seems relevant to discuss one's chosen “research strategy”, and also to develop “involvement and detachment” issues.

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3 This strategy is evident in “grounded theory”. Grounded theory has been defined as “theory that was derived from data, systematically gathered and analysed though the research process” Malcom (2006). In this theory, the data collection, analysis, coding and theory stand in close relationship to one another. Research is seen as a constant process in which the researcher may at any time reformulate the hypotheses, the theory and collect further data.
5.5 Research Strategy

Another distinction that is often made in research methods texts refers to the characteristics of what data are collected – qualitative and quantitative research. Qualitative research is described by Gratton and Jones (2004) as a non-numerical analysis, subjective, non-traditional approach and its objectives are the description, understanding and meaning – for example, participant or direct observation, in-depth interviews, focus groups. On the other hand, the same authors define quantitative research as that which uses numerical analysis to measure social phenomena or to provide facts. It involves the use of statistical analysis and the use of samples with the intention of generalizing to populations – for example polls, surveys. It is also widely accepted in traditional social science research texts that quantitative and qualitative perspectives are viewed as separate and distinct in terms of their epistemological and ontological considerations and also the connection between theory and research (Bryman, 2008).

Quantitative research can be regarded as a research strategy that emphasizes quantification, where the purpose is to generate hypotheses that can be tested, and it is often characterized as a more or less linear process of steps from theory to conclusions. This strategy normally entails a deductive approach to the relationship between theory and research, therefore emphasis is given on testing theories or hypotheses throughout the research process (Bryman, 2008). Quantitative research also often incorporates the practices and norms of the natural scientific model and of positivism in particular. It is guided by precise definitions, and by a constant examination of aspects such as
causality, objectivity, reliability, replicability and validity. Additionally, it embodies a view of social reality as external and independent of social actors. Gratton and Jones (2004) suggest that in sport this approach can be applied to measure how much money has been invested into a particular sport, to measure performance for example in terms of medal counts at major events such as the Olympics, or to measure a possible relationship between these two factors. Thus, “variables are directly measurable, and easily converted into numerical form, which can then be statistically analysed” (Gratton & Jones, 2004, p. 21).

In contrast, qualitative methods attempt to see the world from the point of view of social actors, more specifically, the ways in which they understand, interpret and consequently behave in their own social world. It focuses on qualities that are not quantifiable such as feelings, thoughts and experiences, and thus is commonly associated with interpretive approaches to knowledge. Qualitative research strategies predominantly place emphasis on the generation of theories, being then associated with inductive approaches. In opposition to positivism, qualitative research rejects the practices and norms of the natural scientific model because the subject matter of the social sciences is fundamentally different from that of the natural sciences (Bryman, 2008). Accordingly, emphasis is given to the ways in which individuals interpret their social world, reflecting the distinctiveness of social actors against the natural order. Social reality is then understood as “a constantly shifting emergent property of individuals’ creation” (Bryman, 2008, p. 22). In sport, much of the quantitative research provides undeniably relevant and useful knowledge. However, the need to understand the underlying experiences, feelings and emotions related to behaviour has increased the importance of qualitative
studies, to the extent now that they are “no longer seen as ‘inferior’ to quantitative research” (Gratton & Jones, 2004, p. 23). Qualitative research is then appropriate to develop knowledge about the values, beliefs, actions, motivations and needs of those who belong to the sport figuration.

Neuman (2007, p. 138) recognizes that although qualitative and quantitative research differ in significant ways, both styles share the basic principles of science: both “try to measure in a consistent way, and both seek a tight fit between the abstract ideas they use to understand [sic] social world and what occurs in the actual, empirical social world”. Again, ‘figurationalists’ contend that inflexible paradigms between quantitative and qualitative methods are reductive. We must consider that “quantitative research rests on qualitative assumptions at the initial and interpretative stages” (Bloyce, 2004, p. 153). On the other hand, qualitative research data can be measured on quantitative assumptions as, for example, during content analysis. This process may involve selecting certain ideas, words, phrases, images or scenes according to the frequency with which they appear. While a quantitative content analysis seeks to show patterns or regularities, a qualitative content analysis emphasizes the fluidity and interpretations of that content. In a sense, a quantitative researcher is a “counter” and the qualitative researcher is a “reader”. Nevertheless, these two processes are not on opposite sides. They can be aligned and they may be complementary at any time of the research process. A systematic “counting” may be empty of value if the researcher is not able to “read” and interpret the data. Therefore, “the use of quantitative analysis does not sidestep the need for researchers to account for the interpretations they have employed in analysing” (May, 2001, p. 195) the data. These clear relations between qualitative and
quantitative methods could help to understand why strict and rigid differentiations between the two may be reductive and unhelpful.

In summary, research guided by a set of positivist epistemological and objectivist ontological positions tends to stimulate the use of research methods usually defined as “quantitative”. On the other hand, studies that are underpinned by a combination of constructionist ontological and interpretivist epistemological positions would tend to use methods that reflect an effort to reveal meanings, values and interpretations, such as interviewing. A figurational perspective is that a “methodological framework flows from the nature of the problem to be investigated, and as such it is inappropriate to be limited on the basis of any particular individual strategy” (Bloyce, 2004, p. 154). The great strength of a more pragmatic approach to social science research, is its emphasis on the connection between epistemological concerns about the nature of the knowledge that we produce and technical concerns about the methods that we use to generate that knowledge. This moves beyond technical questions about mixing or combining methods and puts us in a position to argue for a properly integrated methodology for the social sciences (Morgan, 2007, p. 73).

Another paradigm discussed is “involvement and detachment”. Figurationalists argue that this is a false dichotomy, thus it is important to develop these conceptions next.

5.6 Involvement and Detachment

How far it is possible for social science to be “objective” “has been a perennial topic ever since the turn of the 20th” (Mennell, 1998, p. 159). There
has been a long debate since then about the influence of values in the pursuit of social scientific knowledge. Weber (1946) accepted that a social scientist’s personal commitment to certain social or political beliefs could legitimately play a part in his or her selection of topics for research, and in evaluating the practical implications of their findings and, according to Kilminster (2004), Elias wrote in 1956 his first systematic statement of involvement and detachment theory with Weber’s ideal of “value-freedom” in mind. Nevertheless, Kilminster (2004, p. 25) recognizes that Elias departed “from Weber in significant ways”. Elias stepped away from Weber’s “individualism” “as well as the solipsism of phenomenology, and started from the sociological assumption of interdependent people [figurations] rather than congeries of individuals” (Kilminster, 2004, p. 26). Elias was also critical of writers such as Weber who “took for granted the self-awareness, capacity for self-regulation and all-round conscience formation of modern people, including their own” (Kilminster, 2004, p. 27). Accordingly, Elias identified (and criticized) a classic dichotomy between those who think it is possible to view the world through value-free eyes and those who think that it is impossible to pursue a value-free approach.

From a figurational point of view, it is acknowledged that a wholly objective or value-free sociology is impossible, nevertheless, it is important that we strive, as far as it is possible to do so, to distance ourselves from our values in order that our analysis is less subject to the distorting and biasing effects of ideological preoccupations. It is then recognized that doing this could help the researcher to develop a higher level of understanding, and a more adequate explanation of the social processes which s/he is seeking to comprehend. This is a rejection of traditional and absolutist conceptualizations that conceive of the
world in a completely objective or subjective manner. Instead of just accepting that we cannot be wholly value free, we should think in terms of relative adequacy. For Elias, these terms should be seen not as polar contrasts but on “a continuum along which blends of ‘involvement’ and ‘detachment’ are located” (Mennell, 1998, p. 160). As tools of thinking and research, “‘involvement’ and ‘detachment’ would remain highly ineffectual if they were understood to adumbrate a sharp division between two independent sets of phenomena” (Elias, 1956, p. 227). Therefore, the relationship between involvement and detachment does not infer that as involvement increases, so detachment decreases (or the reverse). Nor is the relationship a dualism between two mutually exclusive opposites. Rather, “it is to be seen as a dynamic tension balance embodied in social activities” (Kilminster, 2004, p. 31).4

In its guidance notes on research, the British Sociological Association (2002, p. 2) suggests that to maintain professional integrity researchers “should be clear about the limits of their detachment from and involvement in their areas of study”. But what is the best balance between involvement and detachment, and can this be measured? There is no table or method to precisely calculate the level of involvement of a person, and it is very difficult to say when a person is too or not very involved. As Elias (1956, p. 226) argues, “one cannot say of a man’s outlook in any absolute sense that it is detached or involved (or, if one prefers, “rational” or “irrational”, “objective” or “subjective”)”. While involvement can be seen in people’s behaviours, this does not give us an exact notion of how much a person is emotionally involved. There will never be precise

4 Another example of a continuum and dynamic tension balance in social activities was discussed in the section 3.3.1 – “Gendered Ideologies and Sport”, regarding the masculinity ethos and male dominance.
guidelines or mechanisms to clearly obtain detachment. However, Dunning (1992) proposed five ‘rules’ of procedure for using Elias’s involvement and detachment concept throughout one’s research. The first rule is to “avoid the ‘retreat to the present’” and to locate the data or our research “historically and in the wider system of social interdependencies in which they are embedded” (Dunning, 1992, p. 252). This ‘wider’ and ‘processual’ knowledge will lead to greater detachment. Secondly, Dunning (1992, p. 253) advises researchers to explore the networks of interdependence (or figurations) “as dispassionately as possible to contribute to knowledge rather than to help in the achievement of some short-term goal”. This will lead necessarily to the third procedure which is to attempt to overview the process of research and the data gathered through the eyes of others – a “they” perspective instead of a “I” perspective. Additionally, it is also important to relate our own work to the existing body of knowledge. This can be achieved by working intensively on the “state of the art” and then, being able to discuss and interpret that “state of the art” in relation to our own findings. Dunning’s fourth rule relates to the ways in which research should be guided by both theory and evidence. Researchers (in association with the third rule) should relate their observations to a body of theory and their theories to a body of observations. For figurational sociologists, this implicates striving for relatively high levels of detachment in research by utilizing scientific theories that are more “object-orientated” than ideologies. By testing theories and not just corroborating them, we are more likely to develop “reality-congruent knowledge” (Dunning, 1992, p. 253). The fifth rule, unlike the others, points in the involvement direction. It asserts that it is important to work in areas in which the researcher is personally interested and involved. That knowledge will allow
him/her not only to go more in-depth, but also to more adequately interpret the findings. As human beings studying a social world of which they are always a part, researchers are, inevitably, emotionally involved with, and thus have an emotional orientation toward, the subject of study (Green, Perry, & Thurston, 2004). It is, as Waddington (2000, p. 4) pointed out, the “emotional reactivity” that comes with involvement that poses the biggest threat to developing a “reality-congruent” view of the social world, because it lessens the likelihood of researchers being able to bring their critical intellectual faculties under control. Figurational sociologists argue that greater emotional control of ideological preferences via a process of distancing oneself from what is being studied (exercising detachment) offers the greatest likelihood that human beings will be able to develop more adequate knowledge of society. Putting it another way, taking the ‘detour via detachment’ – striving to hold one’s emotions and value-commitments momentarily in check in order to focus on the research object per se – increases the chance that one will be able to come up with adequate diagnoses and find workable solutions (Dunning, 1999, p. 8).

For example, being involved in sport as a former practitioner and as a physical education teacher, but never having been directly involved in gymnastics competitions, may help the researcher to have some insight to explore and interpret pertinent areas, while at the same time, maintaining a relatively detached position on the gymnastics figuration. In conclusion, Dunning (1992, p. 254) contends that it essential to “gain distance from our objects of research and from ourselves, and then to “get back in””; in other words, “secondary re-involvement”. The subject of involvement and detachment will be approached again during the section about semi-structured interviews. For now, it seems
pertinent to focus our attention on the research design applied in the present study.

5.7 Case Study Research Design

Once the research objectives are developed, the role of theory is clarified, and the conceptual framework is developed, it is important to consider what data can provide relevant information to answer the research questions and what is the best way to collect them. A carefully considered research design will allow researchers to “systematically collect the data you need, whilst at the same time maximising the reliability and validity of your findings” (Gratton & Jones, 2004, p. 92). Therefore, the research design is the ‘overall blueprint’ or the framework that guides the researcher in the data collection stages. According to Denscombe (2010), to decide which strategy is likely to work best, the researcher needs to consider three key questions:

– Is it suitable? In themselves, research strategies are neither ‘good’ nor “bad”, nor are they “right” or “wrong”. It is only in relation to how they are used that they should be questioned. They can only be judged in relation to the purpose for which they are used, thus, it is better to think of strategies in terms of how useful they are and how appropriate they are.

– Is it feasible? The choice of strategy needs to take into account certain practical aspects of conducting research, such as, data accessibility and the need to meet deadlines. Before conducting a study, the researcher must be sure that s/he will have access to the kinds of people, contexts, events and
documents that will be crucial for the success of the research. This might be a matter of getting the necessary authorization to contact people (for example authorization from a sport federation to talk with players, doctors and coaches), enter locations (for example training centres during practicing days) or view/access documents.

- Is it ethical? Research ethics are an over-riding concern when it comes to the choice of strategy. Probably, the primary ethical principle is that no one should suffer any kind of harm (in a wide-ranging sense) as a result of participation in the research. There are certain standard measures which social researchers are expected to put in place to minimize the risk of harm. These normally involve guarantees that: participants will remain anonymous; data will be treated as anonymised; participants understand the nature of the research and their involvement; participants voluntarily consent to being involved; researcher will operate within the law and will be “open” and honest. It is also very important that researchers think carefully about the influence of their personal involvement with the research, and its possible impact during all stages of the research process (Denscombe, 2010).

The answers to these three questions might point to a particular strategy standing out as the most suitable for the task at hand. However, it is also possible that no single strategy stands out as the only choice at this stage. It is normal to assume that each choice brings with it a set of advantages and disadvantages, a set of strengths and weaknesses, in relation to the specific nature of the research project being considered. This is why it is so important that the researchers are able to justify their choice in terms of feasibility, in
terms of the relevance of the data selected to the research questions, while at
the same time taking into account the largest number of ethical considerations
possible (Denscombe, 2010).

With these three questions in mind, the research design selected for this
study was the “case study”. A case study research tries to “examine, in depth,
many features of a few cases over duration of time” (Neuman, 2003, p. 33). It
involves the intensive and detailed study of a specific case, which in the
sporting cases drawn in our study are the participants in the interviews and in
the overt observation. Case study research is concerned with the complexity
and nature of the case in question. Our option for a case study is “based upon
the argument that understanding human activity requires analysis of both its
development over time, and the environment and context within which the
activity occurs” (Gratton & Jones, 2004, p. 97). Thus, this research design can
be used to gain a “holistic understanding of a set of issues, and how they relate
to a particular group, organization, sports team or even a single individual”
(Gratton & Jones, 2004, p. 97). We may even argue that:

the logic behind concentrating efforts on one case rather than many is
that there may be insights to be gained from looking at the individual
case that can have wider implications and, importantly, that would not
have come to light through the use of a research strategy that tried to
cover a large number of instances (...). The aim is to illuminate the
general by looking at the particular (Denscombe, 2010, p. 53).

One of the major criticisms of case study research is that, because it is
an in-depth study which focuses on particular relationships and processes, the
findings only embody the ideas or representations of those participants. In other
words, “its dependence on a single case renders it incapable of providing a
generalizing conclusion” (Tellis, 1997, para. 13). Some critics even state that “as
each case study is equal to one research observation, hundreds of case studies are required to produce any meaningful results. Otherwise, they could be only used for explanatory purposes, not scientific justification” (Vissak, 2010, p. 375). Despite these critics, figurationalists argue that case study research has a great potential “for extrapolation from the particular to the general” (Bloyce, 2004, p. 155). This type of research would help us to connect the micro-level, or the actions of individual people, to the macro-level, or large scale social structures and processes. Players are enmeshed in figurations that “shape individual processes of growth and development, and the trajectory of individual lives” (Loyal & Quilley, 2004, p. 5). As for this, many of the identifiable characteristics of a case study “are dependent upon and a reflex of the larger society that can only be explained with reference to their specific connections with it” (Block, 1988 as cited in Bloyce, 2004, p. 155). A case study approach “has the potential to deal with the subtleties and intricacies of complex social situations” (Denscombe, 2010, p. 60). Therefore, with that knowledge, and by analysing “significant” shared features of other(s) figuration(s), the researcher may be able to extrapolate, at least to some extent, the gathered findings. Thus, the logical consistency and empirical similarity to other studies may suggest a relatively high degree of reliability. Furthermore, case study research can be viewed as having more potential for extrapolation from the particular to the general than is sometimes acknowledged, not least in terms of consideration of how the findings of one study compare with those of other similar study. For example, Young et al. (1994) tried to examine how participation in physically demanding sport, with its potential and actual injurious outcomes, both challenges and reinforces dominant notions of masculinity. They recognized that
the findings of their case study (semi-structured interviews) represent only the interpretations of the meanings of sport injuries expressed by the participants, even though, as the researchers were also three former players in “aggressive sports”, they felt confident that the data decoded was accurate and may have potential for extrapolation.

5.8 Methodological Triangulation

A traditional criticism of a qualitative approach is that it lacks objectivity, at least when compared to a quantitative approach. To reduce the likelihood of biased assumptions and misinterpretations, a methodological practice commonly employed for qualitative casework is “triangulation”. The idea of triangulation was imported from land surveying, trigonometry and from geometry into the methodological literature – admittedly in a rather metaphorical sense (Flick, 2004). Triangulation in social sciences was probably first used in the work of Campbell and Fiske (1959), but Denzin (1970) was one of the first authors to start employing this term more broadly in social sciences. Triangulation has been generally considered a process of using multiple perceptions or perspectives to explore a phenomenon and/or to answer research questions. According to Flick (2009, p. 444), triangulation can be used to enhance qualitative research, and in some cases, “it can be an approach to do qualitative research in an appropriate way”.

However, triangulation may serve different purposes, “depending on the research questions, research design and research results: the reciprocal
validation of results on the one hand, or the supplementing of different viewpoints to form a unified picture of the object of investigation on the other hand” (Kelle & Erzberger, 2004). Furthermore, at least five different forms of triangulation are usually identified: Analysis Triangulation\(^5\); Data triangulation\(^6\); Investigator triangulation\(^7\); Theoretical triangulation\(^8\) and Methodological triangulation. It is the latter that this research will employ.

Methodological triangulation is regarded as the use of at least two methods in studying the same phenomenon and it has been widely used in the social sciences (Hussein, 2009). Denzin (2009) divides methodological triangulation into two subtypes; that is the between- and within-method of triangulation. The between-method triangulation, also known as across-method triangulation, involves combining and utilizing both qualitative and quantitative methods in studying a single phenomenon. According to Denzin (1970), this triangulation subtype can be used for the aim of achieving convergent validity and testing the degree of external (generalizability) validity. On the other hand, within-method type of triangulation implies that different complementary methods within a given single paradigm are used in data collection and analysis. This is the case when a researcher uses at least two different methods within the qualitative or quantitative paradigm, as for example in the case of this research – overt participation and semi-structured interviews. Denzin (1970,

\(^5\) Or the data analysis triangulation, it is the use of more than two methods of analysing the same set of data for validation purposes.

\(^6\) Entails gathering data through several sampling strategies and/or different sources, so that slices of data at different times and social situations, as well as on a variety of people, are gathered. According to (Bryman, 2008, p. 541) there are three types of data triangulation; “namely”, “time”, “space” and “person”.

\(^7\) Refers to the use of more than one researcher in the field to gather and interpret the same data for the purpose of supporting or refuting findings since different theories help researchers to see problem at hand using multiple lenses.

\(^8\) Refers to the use of more than one theoretical viewpoint in interpreting data.
1978) argues that within-method triangulation involves crosschecking, thus being largely used in qualitative approaches to increase (internal) consistency. The goal of methodological triangulation is described by Denzin (1978, p. 304) as following: “a complex process of playing each method off against the other so as to maximize the validity of field efforts”.

Several criticisms have been directed at Denzin's initial ideas. Silverman (1985, p. 21) criticizes Denzin's assumption that triangulation reveals a master reality in terms of which all accounts and actions are to be judged. This casts great doubt on the argument that multiple research methods should be employed in a variety of settings in order to gain a 'total' picture of some phenomenon (...). What goes on in one setting is not a simple corrective to what happens elsewhere - each must be understood in its own terms. This critique points at Denzin's conception of triangulation as a strategy of validation in the classical sense of the meaning, which assumes one reality and one conception of the subject under study independent of the special methodical approach. Similarly, Fielding and Fielding (1986, p. 33) condense their critique of Denzin's conception in the following argument:

Theoretical triangulation does not necessarily reduce bias, nor does methodological triangulation necessarily increase validity. Theories are generally the product of quite different traditions so when they are combined, one might get a fuller picture, but not a more 'objective' one. Similarly different methods have emerged as a product of different theoretical traditions, and therefore combining them can add range and depth, but not accuracy.

A central point of these critiques is according to Flick (1992) the “technicistic” conception of triangulation in Denzin's initial perspective. Although Denzin “suggests triangulating theoretical perspectives, too, his concept of

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9 See also section 5.3 – “Epistemology and Ontology” with the discussion about ontology, particularly about objectivism.
methodological triangulation as a strategy aiming at validity neglects theoretical differences between methods and the way each of them constitutes the research object” Flick (1992, p. 45). Furthermore, Flick (1992, p. 45) also argues that “in the idea of playing methods off against each other and in the idea of the same phenomenon, not only the complexity of triangulation in general but so are the potentials of this strategy are simplified and artificially reduced”.

Denzin (1989, p. 236) revised his ideas trying to distance his theory from the triangulation/validation closed relation: “Triangulation, or the use of multiple methods, is a plan of action that will raise sociologists above the personal biases that stem from single methodologies”. Denzin’s revised approach is that triangulation is “seen less as a validation strategy within qualitative research and more as a strategy for justifying and underpinning knowledge by gaining additional knowledge” (Flick, 2004).

One should not adopt a naively optimistic (and positivist) view that the combination of data from different methods will unproblematically add up to produce a more accurate or complete picture. In fact, a possible disadvantage of having two methods combined is that it will increase the complexity of interpreting data. In relation to this, Hammersley and Atkinson (2007, p. 184) contend that

data must never be taken at face value. It is misleading automatically to treat some as true and some as false. Rather, what is involved in triangulation is a matter not of checking whether data are valid, but, at best, of discovering which inferences from those data seem more likely to be valid.
Piecing several perspectives together does not mean that at the end the errors cancel each other out to produce a net effect of “truth”. A more theoretically enlightened approach to triangulation is to see it as a way of adding complexity and depth to the data and analysis (Marvasti, 2004). This view is consistent with an Eliasian approach. Figurations are so complex and in constant change, that triangulation might be the best strategy to study them in that it provides a parallel to the “detour via detachment” which Elias (1956, p. 229) recommended. The qualitative researcher should be interested in diversity of perception, even the multiple figurations or realities within which people live. But one may say that observing a figuration through several perspectives and using different perspectives does not mean a complete understanding nor exclude other possible interpretations, but may produce more reality-congruent knowledge. No observations or interpretations are perfectly repeatable. Most importantly, triangulation may enable the research method to be designed to maximize the available access to the phenomena under study and seek to exploit the insights of different methodological strategies.

5.9 Overt Observation

Observation has been characterized as “the fundamental base of all research methods” in the social and behavioural sciences (Adler & Adler, 1994, p. 389). In a broader sense, observation is the action or process of closely witnessing, detecting, perceiving or monitoring something or someone, during a short or long time. Observations enable the researcher to describe existing situations using the five senses, providing a “written photograph” of the situation
under study (Erlandson, Harris, Skipper, & Allen, 1993). Therefore, all studies rely on the act of observation, if not to collect data, at least to analyse and to decode the data collected. For example, “interviewing as a data collection technique employs observational methods to note body language and other gestural cues that lend meanings to the words of the persons being interviewed” (Angrosino, 2005, p. 729). More specifically, social scientists are observers of human activities and bonds, taking into account the physical and temporal settings (among other things) which define figurations.

As a distinct methodological strategy, observation has its historical roots in both anthropology and ethnology and the social reform movements of the late 19th and early 20th centuries in the United States of America (USA) and Great Britain (Luders, 2004). However, it is in Chicago that a group of researchers during the 1920s and 1930s (Park, 1928, 1939; Park & Burgess, 1921; Thomas & Znaniecki, 1918) started the tradition of urban sociology, and encouraged students to apply extensive participant observation and reporting. Later, this movement became known as the “Chicago School”. The Chicago School tradition of research tried to merge two intellectual traditions: pragmatism and formalism.

Pragmatism “emphasized that social life is not fixed, but dynamic and changing” (May, 2001, p. 148). If people’s social lives are constantly changing, becoming part of their lives may be a good strategy to understand how and why it changes. The key point here is that knowledge in social sciences should not be concentrated on theory testing, as deductive processes. Knowledge comes from experience and the undertaking of detailed and meticulous inquiries.
through which understandings are generated, as inductive processes (May, 2001). Yet, this perspective tended to be too extreme regarding the degree of participation one should have in order to clearly understand the phenomena under study. For example, Rock (1979) contends that one must become part of phenomena in order to understand them. On the other hand, the formalism tradition contends that while social relationships may differ from each other, they take forms that display similarities. In this way, we do not simply talk about one setting or group being unique, but ask the extent to which it displays similarities or is typical to other groups or settings – in other words generalization. A criticism can be made of this perspective. Not all social phenomena can and should be generalized. In fact, observation might be important to help understand the particularities of a specific figuration (case study).

There are different distinctions between observational methods. For example, Gold (1959) distinguishes four types of participant roles: the complete participant; the participant-as-observer; the observer-as-participant; and the complete observer. Another distinction, and probably the most common, is between the participant and non-participant observer. In the non-participant settings, the researcher has no direct contact with the phenomena under study, while on the other hand, the participant observer can have different degrees of contact with the phenomena being studied. Schensul, Schensul, and LeCompte (1999, p. 91) define participant observation as "the process of learning through exposure to or involvement in the day-to-day or routine activities of participants in the researcher setting". But when does observation become participant observation? Similar to what as been discussed about the involvement-
detachment in section 7.6, it is a question of degree. Much of what is referred to as participant observation is not really participant observation in its pure form because it involves the researcher attaching him/herself to a particular group, but the group in question is aware that s/he is not one of them. In these cases, the researcher tends to move around with the group, observing them at close quarters, but not necessarily participating in all their activities. In some senses, it might be more appropriate to refer to this approach as overt observation rather than participant observation.

The process whereby a researcher approaches a group, revealing his/her identity and requesting access, requires considerable tact. The approach work involved in gaining access and contacting directly a group requires careful thought and, of course, the strategy adopted will vary from group to group. To become part of a social scene and participate in it requires that the researcher becomes familiar to the group and accepted to some degree. A careful background study of the figuration should be done. This initial study would help the researcher to better understand the figuration particularities s/he is going to observe, and at the same time, it would help him/her to better integrate into the “group”. Hence, the period and process of “moving into a setting is both analytically and personally important” (May, 2001, p. 157). Access may need to be secured through “gatekeepers” (e.g. national federations, coaches), but it will also have to be negotiated and renegotiated with all the people being studied. Thus, ‘access’ is not only a matter of getting approval from relevant authorities to help ‘open doors’ to the necessary contacts and settings. It is an ongoing process, where the researcher tries to establish
him/herself within the figuration, having to adapt his/her role whenever necessary.

Besides trying to get access, the researcher must also seek a role in the field being studied, “and this will usually have to be done at least through implicit, and probably also through explicit, negotiation with people in that field” (Hammersley & Atkinson, 2007, p. 4). The researcher profile (age, gender, skills) should be considered when seeking what role would better ‘fit’. Adams et al. (2010) conducted research in football trying to understand the influence of gendered discourses in organized sport. The participant observation portion of this research was conducted by an author who matched the demographic makeup of the team (white, heterosexual and within the range of the other players) and who had good football skills. Consequently,

as a football player of proven worth to this team (rather than as an outside researcher having to ‘pass’ as a player), social legitimacy was secured, granting researcher access to a world of a) participation practice, b) social and cultural practices, and c) interaction data that would be typically unavailable to most other researchers (Adams et al., 2010, p. 284).

Hence, the researcher role should be as close as possible in order to gain trust, better observe and possibly increase the amount (and consistency?) of data gathered. This technique consists of getting data,

by subjecting yourself, your own body and your own personality, and your own social situation, to the set of contingencies that play upon a set of individuals, so that you can physically and ecologically penetrate their circle of response to their social situation, or their work situation or their ethnic situation, or whatever (Goffman, 1989, p. 125).

On the other hand, the research process should try to alter as little as possible the ordinary routines of the figuration, while seeking to be as empirically
detached as possible in order to produce unbiased, impartial and open-minded observations and reflections. Bernard (2006, p. 344) argues that participant observation involves “immersing yourself in a culture and learning to remove yourself every day from that immersion so you can intellectualize what you’ve seen and heard, put it into perspective, and write about it convincingly”. During participant observation, one needs to establish rapport within a figuration and learn to act in such a way as to blend into the community so that its members will act naturally, then removing oneself from the setting or community to immerse oneself in the data to understand what is going on and be able to write about it. In other words, one needs to maintain a sense of objectivity through distance, or as Elias (1956) mentions, a detour via detachment. For example, Muir and Seitz (2004) developed participant observation among 50 male collegiate rugby teams over the course of four years. They acknowledge that unsolicited commentaries and dialogue between players and their associates “lend valuable insight into the players’ justifications and motivations for engaging in the behaviour” (Muir & Seitz, 2004, p. 306). Still, they also recognized that “researcher immersion into the subculture under study presents issues of compromised objectivity, subject habituation and bias” (Muir & Seitz, 2004, p. 323). However, they try to rationalize their approach based on Thomson’s (1977, p. 104) principle of “going native”:

It is impossible for the sociologist to approach any issue, or problem under investigation without certain preconceived ideas and presuppositions. Obviously, an attempt must be made by the involved observer to recognize and identify such presuppositions. In essence, the whole question of scientific integrity is involved, as it is involved in any scientific investigation. There is nothing to suggest that by adopting the role of involved observer scientific objectivity will necessarily be comprised.
Establishing rapport involves an open, non-judgmental attitude, being interested in learning and listening to others, being aware of the propensity for feeling awkward in a new situation, for a possible culture shock and for making mistakes, the majority of which can be overcome with time and patience, being a careful observer and a good listener, and being open to the unexpected in what is learned (Bernard, 2006). Furthermore, rapport may not be a one-side view. In fact, and according to DeWalt, Dewalt, and Wayland (1998, p. 268), rapport is achieved “when the participants come to share the same goals at least to some extent – that is, when both the “informant” and the researcher come to the point when each is committed to help the other achieve his or her goal”. The objective is to develop sufficient rapport that participants will share insights and information that only insiders would know.

In this sense, Luders (2004) suggests a “flexible research strategy” when doing participant observation. This flexible nature may be closely related with the process of developing rapport. That is because the researcher “must be in a position to adapt methodological procedures and to maintain the balance between epistemological interests and the requirements of the situation” (Luders, 2004, p. 226). A flexible research strategy therefore seems to be “highly dependent on milieu and situation, coloured by the participating informants, the forms and circumstances of their lives and the imponderabilities of everyday life” (Luders, 2004, p. 226). In fact, May (2001, p. 159) contends that “one of the main advantages of participant observation is its flexibility”. Glancy (1986) conducted research on the behaviour of members of local softball teams. She argues that, “the flexibility of the method lent itself to the experience of group process since changes in the group situation, whether due
to maturation or to impinging events, prompted new questions or required altered application of planned methodology” (Glancy, 1986, p. 76).

May (2001, p. 159) also argues that a flexible fieldwork approach is characterized by “a continual process of reflection and alteration of the focus of observations, in accordance with analytic developments" and also by a constant reflection about the researcher’s motivations, beliefs and actions. We may add that May's researcher-centred perspective misses the point that those reflections should also concern actors’ routines and fluctuations. Therefore, this continual flexible approach should comprise all aspects of the figuration in study.

Flexibility may be one of overt participation main advantages, however, Gratton and Jones (2004) listed other possible advantages:

a. Directness – It is possible to witness and record a phenomenon as and when it happens, rather than having to rely on an individual’s recall or perceptions.

b. Natural setting – The researcher is able to observe the phenomenon in its natural setting, allowing him/her to observe the context in which such behaviour takes place and also to experiment that context for himself/herself.

c. Identification of unaware behaviours – Overt observations may allow the researcher to identify behaviours not apparent to subjects in study. The participants may be unaware of how they behave in a particular situation, or believe they act in different ways.
d. Identification of negated or intentionally ignored behaviours – Overt observations may allow the researcher to identify sensitive behaviours that subjects may deny, or behaviours that they are unwilling to associate with themselves.

Gratton and Jones (2004) also listed certain disadvantages:

a. Misunderstanding of the phenomenon – The researcher may misunderstand or be unable to gather relevant data, especially if he/she has little or no fieldwork experience. This may be overcome, at least to some extent, through using observation in conjunction with other methods, such as interviewing. Another very important strategy is, prior to fieldwork, to develop research/knowledge about the figuration that is going to be studied. Nevertheless, observation and its interpretations can be very subjective. Bruyn (1966) assists in this concern by listing six indices of what he calls ‘subjective adequacy’ to enhance the understanding of the researcher (time, place, social circumstances, language, intimacy and social consensus). It is important to point out that Kirk and Miller (1986) associated Bruyn’s perspective with a positivist framework. However, “Bruyn’s ideas do assist in the continual process of reflexivity” (May, 2001, p. 161).

   - Time:
     It is time which often tells us how deeply people feel about certain subjects (…) and how long it takes an outside influence to become a meaningful part of the lives of people (…). Those social meanings (…) cannot be calculated by reference to the temporally limited, stimulus-response framework of the experimentalist (Bruyn, 1966, p. 207).
These ideas can be related to an Eliasian perspective of “process”. Malcom (2006, p. 502) conducted participant observation among female softball players and observed that this research strategy “is particularly well suited for examining processes that unfold over time” and to gain “insight into how athletes are socialized into the sport ethic and the traditional ballplayer attitude toward pain and injury”.

- Place: “The physical environment can have much influence upon a culture (…). Therefore the personal relationships which people acquire in the context of their environment must be a basic part of the record of the participant observer” (Bruyn, 1966, p. 208).

- Social circumstances: “Witnessing a variety of social circumstances that contrast the subject under study increases the observer’s ability to accurately interpret that subject” (Bruyn, 1966, p. 211). May (2001, p. 162) extended these ideas, stating that “the more varied the observer’s opportunities to relate to the group, in both terms of status, role and activities, the greater will be his or her understanding.”
Language: Language, in its broadest sense, represents all forms of communication which enter significantly into the lives of the people studied. Therefore, “language” “encompass not only words and the meaning that they convey, but also non-verbal communications such as facial expressions and bodily gestures in general” (May, 2001, p. 162). Overt participant researchers will learn, become more familiar with and be able to record impressions and any changes in different sorts of “language expressions”.

The observer's recordings become objective, outward manifestations of an inner reality which becomes subjectively understood through the sheer expression of the language. In other words, language threads through subject and object, creating, expressing, and representing the life and character of the people studied (Bruyn, 1966, p. 213).

Intimacy: Certain cultural meanings cannot be understood without gaining intimacy into these private groups. Thus, “every formal structure has both a private and public aspect” (Bruyn, 1966, p. 214). Concerning these private and public aspects, Goffman (1984, p. 129) contends that there tends to be one informal or backstage language of behaviour, and another language of behaviour for occasions when a performance is being presented.

Intimacy may help to achieve information that without it would be impossible to observe. However, it may also
lead to high levels of involvement. Thus, all consequences of a high level of involvement should be considered.  

Social consensus: The observer may be able to confirm his/her interpretations directly with those he/she studies, but in some cases the exigencies of observing make it impossible for him/her to do so. Nevertheless, “the observer can record the ways in which people confirm their meanings among themselves by indicating how assent is given to meanings directly in the conversations of people in their natural setting, or indirectly in ceremonies and general conduct” (Bruyn, 1966, p. 183). Still, this “social consensus” is “a regulative ideal which researchers should aim at, not something which can be easily achieved as such” May (2001, p. 163).

b. Difficulties in data recording – Live recording observations without the help of more obtrusive technologies such as video recording, will never be an easy task. Fieldnotes are the traditional means for recording observational data. Originally these were only handwritten, but now they can also be recorded in tablets or smartphones. Hammersley and Atkinson (2007, p. 142) argue that “fieldnotes are always selective: it is impossible to capture everything”. Moreover, “fieldnotes will depend on one’s general sense of what is relevant to

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10 See previous discussion in Section 5.6.
the foreshadowed research problems”. Spradley (1980) offers two fieldnotes categories. The “condensed account”, which represents a shortened version of what actually occurred, including phrases, words and unconnected sentences, and the “expanded account”, which represents an extension of the “condensed account”. This extended version should be written as soon as possible after each field session, or after making a condensed account. The objective is to fill in details and record things that due to a limited time span were not recorded on the spot. In addition to traditional field notes, Spradley (1980) also advises researchers to record a fieldwork journal with each entry dated. Thus, “like a diary, this journal will contain a record of experiences, ideas, fears, mistakes, confusions, breakthroughs, and problems that arise during fieldwork; it includes reactions to informants and the feelings you sense from others” (Spradley, 1980, p. 71).

According to Gratton and Jones (2004) all field notes should be descriptive (include a description of the setting, the participants, relevant behaviours), detailed, and reflective (any information that may help later interpretation). Accordingly, Spradley (1980, p. 78) gives nine major dimensions of every social situation that could be recorded and serve as a guide when taking fieldnotes:

1. Space: the physical place or places
2. Actor: the people involved
3. Activity: a set of related acts people do
4. Object: the physical things that are present
5. Act: single actions that people do
6. Event: a set of related activities that people carry out
7. Time: the sequencing that takes place over time
8. Goal: the things people are trying to accomplish
c. The effect of the observer on the subjects – Being an active observer and participant may affect, at least initially the subject behaviour. This reinforces the importance of establishing rapport and developing the fieldwork as long as possible.

In conclusion, during overt participation strategy, the “social researcher, and the research act itself, are part and parcel of the social world under investigation” (Hammersley & Atkinson, 1983, p. 234). Spradley (1980, p. 56) calls it an “insider/outsider experience”. Insider because the researcher, at least during a period of time, acts inside the figuration in study; outsider because at the same time the researcher is trying to observe what is happening.

5.10 Semi-structured Interviews as a Research Method

As discussed, research strategy and design are concerned (in a broad sense) with the direction and scale of a research project and its underlying philosophy. On the other hand, research methods “are tools used for the collection of empirical data. They are the means by which the researcher collects or produces different kinds of data” (Luders, 2004, p. 226). Certain methods tend to be associated with certain strategies, designs and theoretical approaches. This may be justified because all these research concepts, in practice, should “work well” together and be logically consistent. However, the option for a research strategy design and philosophy does not dictate the choice of a specific research method. As Denscombe (2010, p. 326) argues, “social
researchers can use a range of methods with any given strategy. There is always an element of choice”. Again, what is most relevant is that the data gathered will answer, as far as possible, with clarity and confidence the research questions. As argued before, figurational researchers stress the notion that a methodological framework should emerge from the nature of the problem to be investigated and not from the researcher’s predetermined philosophical assumptions. In this regard, the researcher should select the most adequate tools and methods to address the specific research questions. In order to select the most adequate tools, the researcher can study various research methods articles. This will help him/her to gather information about those tools. However, the researcher should not select a research tool just because s/he is more familiar with it. Denscombe (2010, p. 4) contends, the key criteria for conducting research are: “whether findings are grounded in empirical material and whether the methods have been appropriately selected and applied to the object under study. The relevance of findings and the reflexivity of proceedings are further criteria”.

Interviews are a method of data collection, information or opinion gathering that specifically involves asking a series of questions. The qualitative research interview “attempts to understand the world from the subjects’ points of view, to unfold the meaning of their experiences, to uncover their lived world prior to scientific explanations” (Flick, 2009, p. 15). Particularly, semi-structured interviews consist of a standard set of questions, or a schedule. However, “the researcher adopts a flexible approach to data collection, and can alter the sequence of questions or probe for more information with subsidiary questions” (Kvale & Brinkmann, 2009, p. 1). Interviewers are able to adapt the interview
pace to approach any revelations or issues that may arise. Thus, this type of interview ensures that relevant areas of investigation are probed in the interview, while at the same time the interview remains sufficiently open for the interviewer to flexibly incorporate new elements as these arise in the course of the interview. Davies (2006, p. 157) contends that by conducting semi-structured interviews “the researcher can better seek clarification and elaboration on the answers and at the same time, have more latitude to probe beyond the answers given”. In this research method, the respondent’s answers are the raw data that will be analysed at a later point in time by the researcher.

According to May (2001), the interviewer can also add questions to “test” the strength of the interviewees beliefs through “counter-questions”. This “rather straightforward questioning contrasts with the reciprocity of everyday conversations” (Kvale & Brinkmann, 2009, p. 4). Kvale (2006, p. 483) contends that “referring to the interview as dialogue is misleading, although a common practice”. However, when studying sensitive and very complex subjects such as pain and injury in sport, one might argue whether Kvale’s perspective on interviewing as an “inquiry” instead of a “conversation”, will help to reveal useful data. Without rejecting the advantages of including further (or test) questions, which might lead to a more sustained knowledge, it is also important to acknowledge that an interview as a “conversation” will help the interviewee to feel more comfortable to talk about his/her personal and intimate life. It is ‘in the hands of the researcher to conduct the interview as a conversation without losing sight of the several topics s/he wants to approach and understand as deeply as possible. Kvale (2006, p. 483) also mentions that the term “interview dialogue” is a misnomer because “it gives an illusion of mutual interests in a
conversation, which in actuality takes place for the purpose of just the one part – the interviewer”. However, it may be desirable that the interviewee also has an interest in the conversation and the topics approached. The interviewee may develop interest if s/he understands the interview/research objectives and their importance. It is normal to expect that an interviewee interested in the interview will cooperate more, or at least more willingly, than an interviewee not interested. S/he also may feel that the interview was genuinely enriching, that s/he enjoyed talking freely and openly in a safe environment, with an attentive and friendly listener. By being stimulated to respond and reflect about areas of their life, the interviewee may also recognize that s/he developed new and important insights.

Another point raised by Kvale (2006, p. 483) is that the interviewer is “in a power position and sets the stage by determining the topic of the interchange; it is the interviewer who asks and the interviewee who answers”. To Kvale and Brinkmann (2009, p. 4), a research interview “is not the reciprocal interaction of two equal partners. There is a definite asymmetry of power: the interviewer defines the situation, introduces the topics of the conversation, and through further questions steers the course of the interview”. Additionally, Kvale (1996, p. 126) reviews some of the power dynamics in research interviews: the interviewer rules the interview; the interview is a one-way dialogue; the interview is an instrumental dialogue; the interview may be a manipulative dialogue; the interviewer has a monopoly of interpretation. However, figurationalists would argue that this is a narrow conception of power balances. Power balances will inevitably fluctuate during an interview. Moreover, these power balances will allow the interviewee to approach other themes that were
not initially predicted, and that might be of keen importance to better conceptualize the research problem. Additionally, reflecting in terms of interdependency, one may question who needs whom most? It is obvious that the researcher needs the interviewer collaboration, thus giving him/her a relative power. It is also normal to expect that an interview with an athlete and an interview with a coach or a representative of the Portuguese Gymnastics Federation will have different power balances. A coach, a doctor or a federation director are normally in relatively more powerful positions within the sports figuration. Thus the researcher should be aware that these power differences may influence the direction of the research. The interview is not a “one-way” traffic, and the interviewee also has influence on the pace, order and topics approached.

This is particularly relevant to this research as the interviewer (male) interviewed male and female participants. To Kvale (2006) “gender is performative, gender is always doing” and it filters knowledge. That is, gender sex of the interviewer and the gender of the respondent make a difference. On the other hand, “both the interviewer and the respondent are considered to be faceless and invisible, and they must be if the paradigmatic assumption of gathering value-free data is to be maintained” (Denzin, 2001, p. 26). As discussed above, a complete value-free perspective is impossible, but stereotypical beliefs that “all women [and men] think alike and have universal interests in common” (Fontana & Frey, 2005, p. 710) should be challenged.

Research on the gender dynamics of interviewing provides contrasting interpretations. The conclusions of a study (Schilt & Williams, 2008), with male
and female interviewers interviewing male participants suggest that “the gender of the interviewer is not an insurmountable barrier to establishing rapport and achieving reliable results in in-depth interviewing”. In another study, (Williams & Heikes, 1993, p. 289), both male and female interviewers, interviewed female participants about their work and household and their aspirations for the future with regard to both work and family formation. Their conclusions are that the response difference appeared in what was volunteered rather than directly asked (Padfield & Protector, 1996). Female participants discussed voluntarily with the female interviewer sensitive data such as abortion. They consequently suggest that interviewers should “take account of gender in the conduct of interviews” (Padfield & Protector, 1996, p. 364). Similarly, Pini (2005, p. 212) observed in her research that, when she interviewed male participants and gender issues were the focus, interviewers started to engage in more pronounced gender identity perspectives, especially “when masculine identities are seen as being challenged and there is a sense of anxiety about losing power associated with those identities” (Pini, 2005, p. 212). She concluded that “a woman asking men about gender relations is likely to meet with a high degree of resistance” (Pini, 2005, p. 212). However, she acknowledged that more important than the research topic, it was the context in which this topic was addressed which produced the gendered dynamics of the interviews.

All the issues raised in these various research projects, highlight the idea that the interviewer should establish trust and rapport with the interviewees and if possible try to develop “a closer relation between the interviewer and the respondent” (Fontana & Prokos, 2007, p. 63). Trust and rapport are keywords when conducting an interview and will facilitate valid data collection. Rapport
can be defined as “a productive interpersonal climate between informant and researcher. A relationship that allows the informant to feel comfortable or confident enough to offer comprehensive answers to questions” (Fontana & Frey, 2005, p. 711). Rapport is therefore a relationship based upon mutual trust. The first few minutes of the interview are very important, and according to Hay (2005), a rapport-building process can be achieved through “funneling”. This method involves an initial focus on general issues, followed by a gradual movement toward personal matters and issues specific to the interviewee or a situation. “Funneling” allows for conversation to develop toward more sensitive issues. The assumption made in using this strategy is that informants and the interviewers would find it uncomfortable to start talking directly about an issue that may be personally threatening, sensitive or uncomfortable (Hay, 2005).

During the entire interview, “the researcher must establish an atmosphere in which the subject feels safe enough to talk freely about his or her experiences and feelings” (Kvale, 1996, p. 125). Thus, an assertive contact should be sought “by attentive listening, with the interviewer showing interest, understanding, and respect for what the subject says; at the same time, the interviewer is at ease and clear about what he or she wants to know” (Kvale, 1996, p. 128). The questions should promote a positive and dynamic interaction because this flow will motivate the subjects to talk about their experiences and feelings. Additionally, “the questions should be easy to understand, short, and devoid of academic language” (Kvale, 1996, p. 130). Kvale (1996) also suggests the use of nine types of questions:
1) Introducing questions – Open questions that yield spontaneous, rich, descriptions: ‘Can you tell me about...?’; ‘Why did you go to...?’;

2) Follow-up questions – repeating significant words of an answer can lead to further elaborations; or asking: ‘what do you mean by that?’;

3) Probing questions – ‘Could you say more about that?’; ‘Can you give a more detailed description of what happened?’;

4) Specifying questions – ‘What did you do then?’; ‘How did your body react?’;

5) Direct questions – These questions may be sustained in interviewee previous answers and are perhaps best left until towards the end of the interview: ‘what is your coach’s opinion?’; ‘what goes on in your mind when you are injured?’;

6) Indirect questions – ‘How do you believe other athletes regard the competition days?’; May be followed by: ‘is that the way you feel too?’;

7) Structuring questions – ‘I would like to discuss another point...’;

8) Silence – By allowing pauses in the conversation the subjects have ample time to associate and reflect and then break the silence themselves with significant and possible more ample information;

9) Interpreting questions – The degree of interpretation may involve merely rephrasing an answer: ‘You then mean that...?’; ‘According to your answer, can I then conclude that...?’
As this list suggests, listening is of key importance during an interview. The interviewer should try to be very attentive and active without being too intrusive. This balance is not easy and “the interviewer must continually make quick choices about what to ask and how; which aspects of a subject’s answer to follow up - and which not; which answers to interpret - and which not” (Kvale, 1996, p. 147). Thus, Kvale (1996) offers ten tips and skills of a successful interviewer:

1) Knowledgeable – An extensive knowledge of the interview theme can enable the interviewer to conduct an informed conversation about the topic and allow the interviewer to probe more topics;

2) Structuring – Gives purpose for the interview, briefly tells what was learned in the course of the conversation and asks whether the interviewee has any questions;

3) Clear – Asks simple and easy questions and adapts the questions to the background of the interviewee;

4) Gentle – Lets the subject finish, gives them time to think and to elaborate; allows pauses;

5) Sensitive – Listens attentively to what and how it is said, and to what it is not said; Creates empathy;

6) Open – Is open to new aspects that can be introduced by the interviewee, and follows them up;

7) Steering – Is able to direct the interview to key themes;
8) Critical – Is prepared to challenge what is said and to deal with possible inconsistencies in interviewees answers;

9) Remembering – Relates what is said to what has previously been said and asks for further elaboration;

10) Interpreting – Provides interpretations of what is said, without imposing meaning on them; the objective is to clarify and extend the meanings of the interviewee’s statements.

Bryman (2008) adds two more topics to Kvale’s list:

11) Balanced – Does not talk too much or too little; The interviewee is not a passive listener but at the same time is secure that is talking about desired topics;

12) Ethically sensitive – Clarifies the interviewee about the research proposes and assures that his/her answers will be treated confidentially.

Still, at least another two can also be suggested.

13) Environment sensitive – The interviewer should seek a “safe” and private environment (place), where the interviewee can answer without being afraid that “relevant” others may be listening;
14) Rapport – The interviewer should try to establish rapport by sharing possible common points and interests.

In this regard, mirroring and matching are also common technics used to create a subconscious familiarity between parties and rapidly create a feeling of affinity. The idea is to subtly mirror some physical movements of the other party, without appearing to be intentionally copying him/her. This would create an emotional response of acceptance and trust. Bryman (2008) suggests that people in a group often mirror one another's posture and this reflects a shared viewpoint. Scheflen (1964) compared coacting, cooperating and competing groups. Her conclusions are that: postural mirroring was an indicator of openness to interpersonal involvement; subjects in the coacting condition showed a higher level of intergroup mirroring; relationships were found between mirroring and expressed feelings of interpersonal cooperativeness, even when participants had minimal contact or no verbal interaction. In another study, LaFrance (1985) advocate that mimicry may be used to show sympathy and understanding for another's state or perspective. Coordinated movement is then associated with rapport and with positive emotional affect or attitude (Bavelas, Black, Lemery, & Mullett, 1986). Thus, behaviour matching and movement synchrony may shed light on “how it is that we can “hit it off” immediately with some people and never “get it together” with others. This aspect of rapport certainly would be of concern to professions dealing with intimate personal relations (Bernieri & Rosenthal, 1991, p. 429). Moreover, it is important not only to match bodily expressions, but also the way the interviewer is dressed to the place the interview will be taken (for example in a training centre or in a medical
office) and to the interviewee (a very casual dress may cause bad initial impression to a doctor or maybe the opposite to a young athlete).

In this research, the interviewer established this closer relationship by being present and following the interviewees during several practice sessions. Also, the Portuguese Gymnastics Federation gave full access and advised their members to participate actively in this research when solicited. The importance to approach the interview as a ‘conversation’ is also very important to this subject, because it will allow the male and female participants to discuss voluntary subjects. There are studies of male and female experiences of pain an injury, but no study of both. Therefore, the present work intended to study gender relations, rather than male/female experiences separately and then the gender bias of the interviewer is inevitable.

As stated before, when conducting an interview, we should seek a balance between involvement and detachment. To put it another way, having in consideration the “we” and “they” perspectives adopted when conducting interviews will help “to develop a more adequate “they” perspective as a researcher” (Bernieri, 1988, p. 137). One of the major difficulties and dangers of an approach using semi-structured interviews is the risk that the balance of involvement-detachment on the researcher’s part may veer too far towards the former leading to the distortion of data. As discussed previously, that balance is never easy, instead its fluidity and complexity make it difficult to obtain. For example, when trying to understand the sport phenomena, if we are highly detached, it would be very difficult for us to have a deepened appreciation of relevant issues as well as a heightened sensitivity towards the perceptions of
those under scrutiny. The whole process of doing semi-structured interviews and interpreting the data gathered will inevitably lead the researcher to a higher level of involvement, especially in a sensitive field like pain and injury in sport. That degree of involvement may enable the researcher to conceptualize the data more adequately, that is to say in terms of adequacy – “degrees of “scientificity” or, to put the same thing the other way round, degrees of “objectivity” and “value-bias”” (Bloyce, 2004, p. 162) – rather than in terms of an absolute understanding. An equilibrium (which is not easy) between involvement and detachment would also enable the researcher to understand fluctuating responses and to access topics that may have more or less emotional orientations. What makes semi-structured interviews interesting is that the data gathered can enable the researcher to identify patterns which are not peculiar to a single individual or group, but are shared, to a greater or lesser degree, by people who exist in a common social situation. We should not think about single individuals or about humanity and society as static and separated “givens”. Instead, we should study the interdependent groups of individuals and long-term transformations of the figurations that they form with each other. A sport competition is a figuration constituted by many individuals, each one having a purpose and degree of influence towards the others. Although the data gathered in each interview are unique and represent the experiences and ideas of a single person, we should not see the interviewee as an isolated individual. She/he belongs to a (sport) figuration and interacts directly and indirectly with other members of that figuration. The actions, thoughts and experiences of an individual should, then, not be seen as isolated and detached from the other members of the sport figuration. Our thoughts and actions can only be
adequately understood if we examine the interdependencies with other people and groups of people. Understanding that, we may be able to generalize, to a greater or lesser degree, the data gathered in semi-structured interviews, regarding the way in which the networks of which the interviewees are a part, enable and constrain what they think and do. Dunning (1992, p. 246) justified the use of semi-structured interviews (in a triangulation with other methods) “in order to give voice to the participants and to ground the research interpretations in lived experiences”. The next section will reflect on the actual process of collecting data for this study.

5.11 Entering the Field

The current section explains the strategies used to develop knowledge and gather data about the figuration in study. It also highlights the number of participants observed and interviews conducted. In so doing, it reflects on the research process, and the peculiarities of gathering data in the context of elite level gymnastics. This section also aims to reflect on the difficulties and revelations that occurred during the research process.

The data gathering process comprised several purposes:

- Gaining access to the training facilities and being able to observe and at times interact with all members of the figuration;

- Establishing trust and rapport, so the participants could interact and behave in a natural manner;
- Gathering data from a range of sources: Observation notes, informal conversations with the researcher, conversations between the participants, and semi-structured interviews;

- Collecting evidence during the training and competition days in a semi-structured manner. That is, there was a list with several themes that the researcher had in mind while taking notes (see appendix 1 and 5), however, other themes could emerge during this process;

- Semi-structured interviews followed the overt participation process. An interview guideline (Appendix 3) was created taking into consideration the data already gathered.

In 2004, to finish my bachelor degree, I conducted research exploring the sacrifices Portuguese professional football athletes’ made in order to achieve ‘professional’ status. One of the themes that most struck me was their stories about pain and injury. I was talking with athletes that I had only seen before through television, who were older than me but still active, and who were talking openly about their injuries, the pressures they had and how injuries influenced not only their career but also their personal life. Using a quote from an athlete: “When I walk on uneven streets it hurts. Now I just want to recover so I can one day play with my child”. While I started with just two player contacts, the athletes’ seemed to be really interested in telling their stories and having someone with whom they could share their experiences. After the interviews they were enthusiastic and introduced me to other contacts that they knew would have “good stories” for me. The experience of my first “real” research work, had an immense impact on me and increased my interest in the sociology
of sport, and in particular the experiences of pain and injury. Consequently, during the MSc Sociology of Sport I completed at the University of Chester, I tried to understand if those experiences were exclusive of senior and professional athletes. Thus, I studied and interviewed under-17 non-professional Rugby players. What I found was that those athletes’ shared similar pain and injury experiences. Moreover, a distinct aspect of their discourses got my attention – masculinity and the masculine ethos discourses. So, the next “step”, and following my supervisor’s advice, was to undertake research that could also embrace the female athletes’ experiences.

In order to better try to understand athletes’ social experience of pain and injury, I realized that I should go a step further from doing interviews, for it I had the chance to be with the team during their training sessions and competitions, I could increase the knowledge I was gathering from “just” doing interviews. This added value could be achieved by observing at first hand the interactions between different members of a sports figuration, and also by being (in)directly involved in those interactions. To create an even better research environment, it would be important that the male and female athletes’ social experiences had points in common, such as practicing the same sport, at the same places and with teams training for similar objectives and at similar competition levels. This could help focus my research on gender issues. Coincidentally I was working with Claudia Pinheiro, a former international gymnast. She had been my gymnastics teacher and also the supervisor of my Bachelor these. She offered to be the “gate keeper” I needed.
After initial contacts, the Portuguese Gymnastics Federation agreed to provide me with the opportunity to observe competitions and training sessions and to interview athletes and coaches. The Portuguese Gymnastics Federation also provided the gymnasts schedule for the subsequent months. On the first day of observation, Claudia came with me and introduced me to the coaches of the teams I was going be with during the next months. That was the first time I had contact with a high performance gymnastics training environment. The initial surprise for me was that male and female athletes were training at the same time in an open space pavilion. Considering I intended to study gendered experiences, that was very a welcome revelation. Throughout the next two days I was formally introduced to the male and female teams. During this introduction the coaches invited me to explain to the athletes that during the next months I was going to observe the training sessions, their training routines, competition days and the challenges they faced. A general description of the study aims was given. Participants received the information required to explain and justify the researcher’s presence. But at the same time, not detailing the specific themes of study meant that they did not change the ways they normally behaved. The participants also received a written and oral guarantee that the data collected would always be kept anonymous. Participants received informant sheets and consent forms previously reviewed and accepted as part of the Loughborough University Ethical Clearance procedure (see appendix 4). This guarantee was vital, allowing all participants to act without thinking about revealing personal aspects. A total of 11 male and 13 female athletes, and 3 coaches of the male team and 3 coaches of the female team were observed during 9 months. I also interacted with 2
physiotherapists, who were present during the national team training sessions and competition days.

Merton (1957, p. 12) introduced the term “serendipity” to describe “the discovery through chance by a theoretically informed mind of valid findings which were not sought for”. It is a common experience in research and a “chance process”, that may include “luck” and “unexpected finding” (Waddington & Smith, 2013, p. 3). A number of serendipitous findings also occurred during this research, which led to a change of strategies and revised interview schedules. One of the first was the chance to observe male and female athletes practicing at the same time. This may have been a key factor that helped me to notice (amongst other things) the different amounts of time male and females spent receiving medical assistance, and the different ways the teams practiced and interacted with coaches. Furthermore, the physiotherapists started to be my “closest” participants and we had the chance to talk during several hours during the training sessions. This made me decide that interviewing them would be no longer necessary.

However, what revealed to be more difficult was earning the participants’ trust and beginning to feel accepted inside the group. This influenced for example the way I decided to take notes. Consequently, and despite the anonymity guarantees, one of the strategies used to avoid making the participants feel uncomfortable was to take notes on a smartphone, instead of using a paper and a pen, which could be more conspicuous. The notes were taken as if I was writing text messages or doing usual tasks. Notes were dated and sometimes written “in vivo”, or at other times after a few moments. Again,
the objective was to describe as closely as possible what was being witnessed, without interfering in that process. Several notes included reflections on the theoretical relevance of the evidence, dialogue and descriptions of particular situations (see Appendix 3). Another strategy used was to always wear a training suit. This was designed to create a more relaxed and informal appearance and so relax the younger athletes. My age (32) also helped to establish rapport and create “small” talk with coaches and athletes. Being not much younger than many coaches, and not much older than many athletes, helped to facilitate these informal conversations. This was crucial, and helped to establish conversations about several themes, helping to gather data directly involved with the research.

Despite these measures, during the fieldwork for this investigation, I experienced how difficult it was to be accepted as a member of the group. Unlike my previous research experiences where my presence was immediately seen as a way to talk about athletes’ personal experiences, coaches and gymnasts were reluctant to talk and interact with me during the first observations of the training sessions. Also the coaches seemed to be watching me carefully and trying to control what I observed. For example, during the first days, if they raised their voice when talking to the athletes’, they often looked to where I was. My interpretation was that they were trying to see my reaction and if I notice what just happened. Artistic gymnasts and coaches were not used to having “strange” eyes observing their routines and interactions. This meant that I spent much of the time observing training sessions near the physiotherapists. They easily and often talked about their personal opinions about athletes, and
coaches’ approaches when athletes were injured. Perhaps because they too were partly seen as outsiders (Malcolm, 2006).

However, on the third day of observations, the coaches asked me if I could give a lift to some athletes that lived near my home. I obviously said yes and this provided a chance to start helping on the training sessions and at the same time to talk with some athletes during 2 hours in a more neutral environment. I had to wait for those athletes to finish taking shower and having dinner. While I did not expect to be invited to have dinner with the teams, I did expect that the coaches would invite me to sit at the table with them. However, they said that they were going to discuss private issues, for example, which athletes were going to be selected to represent Portugal at the next competition, and so I had to wait alone, in a different room. Considering that it was late (about 9pm) and that was going to drive for about 2 hours, I felt frustrated. I feared that I would never be able to establish trust and rapport, and that the participants would always be reluctant to fully accept my presence. But again, during the previous days, I was able to develop relations with the physiotherapists. I was always asking their opinions and trying to demonstrate that I sincerely wanted to better understand their work. So, after having dinner, one of the physiotherapists picked some fruits and offered them to me. He told me that coaches and athletes were not used to have someone “external” near them, but with time I would earn my space and their trust. But above all, the opportunity to interact with participants during our journeys helped me to gain trust and rapport. It helped me to understand the athletes’ jokes and how they interacted with each other. This allowed me to “gain access” not only to the athletes I was giving lifts to, but to the others. They then started to involve me
on their conversations and jokes. The coaches also noticed my increased involvement, and that I was never explicitly taking notes, or expressing opinions about their training sessions. The closeness I established with the physiotherapists was also a key aspect. Not only because they helped me to understand some training routines, but also because they established a bridge between me and the other participants. Another opportunity to interact with the athletes was when they were receiving treatment.

After two weeks, coaches and gymnasts started to talk openly and act as if the researcher was not present. Coaches stopped looking if the researcher was observing or where I was before talking with athletes. Athletes started to always say hello and give warmer handshakes when they arrived the gymnasium. During the first days of the fieldwork, the researcher was not invited to dine with team. After about 2 weeks, the researcher was invited not only to dinner, but also advised by several gymnasts and coaches about changes in the training schedules as well as asked to give ride to several athletes and coaches after the training sessions. The opportunity to interact with participants outside the gymnasium strongly helped the researcher to gain trust and rapport. It helped to understand the athletes ‘jokes’ and how they played with each other. In fact, as the researcher was someone coming from outside the gymnastics figuration, but at the same time, someone who could understand it and presenting a ‘neutral’ position, he became a member that everyone started to trust and talk with, especially during private situations. He became a confident and a member that coaches, athletes and medical staff would seek to talk with. At that point, the researcher felt as being perfectly integrated in the
group, and a ‘fully accepted outsider’, who was able to observe and interact on a routine and normal basis.

As soon as the participants felt understood and recognised, they showed completely a different characteristic. All participants became very friendly and revealed to be in need of talking with someone that could understand what they do, and that would never reveal their identity. Especially if that person was not an ‘insider’ (coach, parent, or a medical staff member). In other words, someone sufficiently involved to be able to understand their figuration, but also sufficiently detached to have an unbiased perspective. The researcher also interacted with the physiotherapists and they often talked about their personal opinions about athletes, and coaches’ approaches when an athlete is injured.

After observing the training sessions and competitions during 9 months, it seemed to be the right time to start doing interviews. There was a considerable amount of data gathered, but it could be explored during personal and private interviews. Also, the trust earned during these months allowed the researcher to interview with a less formal strategy. All observed athletes and coaches of the senior male and female teams were invited to be interviewed. It was possible to arrange common schedules for a total of 9 male and 8 female athletes, and 3 male team coaches and 2 female team coaches. Each interview lasted between 1 hour and 2:30 hours maximum. 9 interviews took place during training days on a private office of the club gymnasium and the other 13 interviews took place on a private office of the gymnasium where the National Team was training. All interviews were conducted in a closed and ‘safe’ environment, where no one else could ear what was being discussed.
The participants revealed to be ‘open’ to talk about all the suggested themes, they laughed and talked like they would do on a normal conversation. Again, this helped to generate richer and ‘raw’ data. In fact, at the end of the interviews, several athletes said phrases like “it was really great to talk with you” (Male athlete), or “it is good to have someone to listen to me. There were important things that it was the first time I thought and talked about them” (Male athlete). This reinforces the importance of doing this research and how it benefited these athletes. Coaches tended to talk about private questions and doubts related with their career and professional and decisions they had to take. This reveals that all participants were talking openly and with a high amount of trust on the interviewer. Semi-structured interviews were used. A standard set of topics was created, taking in consideration the data gathered during the previous fieldwork (see appendix XXX). Particular situations observed during the previous fieldwork were introduced to specific participants, inviting them to reflect on certain situations. This helped to explore the data previously gathered and also helped to introduce specific situations that otherwise could be forgotten or not mentioned. Doing interviews after several months the overt participation proved to be a very good strategy. During interviews participants were also allowed to talk about other themes and more personal concerns. The fact that many talked about personal affairs, not directed related to the sports figurations, is evidence that the establishing rapport process succeed. However, this also revealed to be a challenge, to direct some interviews to the themes in study. The information collected in this research is highly sensitive so a face-to-face interview helped participants to talk freely. All interviewees were encouraged to discuss their views and experiences of pain and injury and the
relevant aspects of the subculture of the sport they practice. The pace of the interviews was adjusted depending on the responses provided by the participants. Interviewees were reassured that confidentiality and anonymity was going to be maintained in any data released or published and that identifiers such as player or staff names and clubs were going to be removed. At the time of the interviews, all participants were over 18 years old.

The data gathered was analysed with the help of ‘NVivo 10’ a software package designed to assist in qualitative research. All the recorded interviews were transcribed to document files. The data gathered were coded, a process defined as organizing the raw data into conceptual categories and creating themes or concepts to help analyze the data (Neuman, 2003). The interviews were also thematically analyzed. Thematic analysis is useful to try to find common thematic elements across research participants and the events they report. The data units (statements, sentences, etc.) we clustered into common themes, so that similar units could be grouped together, and separated away from units with different meanings. After these analyses, it was then be possible to divide the collected data in the final main themes. On this research, some codes were be initially taken from existing theory on this subject. Other codes could were created in response to the data gathered. A model of the initial and the final node tree was created in NVivo 10 (see appendix XXX).

Having outlined the research methods underpinning the thesis, with special focus on the figurational perspective, it is also important for researchers conducting qualitative research to reflect upon the contextual detail of undertaking interviews and overt participation and the ways in which interactions with participants may affect gathering qualitative data. For
figurational sociologists, this is a key task of the researcher and is most often discussed in terms of the balance between involvement and detachment outlined earlier. Whilst it is central for figurational researchers to be critical of their position along the research process, this critical stance is often concerned with the impact of directly interacting with participants, and at times, being an active member of the figuration in study. Therefore, the researcher was constantly mindful of the danger of adopting the extreme position of ‘going native’. Being too close to the interests of specific groups may lead to an unreflective, uncritical and atheoretical perspective (Maguire, 2004). Furthermore, gaining a considerable amount of trust required a strong reflection and awareness of the possibility of creating less detached data and feeling empathy with the participants believes. This is central because, as Miller (2004) contends, the importance of participants’ perceptions of the research relationship will have implications for their responses and behaviours. Therefore, taking constant field notes, using the list with the themes in study, along with the study of research techniques and dangers of greater involvement/detachment (highly described in figurational research articles), allowed the researcher to ‘step aside’, and have a critical and detached perspective. A balance between involvement and detachment not only enabled the collection of rich data, but also helped its treatment and discussion.

After two weeks, coaches and gymnasts started to talk more openly and act as if the researcher was not present. Coaches stopped looking at what I was observing or where I was before talking with athletes. Moreover, they started to do with me some comments about the athletes’ skills and also discussing some decisions about the training exercises (they knew I have a Bachelor in Physical
Education and Sport). Athletes started to always say hello and give me warmer handshakes when they arrived at the gymnasium. While initially I was not invited to dine with the team, after about 2 weeks, I was not only invited to dinner, but also advised by several gymnasts and coaches about changes in the training schedules as well as asked to give lifts to several athletes and coaches after the training sessions. In fact, as someone coming from outside the gymnastics figuration, but at the same time, someone who was included in it, I became a member that everyone saw as “neutral” and thus someone to trust and talk to, especially during private situations. I became a confidant and a member that coaches, athletes and medical staff would seek to talk to. At that point, I felt integrated in the group, and a fully accepted “outsider”, who was able to observe and interact on a routine and normal basis. Furthermore, I was also a source of social support for those I was observing.

Once the participants felt understood and recognized, they showed completely different characteristics. All participants became very friendly and revealed to be in need of talking with someone that could understand what they do, and that could be trusted to never reveal their identity, especially not to an “insider” (coach, parent, or a medical staff member). In other words, I became sufficiently involved to be able to understand their figuration, but also sufficiently detached to have an unbiased perspective. For figurational sociologists, this is a key task of the researcher and is most often discussed in terms of the balance between involvement and detachment outlined earlier. Whilst it is central for figurational researchers to be critical of their position along the research process, this critical stance is often concerned with the impact of directly interacting with participants, and at times, being an active member of the
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After observing the training sessions and competitions during 9 months, it seemed to be the right time to start doing interviews. There was a considerable amount of data gathered, but it could be explored during personal and private interviews. Also, the trust earned during these months allowed the researcher to interview with a less formal strategy. All observed athletes and coaches of the senior male and female teams were invited to be interviewed. It was possible to arrange common schedules for a total of 9 male and 8 female athletes, and 3 male team coaches and 2 female team coaches. Each interview lasted between 1 hour and 2:30 hours. 9 interviews took place during training days in a private office of the club gymnasium and the other 13 interviews took place in a private office of the gymnasium where the National Team was training. All interviews
were conducted in a closed and ‘safe’ environment, where no one else could hear what was being discussed.

Perhaps surprisingly, all the participants were relaxed and “open” to talk about all the suggested themes. They laughed and talked like they would do in a normal conversation. Again, this helped to generate richer and more “raw” data. In fact, at the end of the interviews, several athletes said phrases like: “It was really great to talk with you.” (Male athlete); “It is good to have someone to listen to me. There were important things that it was the first time I thought and talked about them.” (Male athlete); “I feel lighter.” (Female athlete). This reinforces how this benefited these athletes. Coaches tended to talk about private questions and doubts related with their career and decisions they had to take. This suggested that all participants were talking openly and with a high amount of trust in the interviewer.

Semi-structured interviews were used. A standard set of topics was created, taking into consideration the data gathered during the previous fieldwork (see appendix 3). Particular situations observed during the previous fieldwork were introduced to specific participants, inviting them to reflect on certain situations. This helped to explore the data previously gathered and also helped to introduce specific situations that otherwise could be forgotten or not mentioned. Doing interviews after several months of the overt participation proved to be a very good strategy. During interviews participants were able to talk about other themes and more personal concerns. The fact that many talked about personal affairs, not directly related to the sports figurations, is evidence that a good rapport was established. However, this opened up an additional
challenge; to direct some interviews to the themes of the study. As the information collected in this research was highly sensitive, a face-to-face interview helped participants to talk freely. All interviewees were encouraged to discuss their views and experiences of pain and injury and the relevant aspects of the subculture of the sport they practice. The pace of the interviews was adjusted depending on the responses provided by the participants. Interviewees were reassured that anonymity was going to be maintained in any data released or published and that identifiers such as player or staff names and clubs were going to be removed. At the time of the interviews, all participants were over 18 years old.

The data gathered was analysed with the help of ‘NVivo 10’ a software package designed to assist in qualitative research. All the recorded interviews were transcribed to document files. The data gathered were coded, a process defined as organizing the raw data into conceptual categories and creating themes or concepts to help analyse the data (Neuman, 2003). The interviews were thematically analysed. Thematic analysis is useful to try to find common thematic elements across research participants and the events they report. The data units (statements, sentences, etc.) were clustered into common themes, so that similar units could be grouped together, and separated away from units with different meanings. After these analyses, it was possible to divide the collected data into the final main themes. Some codes were initially derived from the existing literature theory on this subject, while others were created in response to the data gathered.
5.12 Final Considerations

It is clear that a figurational approach to research differs from several orthodox approaches within social sciences and with many of the common dichotomies presented in research textbooks. We must argue that figurational sociologists are not dismissive of conventional approaches to research methods, “rather that they raise important questions about the values of assumptions made concerning the research process” (Bloyce, 2004, p. 164).

Research is an interactive and complex process “in which steps blend into each other. The process is not strictly linear; it “may flow in several directions before reaching an end” (Neuman, 2007, p. 12). Research is not a simple process, in fact Bloyce (2004, p. 164) asserts that it is a “very “messy process””.

There should be a “two-way traffic” between theory and evidence, and so the researcher should always monitor the adequacy and applicability of the theory to empirical reality in an attempt to test and even develop theory. According to Bloyce and Murphy (2007, p. 17) being overly concerned with demonstrating the explanatory power of a particular approach is a danger that can perhaps afflict intellectuals who have placed considerable distance between themselves and ideological concerns, but in the process have developed a commitment to a particular theoretical framework to such a degree that they lower their critical guard. Rather than attempting to assess the adequacy of their hypotheses, they seek to sustain them. We should not be constrained to use only one method to obtain data.

We should seek the best methods that would enable us to collect relevant data for our questions. One might observe that “a figurational approach to research would advocate the use of the whole range of research methods, and not be restricted to certain types of research that ‘fit in’ with the theory” (Bloyce, 2004,
In sum, particular advantages of a figurational sociological approach are:

- pays due attention to the central part played by emotions;
- seeks to develop concepts, hypotheses and theories by means of constant cross-fertilization with empirical enquiries – a process in which the empirical and the theoretical are both necessary and in which neither should be allowed to gain the upper hand;
- tries to avoid the oversimplifications and distortions of the remarkably diverse and complex world which can result from an unreflecting commitment to conventional dualisms (Dunning, 1999, p. 36)

This section provided a critical reflexion of the research process and, in particular, the ways this reflexion can help to provide more reality congruent data. The following sections discuss in detail the empirical data generated in this research process.
Chapter 6 – The Portuguese Artistic Gymnastics National Team

Figuration

6.1 Introduction

A brief analysis of the Portuguese Artistic Gymnastics National Team is necessary before we can make sense of the manner in which gymnasts experience pain and injury and how gender mediates those experiences. Thus, this chapter starts by giving a brief introduction to the historical and competitive contexts of Portuguese Artistic Gymnastics. Subsequently, the section seeks to explore how athletes and coaches attempt to balance their social life and their gymnastics practice, highlight the medical provision made available to Portuguese gymnasts, and illustrate how medical treatment is negotiated between athletes, coaches and physiotherapists. This analysis is necessary to illustrate the degree to which the structure of what might be called the Portuguese Artistic Gymnastics National team sportsnet (Nixon, 1992), influences experiences of pain and injury. As we saw in section 2.4, Nixon (1992) hypothesized that athletes are more likely to become enmeshed in the sportsnets when they are: larger; denser; more centralized in their control over the flow of information and resources; higher in the reachability of athletes to coaches and other authorities; more closed for athletes; more homogenous in the transactional content of member relations; and more stable in their social relational patterns. The following sections try to explore this subject.
6.2 Social Life

There is a long and ongoing debate about how sport participation affects athletes’ educational experience and other aspects of athletes’ social life. Some authors contend that the benefits of athletic participation might be: expending students’ surplus energies; obeying the competition or societal rules and constraining delinquent behaviours; promoting societal values, integrity and building character; enhancing confidence, motivation, sense of empowerment, and self-esteem; providing social interaction, fun and enjoyment; offering opportunities for education and careers in sports; expanding life experience and making more friends; and knowing how to deal with failure and difficult situations (Biddle, Gorely, & Stensel, 2004; Biddle & Mutrie, 2001; Chen, Snyder, & Magner, 2010; Downward & Rasciute, 2011; Eitzen, 2012; Fraser-Thomas, Cote, & Deakin, 2005; Gould & Westfall, 2014; Pate, Trost, Levb, & Dowda, 2000; Weiss, 2007).

All interviewed athletes mentioned that being able to socialize with other gymnasts, and being able to travel around different countries and experience different cultures are among the most positive experiences they have had through participating in gymnastics. For instance, a male athlete stated: “The first best thing that comes to my mind is when we go out at night together! [laughs]”, while a second one said that: “Without gymnastics it would be impossible for me to know so many countries, so many cultures and architectures”. From this perspective, gymnastics was clearly a life-enhancing opportunity.
Coaches also believed that participating in gymnastics could bring very positive social factors:

I am quite certain that athletes with good sporting results will have a higher social status. It is something socially important within their relations with peers and friends. For example, our athletes recently started to create public Facebook accounts, and that is very important for their self-esteem. Furthermore, gymnastics gives them discipline and organization and methods. In our daily life, those who do not have discipline are not able to succeed. And high-competition sport is able to give athletes that, because they have to organize their time very well. (Female team coach)

Another coach identified several positive aspects that the gymnasts can obtain from participating in gymnastics.

Achieving good results is something socially very important. I am quite sure that those gymnasts acquire a higher social status and that status can be relevant for their relations with colleagues and friends. Furthermore, high performance sport gives them discipline and better organization. It is something you cannot learn only from books. We give them a method, their time is perfectly scheduled. (... Another advantage is that without gymnastics, most of our athletes would never be able to travel around the world like they do now. Their social experience of being on a World or Olympic Competition is very rich, something indescribable for those who have never lived it. When a 13 or 14 years old boy tells his friends where he is going to be, in terms of their social status, it is something very important, they are looked on a different way. Having fans in Facebook. Being mediatic can help them later, when trying to find a job for example. (Male team coach)

These views were rather more positive than that implied by many studies of the implication of athletic participation on social life, which note that the emphasis on winning might increase athletes’ pressure and stress. In this respect, pain and injury are just some of the negative consequences and psychosocial problems associated with collegiate sport participation. Other
negative consequences included: eating disorders (e.g. Gomes, Martins, & Silva, 2011); drugs, alcohol and addictive behaviours (e.g. Kwan, Bobko, Faulkner, Donnelly, & Cairney, 2014; Waddington, 2000); depression and burnout (e.g. Coakley, 1992); and lack of social life and experience outside the sports context (e.g. Coakley, 2009). However, it is the fact that these positive aspects of sports participation are so widely believed to exist, that makes commitment to a sport identity so compelling, and thus conformity to the culture of risk so widespread.

Since September 2009, the Portuguese Artistic National Team has practiced in a high performance sports centre in Anadia. This sports centre is about 2h30 by car from Lisbon and 1h30 from Porto. Lisbon and Porto are the only two cities that have clubs with gymnasts selected for the National Team. Thus, every time a National Team practice session occurs, athletes have to spend about 1 week away from their home and/or school. This happens almost every month. Furthermore, athletes practice at their clubs for between 5 to 8 hours per day, approximately 5 days per week. In addition to this, athletes spend time in competitions. This time may vary from competition to competition and the place they occur. An athlete’s personal life is therefore directly influenced by the time they spend training and competing.

Interviewer: So, you feel that your social life is different?

Female athlete: Yes, I am quite sure about that.

Interviewer: In what aspects?

Female athlete: In everything. We barely have social life. It is August and we are here practicing. So, basically we cannot even go out and have holidays.
Interviewer: And what do you feel about that?

Female athlete: Well, I think that I will have time later on my life to do other things. There are some things that I will never be able to do, but I have just chosen different paths, different choices and I would not go back.

The gymnasts therefore typically have “a feeling of the rest of their lives being on hold” (Brackenridge & Kirby, 1997, p. 411). Their lives revolve around school, gymnasiums and sports arenas and they have little time for outings, social life, parties, cinema, boy or girlfriends. All interviewed gymnasts revealed a high level of commitment to their sport; school holidays are not a time to rest, but a time to work harder on the gymnasium. During a practice session, a female team coach mentioned: “our athletes do not even think about Carnival” (a cultural tradition in Portugal, celebrated by public schools with a holyday week).

A gymnast described his daily routines:

During the week, I have training sessions before going to the classes. Then I eat something at lunch and go again for school. Afterwards I go again to the gym and only after I return home. I do not have time to go out and drink something with friends, not even to kiss my girlfriend! And when I arrive home I am very tired, my head seems it is going to blow! And sometimes my mother starts talking to me and I am in a bad mood and I may be harsh with her. She gets mad with me and we start arguing. There are days that I arrive home completely exhausted and I go straight to bed, sometimes without eating. (Male athlete)

Due to these routines, athletes may have difficulties to find other things to do, when they do not have training sessions. This may increase their dependence and involvement on the sport.

There are some days when we do not practice, and I do not know what to do, because between 17h and 21h I am usually practicing. When I am at
home during that period I have nothing to do! I just stood there looking. It is many years with the same routines. At 17h I always think, ‘I have to go practicing’. And, only after, I remember ‘today I am not going to practice!’ (Male athlete).

These gymnasts start training at a very early age, and it is very difficult for them to imagine their life without gymnastics. For example, during a training session an athlete was constantly complaining about an injury and the subsequent pains. A physiotherapist asks him:

Physiotherapist: You know the solution for that to never happen again, don’t you?

Male athlete: What? Stop competing and leave gymnastics? And what am I going to do next? To take drugs?

Sometimes athletes try to arrange activities for those days when they do not practice or compete. During training sessions athletes were observed talking about activities that are directly linked to the sports figuration, as for example dating with other gymnasts, going to the cinema with the gymnastics group, sometimes including the coach. Thus, the gymnasts are highly professional in their orientation to their sport. Moreover, in Nixon’s (1992) terms, the sportsnet in which these gymnasts are enmeshed is dense and restricted.

These closed bonds may reinforce the characteristics of the group and its cohesion but at the same time may help to exclude outsiders or those who do not represent or accept those characteristics. It is considered to be normal, to any established-outsider figuration, that the established group attributes “to its members superior human characteristics” (Elias & Scotson, 1994, p. xvi) and exclude members from other groups. This sense of belonging to a closed group
may “induce the gratifying euphoria that goes with the consciousness of belonging to a group of higher value and with the complementary contempt for other groups” (Elias & Scotson, 1994, p. xviii). For example, a female athlete when talking about her friends outside the gymnastics figuration mentioned:

Female athlete: The other girls are all equal [laughs]. They all seem to desire to be all equal and I like to be slightly different.

Feeling superior and at the same time different, when compared to those outside the gymnastics figuration, reinforces the characteristics, behaviours and beliefs embraced by figuration members. This particularly occurs with those in a position that may help to develop power resources. However, following Elias (1978b), power differentials should not be seen in terms of a monopolistic possession, but in terms of power balances.

Another key debate concerning collegiate athletes, focuses on the relationship between academic life and sport participation. The prior research that does exist on the impact of sports on the college experience is inconsistent about whether learning and development occurs. Several articles found positive effects such as: student-athletes were often more engaged in academic and community activities than their non-athlete peers (e.g. Umbach, Palmer, Kuh, & Hannah, 2006); student-athletes are more likely to transfer learned life and work skills, and self-esteem and character traits into their chosen career fields (e.g. Spreitzer, 1994); there is a positive relationship between athletic and academic success (e.g. D. Bowen & Greene, 2012; Lipbscomb, 2006). On the other hand, other studies found that athletic participation had either negative correlation or no effect on: collegiate student-athletes’ academic motivation, development, and ability to learn (e.g. Downward & Rasciute, 2011); academic
grades (e.g. W. Bowen & Levin, 2003) and overdependence and social isolation (e.g. Wolf-Wendel, Toma, & Morphew, 2001).

Data collected from this research shows that all interviewees felt that doing gymnastics impacted negatively on their studies. Coaches, aware of this, frequently help young athletes’ to study and to manage their time. However, and despite such help, due to the reduced study time and because they frequently miss classes, gymnasts mentioned having difficulty keeping up with classes. Additionally, student-athletes had difficulty being integrated and making friends in school:

When I was around 15 years old, I felt that we started to have no time for our own lives. At that age we start practicing during more time and having more competitions. Thus, we become less integrated in school, and we have to opt. If we want to be more integrated in school, we have go out and stay with our friends, go out at night... But we have to abdicate\textsuperscript{11}, and when we abdicate, we do not have the same level of integration. They [other students] left me more aside because I did not know them well and because I was always missing classes. (Female athlete)

Furthermore, the training schedules and the fact that athletes are more tired, may negatively affect their scholar grades.

I practice at the morning and at the afternoon. So, I go to the gym, then to school, then to the gym again and finally to school. It is complicated, and I am completed exhausted by the end of the week. And of course in school I am also tired and not a very good student. This is delaying my studies. It is complicated to study at night (Male athlete).

Gymnasts mentioned practicing about 40h every week during school holidays and 25h when going also to school. This could help to explain the difficulties they mentioned when trying to reconcile training with school.

\textsuperscript{11} Abdicate: Like opting out but conscious that the action involves losing something.
Now [summer holidays] our training sessions are very intense and daily, about 4h during the morning and 4h during the afternoon. We spend here a lot of time. During classes we practice about 25h per week. During winter I feel very down because after school I am tired and when I leave the gym I am even worse. When I arrive home I am unable to do my homework. I usually do write it before entering the class and sometimes the teachers see it. I just tell them that it is not my fault. I do not want to copy and I really have to do it or they [teachers] will take notes that I am missing my homework. (Male athlete)

The time commitment showed by coaches reinforces the views that this work rate is normal. Coaches are also directly involved in those practice sessions, they usually coach athletes outside the National Team, and they have to spend time preparing and studying the training sessions and competitions. Thus, it is possible to argue that they may spend even more hours inside the gymnasium than the athletes.

I spend here [gymnasium] all day. I work here from 8am to 9pm! Our personal relationships, our friendships pass a lot from what happens inside gymnastics. Our friendships are directed to the persons that we meet on the gym because we spend here so many hours. Even the athletes’ friendships are directed to that closed circle. Our teenager experiences occur inside the gymnastics context. (Female team coach)

When questioned whether s/he would like to have a son/daughter that practices gymnastics s/he answered: “Considering the time I spend here, I would prefer that a son of mine would practice another thing” (Female team coach).

Another coach mentioned that his/her husband/wife was always complaining about the lack of time available for the relationship.

S/he only stopped complaining after she completed a degree in Sociology, where s/he studied coaches’ lives. S/he now mentions that a coach’s wife/husband is like a widow/er, and I think s/he is right in a sort of way. But above all, more worrisome than the time I do not have for her/him, it is the time when we are together but my thoughts are distant at the same time. That is what irritates me more in particular. I am
physically with him/her, but still worried with training problems. (Male team coach)

Another coach described the influence gymnastics had on his social life when he was an athlete and also in the present:

Male team coach: In several situations I had to give up a friend's birthday party, or to go on vacation to a particular place. That is because I was preparing myself for a competition or because I was competing. I have some friends outside gymnastics, but I now feel that I have stayed a little ‘closed’. Nowadays I have friends outside gymnastics, but I think all have some kind of connection with others that practice gymnastics. (...) There were some moments where people asked ‘do you really have to go again? Why do you have to? Do you really have to practice on a Saturday?’.

Interviewer: And what makes you say that you cannot skip a training session?

Male team coach: It is the commitment that we learn since we are young gymnasts. We try to be prepared to a certain competition and to reach a particular performance. Knowing that, you face training as the main objective!

This sense of “lost childhood” is, according to David (2005, p. 60) “a powerful indicator of sport-related abusive trends”. Young athletes revealed feelings of being very involved and unable to maintain friendships or activities outside the ‘gymnasium’. Coaches who had been gymnasts themselves illustrated that such attitude towards life become deeply internalized, a part of habitus. This indicates that, in Nixon’s (1992) terms, the sportsnet is relatively homogenous and stable.

The writing on sports and its influence on academic and social life seem to attempt to draw large and generalized conclusions about young athletes. But varied populations, the nature of sports involvement, types of sports
(professional or amateur, elite or non-elite, team or individual), and motivations for playing sports, may help to indicate why different conclusions about the impact of sports have been found. The empirical data gathered during the research process indicates that there is a closed relationship between sporting activity, social life and academic success. In this particular case, belonging to the Portuguese National team entails a high level of commitment to the sport, but simultaneously reinforces social bonds inside the sporting figuration through a sense of elitism. Also, gymnasts seem to believe that those who are not with them inside the gymnasium are not able to understand the physical and social sacrifices they have to make in order to prevail and achieve good sporting results.

I have had problems with friends because they could not understand gymnastics and my training schedules. They said things like ‘You never come with us, you are always saying no and giving excuses’. At some point you have to select your friends. (Female athlete)

This may lead them to intentionally or unintentionally socially exclude other friends, and to act more distrustful. Thus, their participation in high performance sport deeply affects their personal life.

Other people must understand what we are fighting for and how much we dedicate ourselves to this sport. Of course I have had complicated relationships because girlfriends could not understand and eventually we broke up. Now I am in a relationship where she understands. Well, she is a gymnast also, so, she understands. (Male athlete)

While the gymnasts in this study are not professional in the sense of being paid, they perform as professionals in terms of their time and identity commitment to the sport. Aspects such as this will illustrate why studies of pain...
and injury in professional and amateur sports provide such similar conclusions (See sections 2.5 and 2.6). Regardless of payment, athletes tend to restrict their social relationships to people who can understand what they do. As Nixon (1992) argued the strong webs of interaction of a sportsnet tend to reinforce athletes’ bonds. Many times, they are only able to maintain close relations with individuals who also practice gymnastics, and thus deeply understanding the gymnastics figuration. This leads sports subcultures to have a highly self-perpetuating quality. The norms of high performance sport, and its inherent sacrifices, lead or force participants to immerse themselves in relationships with people who tolerate such practices. One of those sacrifices is competing and practicing through pain an injury. Consequently, it is important to observe the provision of medical care for Portuguese National Team Gymnasts, and explore how it is negotiated.

6.3 Medical Provision in Portuguese Artistic Gymnastics

Sport medicine has received growing attention in terms of financial, academic and scientific investment. According to Waddington (1996, p. 176) “the development of sports medicine can be understood in terms of a conjuncture involving processes of medicalization and the increasing competitiveness of modern sports”. Waddington (1996) further contends that the growing involvement of sports physicians can be related to the search for championship-winning performances. Much of the sports medicine research has studied its role as a reflection of the growing concern with success and the pursuit of performance enhancement in elite level sport (Hoberman, 1992, 2005; Kraemer, Denegar, & Flanagan, 2009; Larsen, 2012; Safai, 2007;
Theberge, 2007; Waddington, 1996, 2012). But research about pain and injury in sport is also related to the medical care athletes receive. As Malcolm (2006, p. 377) notes, “the sports medicine body of work has emerged more from the desire of scholars to understand the risk, pain, and injury experiences of athletes than from their attempts to understand the sports medicine profession itself”. This may help to explain why Walk (2004, p. 265) contends that “our knowledge of the role of sports medicine personnel in studies of athlete risk, pain and injury is obviously in its infancy”.

The gymnasts studied receive no health care when practicing with their clubs. However, they do receive medical care from a physiotherapist during the National Team training sessions. Between two or three physiotherapists actively work with the National Team, although only one at a time is present during training sessions. There is no discrete treatment room office, or any kind of privacy during medical treatments. Athletes are treated right next to where others are practicing. A doctor observes them only if they suffer an injury that incapacitates them or clearly diminishes their performance. This became evident during the observations of training.

An athlete suffered a serious injury and while being treated, the physiotherapist said: “I think you should talk with your coach and try to see a doctor. You need to do more exams”. (Field note)

Most of the athletes mentioned that the physiotherapist normally evaluates the seriousness of an injury, and decide if the athlete should wait for a doctor’s opinion.

Female athlete: The physiotherapists ‘see’ if the injury is serious. If it is, they told us to do more exams and search for a doctor. They know us
very well. They know the competitions we have ahead, which helps them to decide what we should do.

Interviewer: And what about your opinion?

Female athlete: When I am really in pain, I talk with the coach and with the physiotherapist to see if they can do anything for me. In serious injuries their opinion is the same. Sometimes they differ when we have small injuries such as sprains. In this case the coach tries to incentive us to continue when we are injured. We may say ‘I do not want to do it, it hurts’. But we really have to do it.

Interviewer: Why do you have to do it?

Female athlete: I do not [laughs, pause]. If the injury occurs when we are close to a big competition, we should continue practicing for it.

According to this transcript, the injury seriousness and if it occurs next to a competition, may affect what an athlete is advised to do and who takes the final decision. The physiotherapist is believed to be well placed to make such judgements on the basis that they know what the competition schedule is. Even then, however, the coach is included in discussions about the gymnasts prognosis. The athletes view comes last and even when questioned about their personal opinion, they see their role as simply to report injuries and ask for help. Visiting a doctor is an abnormal occurrence and generally related to an incapacitating injury and the possibility of requiring surgery. As Malcolm (2006, p. 390) notes, “the status of club doctors is often diminished as a consequence of the relative value that coaches and club management place on the role of the physiotherapist”. When questioned about what was his opinion concerning the medical support he receives, one athlete mentioned:

Male athlete: We are more or less on our own. We have to search for medical support. In our club and also in the National Team, things with the insurance are very complicated. First we have to pay to receive medical treatment and then we have to wait and hope they pay us back. For example, it would be very good for me to do electro-acupuncture
without having to pay in advance. It would make me feel much better, and I am unable to gather so much money in order to pay in advance.

This athlete also argued that if he received better medical care, he would have fewer injuries, and consequently a better performance.

I think that because we do not have adequate health care, some injuries could become really serious. We are constantly doing strong impacts on the wrists, elbows, shoulders... We have to seek external medical because we rarely have a physiotherapist available. For several years I have had a shoulder injury. I have to do ice on it by myself and do specific exercises. Not even my coach advises me to do preventive exercises. I could probably not be competing if I did not seek external support. If we received better medical care, probably we would be able to evolve more. (Male athlete)

While the Portuguese Federation does have health insurance, several athletes mentioned having problems claiming against it when they have an injury.

I have my kneecap dislocated. One bone is touching my kneecap and sometimes I can barely walk. Sometimes I have to walk and drag the foot [laughs]. So, I went to a doctor specialist in knees and he told me that I should have surgery to correct this. I asked him if it was something involving risks and he told me it would be a small two hours surgery and that I would be able to recover in one month. I was going to be operated at 16h and the insurance called me at 11h saying that this is a birth problem so they were not going to pay the surgery. I was incredulous [pause]. ‘What a good insurance the Federation has, very good indeed’. Well, I now have to hold on at least one more year. Even next year I do not know if I am going to do the surgery because I will have very important [international competitions]. (Male athlete)

Many gymnasts depend on the Federation’s financial and health support in order to have major medical treatments such as operations. This reduces their power to decide if they should or not be operated upon or receive medical support. Instead, an athlete revealed that,

the coach has the final decision. The athletes’ opinion is the least important. Normally the athlete has no say in the matter, unless his opinion is really necessary. Sometimes we are injured and we say we cannot do this or that, but if the coach thinks we can, we will do it. And we really do it, but sometimes we get worse [laughs]. (Female athlete)
Medical provision was also restricted during international competitions as at times the physiotherapist would not travel with the team. When this occurs, the physiotherapist tries to advise athletes’ what to do during those days. The next lines were taken from a conversation between a physiotherapist and an athlete, and provide an illustration of this.

Physiotherapist: “during the next competition I won’t be with you. But we know that you will have pains. If you really have a lot of pains then you should take these pills. Otherwise you just take these. Do you have these pills?”

Male team athlete: “Yes, I think I still have those at home”. (Field note)

After having this conversation the physiotherapist gave the athlete some pills. He explained to him that, during that international competition, he should take two types of pill, a muscular relaxant and an anti-inflammatory.

The lack of a comprehensive medical support is frequently justified in relation to economic reasons. Gymnastic clubs have a small number of paying athletes. Likewise, the Portuguese Federation has a very limited budget. This may be one of the reasons why clubs give no health care during training sessions and why the federation provides relatively limited support. A male team coach described the situation as follows: “I think they [gymnasts] have the medical care we are able to give, but obviously it is not adequate”. Thus, both coaches and athletes perceive the health care provided as inadequate. Physiotherapists receive about 5€ or less for each hour of work at the training session, and frequently the federation is in debt to them for about 2 months or more.
Despite not having the best financial reward, physiotherapists are considered to be acting extremely professionally.

Interviewer: What is your opinion about the physiotherapists?

Male athlete: I feel that they respect and understand me. More than anyone else, they are there to help us.

Interviewer: So, how is your relationship with them?

Male athlete: It is great. They make a very good atmosphere every time we are receiving medical treatment. We even talk about things outside gymnastics. It is a moment to relax and ‘get off one’s chest’. We have their personal phone numbers, and if we have any doubts we can call them. Sometimes I call to ask opinions about how I should recover.

A central reason why physiotherapists are treated with such respect is because often they are the people athletes talk to when in need of more friendly and supportive counselling (Hemmings & Povey, 2002; Pearson & Jones, 1992).

Our relationship with the physiotherapists is great. We have their mobile number and sometimes we call to ask opinions about treatments or just talk about trivial things. When we are receiving treatment during a practice session, it is a moment when we can relax and talk about everything. We try to abstract from gymnastics.

An example of this close working relationship occurred during a mixed-sex training session, when a physiotherapist said out loud:

“When you come here (pass near the physiotherapist and his table) you suddenly gain pains! It must be because of the air!” All athletes smiled at what s/he said. (Field note)

The physiotherapist, during a private conversation with the researcher, later explained his/her beliefs in more detail:

If I was not here, they would not complain so much about pain and injuries. I think it is because they feel good being here with me. They can
relax, I give them some advice and we talk about other things than gymnastics. (Field note)

Physiotherapists are also associated with other roles such as injury prevention, acute intervention, rehabilitation, performance enhancement, promotion of a safe lifestyle, life-long learning and professionalism (Bulley & Donaghy, 2005). Consequently the physiotherapist plays a key role in athletes’ injury treatment and prevention.

We have seen in this section both the limited level of healthcare provided to gymnasts, but also the degree to which it is confined to a closed sportsnet, hierarchically structured with the coach at the top, and the gymnasts relatively disempowered. We have seen also that athletes and coaches perceive performances to be restricted due to this poor provision. In the next section, we develop this understanding by looking at the specifics of treatment and athlete recovery.

6.4 Sport, Recovery and Medical treatment

Across the different sporting contexts, research has revealed that athletes are prepared to take significant risks with their health to carry on training and competing while injured or in pain (see Chapter 2). Consequently, athletes and coaches desire that the injured gymnast returns to competition as soon as possible after injury. Physiotherapists may also be focused in helping the athletes to continue competing, instead of promoting a full recovery. As one gymnast explained,
most of the times, I do not fully recover from my injuries. For example, I have pains on my shoulder because I do not have enough muscular mass. That is why my tendons hurt and I have problems with the capsules. And the physiotherapist does not heal me until s/he eliminates pain. The physiotherapist just makes me able to practice. Just helps me to have less pain. Our physiotherapy is not based on cure, it is based on hurting less. (Male athlete)

This predisposition to continue competing goes in line with the desires and demands of other members of the sports figuration, such as parents (Brackenridge, Bringer, & Bishopp, 2005; Donnelly, 1997) and coaches (Roderick et al., 2000; Waddington, 2000). As Pike (2005, p. 207) notes, “to achieve the end of maintaining an athletic identity, the means were those expected by others in the organization, regardless of the consequences for their health”. This may lead athletes to ignore, reject or joke with certain medical advice. During a competition day a male athlete mentioned:

I broke a toe and the hospital doctor told me that after 15 days I could do jumps but without big impacts. Well, I just laughed! In gymnastics, 15 days without big impacts? Are there exercises in gymnastics without a big impact? (Field note)

Because of the peculiarities of athletes as patients, coaches and athletes tend to have more respect for medical staff with a sports background or a sports academic specialization. A coach of the female team mentioned:

Our doctors are always related with sport. So, they are better able to understand what to do and how to prepare gymnasts for a competition. They are better informed when compared to a doctor that is not related to sports performance issues and to the amount of time athletes' have to practice. (Female team coach)

When choosing and evaluating a treatment the recovery time is very important. Athletes and coaches tend to prefer a treatment that enables them to continue competing for a short period. According to the participants, medical staff related with sport provide treatment with a shorter recovery time.
Sometimes I go to a private clinic. The doctor is very friendly and kind, but the problem is that the treatment is very slow [laughs]. And with the Federation physiotherapists it is not, they try to finish the treatment as soon as possible because they know what we have to do and that the treatment can ‘fix’ the problem. (Female athlete)

These findings are parallel with Howe’s (2001, 2004a, 2004b) discussions about professional sport (See section 2.5). Howe argued that professionalization could increase the importance of a fast recovery, to the detriment of long-term health cures. However, this research shows that the influence of social context on the specifics of medical treatment is present in a wider range of sports settings.

The [physiotherapist name] is always in a hurry. Sometimes you say ‘this hurts me’ and s/he just puts ice and that is all. But sometimes you really have to see what is wrong. That is why I am rarely treated by him/her. I know that I will be there and I will not get better. With [physiotherapist name] I do physiotherapy during about 1h. With [physiotherapist name] 10 or 15 minutes and it is over. It is like I have done nothing.

As research has shown, the athlete-coach-clinician relationship is crucial to healthcare provision in sport. Physiotherapists become intentionally or unintentionally enmeshed in this culture of risk, committed to strive for better performances and higher risks. They are active agents in this process and are often pressured to try to find faster rehabilitation processes. However, the contrast between this and their training as a healthcare professional, requires them to often assume two opposite roles. Sometimes they support the culture of risk, other times they contribute to a culture of precaution, shielding athletes from pressure from coaches and enabling athletes to take ‘sensible risks’. (Safai, 2003). An example of this shielding occurred during a training session.

A male athlete comes close to the physiotherapist and asks for a bandage (kinesio tape) on a finger. However, the physiotherapist is doing
a bandage on another athlete and asks him to wait. The coach realizes that his athlete is waiting and comes closer telling the athlete to do the bandage himself. The gymnast argued that it would be better if the physiotherapist does the bandage. The physiotherapist says: “I already have the bandage ready for him, it will not take long”. But the coach, being impatient and wanting to maximize practice time, does not intend to wait and tries to pick up some tape. The physiotherapist sees what the coach is trying to do, and picks the tape before him saying harshly: “May I?” The coach returns to where other athletes are practicing and the physiotherapist completes all the bandages. If he had not intervened, it is clear that the athlete was going to follow the coach’s orders, and do the bandage himself. When everyone else leaves, the physiotherapist says: “He [coach] often thinks that his athletes should never wait to be treated. Thankfully this time I was able to do something. Unfortunately I am used to these situations.” (Field note)

According to Malcolm (2006, p. 377) “a central characteristic of the interaction between clinicians and athletes is a process of negotiation, exchange, and trust building”. While a parallel exists between these pressures and those that a ‘normal’ patient attempts to exert, these bargaining processes may differ in degree. To understand this difference, sociologists need to give emphasis to the balance of power between respective parties. In fact, “while sociologists of medicine have traditionally argued that medicine constitutes perhaps the most powerful profession in Western societies, sociologists of sport have argued that sports physicians often occupy a relatively weak or subordinate role” (Malcolm, 2006, p. 377). Data gathered during this research often reflect physiotherapists’ relatively weak position. But it also shows that these power gradients are in constant flux, influenced by factors such as the seriousness of the injury and the athlete’s age. For example, a female team athlete noted that she first listened to the coach’s opinion and only then she decides what to do:
Female athlete: Usually I listen to what the coach has to say and his/her opinion and then I give mine. We always come to an agreement. I listen to him/her and we normally have the same ideas.

Interviewer: And what is the role of the medical department?

Female athlete: Oh! Yes, the doctor and the physiotherapist also give their opinions, but when it is something not very serious, the decision it taken by the coach and me.

Significant, perhaps, is that the gymnast and coach generally argue and then there is no conflict. Conversely, however, a male athlete argued that the coaches now take his views into consideration because he is older.

Interviewer: When you are injured, how is it decided if you should stop practicing or not?

Male athlete: Well, it depends on the injury seriousness. The coach asks us our opinion, asks us if we are able to continue. And we keep giving feedback. I think that because of my age he listens to me more and considers my opinion. But if it is an injury that prevents us practicing, we go to the physiotherapist and ask for an opinion. And of course if it is even more serious, afterwards we seek a doctor. So, physiotherapists' opinion is very important for me.

Interviewer: So, who decides if you can practice or not?

Male athlete: I think that I have the most relevant opinion. Because, only I know exactly what I am feeling. Afterwards comes the physiotherapist’s opinion. They have a lot of experience. I previously observed situations where the physiotherapist said one thing and the coach another. The coach wanted me to continue competing. But after we listen to the physiotherapists’ opinion, we keep saying ‘no, I cannot compete’, to ourselves. But there was an occasion where I have gone to [an important international competition], even against medical advice. That is because only I can know exactly what I feel…

When there are elements of disagreement, coaches may seek to guide the views of the gymnasts by raising specific concerns.

Female team coach: I showed her the pros and cons and told her. ‘If you do the surgery now, you might be able to continue doing high performance sport. But is that what you really want? If you want to go to
the Olympic Games it will take 4 years to prepare yourself, and probably you will need more surgeries’. It is difficult for her to decide.

Interviewer: And has the decision been taken?

Female team coach: For now we decided to stop practicing and to analyse better the situation. I took her to the doctor and showed her the pros and cons. I talked with her about her objectives and if they were worth submitting to a surgery. Until she decides I will not give her my opinion, but she knows what I think. Her decision should be based on what sacrifices she is willing to do in order to go to the Olympic Games.

However, an alternative perspective was provided by a coach of the male team. S/he explicitly positioned him/herself more centrally in decisions about treatment.

Normally I am the one who decides if they should continue competing. But it depends. There are athletes’ that we know that pain in not an issue for them. There are others that we cannot give too much attention when they start complaining. It is not something linear, there are so many factors that it is not easy to decide. (Male team coach)

Hence, there was not a single format for medical treatment decision-making. Athletes reported different experiences, either suggesting that it is the gymnast who decides if he/she should compete, or that the decision is primarily negotiated between the coach and the athlete. Similarly, coaches’ also reported different perspectives: that it is the coach who decides if the gymnast should continue practicing, or arguing that the coach’s role is to help athletes to gather informed data, in order to help them to make a decision. The examples presented here were purposely selected between athletes and coaches of the male and female team. The aim (at this point) is not to demonstrate that there were significant differences between genders, but to show that different perspectives were observed in coach and athlete discourses in both teams. However, there is a consensus that, at least in face of what gymnasts consider
as a normal or recurrent injury, the medical perspective is not what usually influences a decision about whether or not an athlete should continue competing. In fact, sometimes athletes quite clearly disregard doctors’ and physiotherapists’ medical advice:

I have seen several gymnasts not respecting the medical treatment. And sometimes I do the same thing. I had a sprained ankle and the doctor immobilized my foot with plaster. But I took the plaster off and continued practicing. When I was going to do physiotherapy I always put the plaster on again. To the doctor I always denied that I removed the plaster [laughs]. I did all this thinking about going to [an important national competition]. On another occasion I broke my hand. They immobilized my hand, but once again I kept practicing. I ran and kept doing all kind of exercises. Obviously, if I moved my hand in a certain direction it would hurt me a lot. But everything went well the first time I removed the plaster. Now I understand I have been always stupid. When I returned to the doctor, my hand was clearly not healed and I had to completely stop. (Female athlete)

Research indicates that medical staff in professional sport accept, or are resigned to the fact, that their athlete-patients are far less likely to comply with their recommendations than are the patients they see in their ‘standard’ working lives (Malcolm, 2006, 2009, 2011). In fact, and “contrary to codes of medical ethics, sport clinicians also accept that their primary responsibility is divided between their patient-athlete and the team or organization which employs them” (Malcolm, 2011, p. 285). These considerations may lead to compromised diagnoses. Some studies, have concluded that medical provision given by club is generally of a poorer quality than that provided to the general public (Malcolm & Sheard, 2002; Waddington, 2000). When asked to compare his private to the sports related work, a physiotherapist mentioned:
Here [sport related activity] I just try to avoid pains and delay possible injuries. My work on the clinic is much better. I have more time and I really try to cure them. (Field note)

Coaches tend to evaluate physiotherapists’ work and efficacy, according to the time they need to make athletes able to compete.

Male team coach: Sometimes I listen to physiotherapists’ opinions, other times not. It depends. I also have a lot of experience. If they are better quality physiotherapists I listen to them more. Because there will be athletes always complaining about little things.

Interviewer: And how do you evaluate what is a good physiotherapist?

Male team coach: By its efficacy. There are some physiotherapists able to solve things and others that are not. For example, a younger physiotherapist has a more alarmist tendency, especially during pre-competition periods. For example [physiotherapist name] lacks maturity. During pre-competition periods gymnasts are tenser, more reactive to pain and we cannot give much attention to that. One thing is when an athlete complains during training sessions, another is when they complain during week tests or pre-competition periods. It is normal that they feel a lot of pains because they feel pressured and become super sensitive. And [name of a physiotherapist] gives them too much attention. We must manage the information athletes receive.

Interviewer: And how do you do that?

Male team coach: For example, a pain in a shoulder. The more you are tense, the more it hurts. Because tension in the shoulder changes the way trapezius contracts and will make things even worse. If you show concern, then the athlete will try to defend himself more, and this can be dangerous. But [physiotherapists name] is a really good physiotherapist. I respect his/her opinion as an assessment. But according to him/her I have an athlete that should not be competing. Before competitions there was nothing that would not be hurting him [laughs]. And s/he gave him too much importance. For example, I worked with [a very experienced and famous Portuguese sport doctor] and he is really an artist, he was able to deceive them all. Athletes sometimes also need to be deceived.

To this coach, controlling information athletes receive about their injuries is an important strategy. While the explicit rationale for this strategy appears to be the athletes’ own interests, there is clearly also a sense in which the coach benefits
from this deception, for the coach will also accrue sporting success and privilege, but does not have any risk in terms of larger term health concerns.

6.5 Conclusion

The Portuguese Artistic Gymnastics National Team sportsnet is most accurately described as closed, dense, homogeneous and stable (Nixon, 1992). Despite not receiving financial remuneration, gymnasts are deeply immersed in these figurations, with restricted social lives outside of the group, and a propensity to socialize only with those who understand (often through personal experience) the norms of the sport’s culture of risk. We see that medical provision is relatively limited, largely directed by coaches and therefore that medical staff have diminished practice autonomy. The consequences of this are that whilst inter-personal relations influence specific cases, the overall pattern is one in which coaches control, shape and guide both medical treatment and decisions about whether gymnasts should continue training and competing. Consequently, performance considerations consistently dominate health concerns (Theberge, 2007). In the next chapter a more detailed examination of gymnasts’ experiences of pain and injury is provided.
Chapter 7 – The Culture of Pain and Injury in Gymnastics

7.1 Introduction

Fundamental to addressing athletes’ pain and injury experiences, is a consideration of how research participants understand pain and injury. What do they consider as an injury and do they distinguish it from pain? As previously discussed (section 2.3), literature indicates that sports participants may have particular perceptions of these concepts. The current chapter aims to discuss data about pain and injury concepts and the athletes’ experiences of pain and injury. Finally, it will also present data concerning coaches’ perspectives. Coaches are important members of the sports figuration who have a significant influence on the athletes’ behaviour and conduct.

7.2 Concepts of Pain and Injury

According to the interviewees, pain and injury are a part of their regular sporting activities. In fact, when questioned about what an injury is, a male athlete answered:

What is an injury? [laughs] Well, I do not know. We have so many and we can get injured in so many ways.

Injuries may have different kinds of severity and different consequences for the athletes’ life. Another athlete distinguished between two kinds of injuries:

Female athlete: An injury can be serious or not so serious.

Interviewer: And how do you distinguish both? Can you give examples?
Female athlete: A serious injury is related to surgery. It occurs when we accidentally fall, or suffer a big impact. For example, I already broke a foot and a hand, and I think that those injuries are serious. On the other hand, we have injuries that are not so serious, but often last for a long time. Even longer than serious injuries, because we never know what they exactly are. We are always trying to find what it is. One moment it hurts, another it does not. Well, we are gymnasts...

Interviewer: What do you mean by ‘we are gymnasts’?

Female athlete: We have a lot of injuries. Injuries that a normal person not does have.

As formerly observed (section 2.3) Roderick (2004) also relates the seriousness of an injury to the time needed for recovery. All gymnasts made this association: “A serious injury is when you have to stop practicing” (Female athlete). Furthermore, many interviewees mentioned that a serious injury also affects their life outside the gymnastics practice. During an interview, an athlete was clearly experiencing limited movement of the neck. The interview occurred about one hour after a training session finished. When asked to talk about his injuries he answered:

Male athlete: This injury I have on the neck is something insignificant. To me a serious injury is when you broke a leg or an arm, something that affects your life outside the gymnasium. The other injuries just bother us and they delay our trainings. I can do my normal life, dress myself, go shopping and take a bath.

Interviewer: I noticed you were stretching your neck. Do you feel anything?

Male athlete: Yes, I am with pain, especially now that it is cooling down. My neck is getting contracted. But I think this is a non-serious injury because I am doing my normal life. It just delays my training sessions.

Additionally, the idea that gymnasts experience several injuries concurrently was present during all interviews. This goes in accordance with an article published by the International Gymnastics Federation Binder (N/D, p. 2): “If an athlete competes in any sport at a high level, injuries are a part of it”.

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Coaches also associated injury with the need to stop practicing: “An injury is when an athlete has to stop practicing, when he is impeded to compete” (Male team coach). One coach argued that the occurrence of overtraining injuries is coaches’ own responsibility.

There are accidents, unexpected things that you cannot predict and there are injuries resulting from constant repetitions. My opinion is that injuries caused by constant repetition are coaches’ entire responsibility, because he was unable to manage the training intensity, giving no time for the body to adapt (Male team coach).

Therefore, coaches seem to be conscious about the fact that their training schemes can have a significant impact in the incidence of pain and injury. Nevertheless, coaches perceive injuries as inevitable during an athletes’ career. Thus, they distinguished two different kinds of injuries:

Male team coach: A serious injury requires a surgery with a recovery time of no less than 6 months. Everything else are just jokes.

Interviewer: So, what is a ‘joke’ for you?

Male team coach: Everything else. A shoulder, a fist or an elbow that hurts. Only a surgery with a long recovery time associated is a serious injury. And there is no athlete that can escape at least one. Because we know that the longer you are exposed to the risk, the higher the injuries rate is.

The concept of pain was also distinguished from the concept of injury. During training sessions and competitions, when gymnasts were able to continue competing, they reported to the physiotherapists that they were in pain. Whenever they felt it impossible to continue, they reported being injured. During interviews, pain was described as “a limit that we cannot control, something that tries to impede us to continue. It is something psychological, but
as athletes, we know that we can continue doing exercises” (Male athlete). A female athlete hesitated when trying to define what is pain: “Pain? Well, I think it is something that bothers us. I do not know, it is difficult… (laughs)”. Athletes were unable to give extended definitions about pain. They described it as something very normal and at the same time difficult to define. A female team coach also laughed when questioned about what is pain: “Why do you do those questions? (laughs) I think it is a sign I have to respect. It depends on the situation. If it is a muscular pain, then it is a part of the process. But pain is a sign and we must be careful if we want to avoid an injury”. Young et al. (1994) argue that athletes usually try to disregard pain and conceive their injured bodies in a depersonalized and/or distanced way, as if pain was not a part of him/her.

The initial hesitation in the answers of many interviewees may indicate that most of them had never reflected about the concepts of pain and injury, and that they regard both as something recurrent on their sports career. An indication of the difficulties in being reflexive about pain and injury is the conclusion of a female athlete answer “Well, pain is pain!”. Pain and injury are always present during competitions and training sessions. They are a part of what being an athlete is. Thus, having pain and injuries is so routinely, so deeply engrained in habitus, that athletes may find it difficult to give a clear definition. Additionally, a close relationship with risk, may lead athletes to a sensation of being protected against more serious injuries:

I am best prepared during international competitions. When I am on one of those competitions, I know that if I push harder and fall I will be ok. I feel that I am so well prepared, that I am not afraid of doing any exercise. I know that my joints are all warmed up and prepared. If something
unusual happens, I will be prepared. I think: ‘well it was for this that I fought so much, so I cannot be afraid’. During competition I do all exercises on my limit! On certain occasions I even opt for not doing the warm up. I do not want to spend my energies, I know that I practiced a lot and I just want to do the exercises.

Gymnasts’ opinions were that with adequate training they would be capable of sustaining higher, if not all, impacts. Thus, they started to feel a (false) sensation of protection, being consequently more confident when competing. Instinctively, they took more risks, and thus exposed themselves to even more serious injuries.

Another factor that may contribute a higher sensation of resilience towards injuries was the use of protective equipment. As argued by Dunning and Sheard (2005), one of the actions taken to try to reduce the athletes’ injury risk has been the use of protective equipment. When competing and practicing, gymnasts and coaches were always very concerned and alert about the use of mats, sprung floors, hand guards and padded vaults. Before doing any exercise, gymnasts asked for help to prepare the protective equipment. Furthermore, coaches frequently recommended that athletes correctly prepare the safety equipment before doing any exercise. On the other hand, when athletes ignored these precautionary measures, coaches started to argue with them.

An athlete started practicing a new jump on the vault and the coach said out loud: ‘What are you doing? You know you have to use a mat before you know how to perform that exercise! Do not be irresponsible. (Field note)

The use of this equipment was intended to reduce the magnitude of impact and frictional forces imposed on the musculoskeletal system and thus the risk of injury. However, “no formal controlled studies have evaluated the effectiveness
of matting, sprung floors, hand guards, padded vaults, or other protective devices for preventing gymnastics injuries” (Daly, Bass, & Finch, 2001, p. 10). In fact, its use may help athletes to perform riskier exercises, or with greater intensity and consequently, acquire more serious injuries (Malcolm, Sheard, & Smith, 2004). Therefore, during the next section, attention will be given to the gymnast’s experiences of pain and injury.

7.3 Athletes Experiences of Pain and Injury

Interviewed athletes not only reported experiences of pain and injury, but also talked about being in pain when doing exercises. A female athlete mentioned: “Having pains does not bother me anymore. I always feel pain on my shoulders, on my back, and so on… [laughs]”. One characteristic detected during several interviews, was that athletes often laughed and joked when talking about pain and injury (see female athlete quote below). Probably unintentionally, or even instinctively, athletes tried to lessen the seriousness of the theme, and the experiences they were describing. In this regard, Charlesworth and Young (2006, p. 92) argued that “male and female athletes may hide, deny and disrespect pain [and injury], as well as depersonalize its ‘physical manifestations’”. In this respect, a male gymnast mentioned: “injury is something we not try to think a lot about, you know?”. Consequently, taking painkillers was a strategy described by several athletes to help conceal and ignore pain.

Female athlete: We always compete with pains. For example, I recently competed on a [international competition] with intra-venous injections.
Those injections helped me to tolerate pain, but nevertheless, I still felt pains. On one occasion, I sprained a foot during a [national competition]. I ruptured the ligaments and was unable to do exercises on two apparatus. But the team needed me, so I competed on the last apparatus, the parallel bars. My colleagues sprayed [anti-inflammatory] on my feet and ankles [laughs]. We feel pains because we have wounds on our hand, or because we sprained an ankle a few months ago and it still hurts. But we continue competing, and when we are competing we never feel pain! Only before or after the competition. We are so focused that I almost cannot feel pains. But when I finish the exercise… For example, my knees, I did an exercise on the floor and I do not remember feeling pains, or at least I did not think about it. But when I finished the exercise, I could barely walk!

This culture of accepting pain was encouraged from a young age. Athletes learned to deal with pain and injuries as things they must accept in order to improve performance and succeed. Gymnasts are members of a sport figuration that “shape [their] individual process of growth and development, and the trajectory of individual lives” (Loyal & Quilley, 2004, p. 5). From the moment they start practicing, gymnasts “are enmeshed in a sporting culture that tends to normalize risk, pain, injury and abuses” (Pinheiro et al., 2014, p. 13).

Interviewer: What leads you to dedicate to this sport?

Male athlete: Well, I do not know [pause]. I just started practicing. In the beginning it cost me a lot, because we are kids and we are not used to practice so hard. I cried during training, forcing the flexibility to do flips. The exercises were harsh, but as we grow up, we start to understand why all that effort and dedication is necessary. Without it, we would not be able to achieve anything. Of course it cost a lot, we know that.

Eventually, athletes started to understand and accept the sacrifices they have to make, in order to improve performance, and achieve better results. They shared the idea that to improve their performance, they have to accept “a significant
It is difficult to return from holidays, but that is normal, I am used to it. In fact, it is common for me to abdicate to go on holidays. By doing that, I can avoid this feeling of ‘returning’. My wrists, my elbows, my shoulders… Well it hurts everywhere! Especially after summer holidays. And we know we have to opt. That is, we do not have holidays like the other people. But that it is a good thing because we will be better and have fewer pains. And after so many years of practice, we know this and we are already used to all this (Male athlete).

Athletes reported feeling more pain after they resume training. Their training exercises are physically demanding and intense at several levels, such as muscular, joints and flexibility but also psychologically. So when they resume practicing, they will feel pain because their body is not used to the training intensity. Eventually, many athletes decided not to stop practicing through holidays in order to avoid feeling pain after. This will increase the time they spend practicing gymnastics, decreasing not only the time they have to rest but also the contact they have with people outside the gymnastics figuration.

Additionally, because pain and injuries are frequently a consequence of constant repetitions and intensive training sessions, athletes repeatedly made expressions of pain while practicing. After finishing an exercise on the pommel horse, a male gymnast made a very visible sign of pain. Questioned if he was ok, he answered: “Damm’, it hurts me everywhere! I am all fucked up!” (Field note).

Additionally, gymnasts can suffer injuries caused by accidents or unintended movements.
Female athlete: During [a national competition], I did a hyperextension on my two knees. Nothing was broken, but it is an injury that I still feel [4 months after]. I was going to have [an international competition] one month after, so I had to practice with pains, and at the same time trying to manage that injury. Two weeks ago I had a magnetic resonance imaging scan, and I still have a lot of liquid on my knees because they are fiery. So, it is normal that I feel pains.

Interviewer: And are you doing anything to help you with that injury?

Female athlete: Yes, I am taking intra-venous injections.

Some accidents are directly related to the lack of rest and to psychological factors. Gymnasts worried about external problems such as school or social life, but mainly to the extent that these things compromise their concentration on gymnastics.

Male athlete: The lack of rest is associated with most of the injuries I have had. Probably due to a bad time management, not helping us to be focused on the exercise. We can get injured with any distraction. Sometimes we are unable to be focused on what we are doing, we have so many things on our head. Sometimes we are tired and we are thinking on other things, on other problems. I have an injury on a meniscus due to that. On another occasion, I hit my head on the high bar because I was constantly thinking about school. I was thinking about some evaluations and work I had to do. I was so distracted that I simply dropped one hand. I could not react, so I hit the bar with my head.

Interviewer: Was it where you have that scar? [it was a clearly visible scar]

Male athlete: Yes.

Another athlete reported a situation where an injury was the outcome of an high number of athletes practicing at the same time, along with the desire to finish the exercises sooner.

Male athlete: We were in a ‘preparing for competition’ period. It was almost guaranteed that I was going to [an international competition].
However, the gymnasium was full of young athletes. It was very stressing, because we had to be very careful during floor exercises. Additionally, I had to do exercises beyond what I normally do in several apparatus. So, all that stress and confusion in the gymnasium, along with the desire to finish the exercises fast in order to rest a little bit, and to be with my girlfriend, resulted in an injury. During an exercise on the floor, I accelerated too much and forced the landing. I felt like if it was a puncture. Sometimes we are not focused on what we should be.

These gymnasts were willing to sacrifice their health in exchange of better performances. Roderick (2006b, p. 20) argues that “risking one’s health in pursuit of sporting success is likely to occur where athletes have accepted wholeheartedly and uncritically the goals – in particular the goal of winning – associated with sport”. This leads, as is the case of the gymnast above, to blaming oneself when injuries occur, rather than the contextual factors that conspired to cause the injury. Similarly, Hughes and Coakley (1991, p. 308) observe that accepting the sacrifices associated with sport “in real sense, is the result of being too committed to the goals and norms of sport”. A male gymnast in the following quote illustrated this.

Male athlete: The most painful injury I had occurred when I was only 14. I was practicing very well and had almost confirmed the presence on [an international competition]. However, my wrist was swelling and I had been advised to not go. But as it was my first [international competition] I decided to risk it.

Interviewer: But, did you have further diagnostic investigations?

Male athlete: Yes, I did an x-ray and I had a hole on my ulna [laughs]. Everybody got scared because they were counting on me. I also fell down. Afterwards I did a magnetic resonance imaging, and they saw my bone in 3D. It was worn out. In fact, I could barely use it. (…) But I still competed in two apparatus. I competed in the [international competition], even without the doctors recommendation. We abdicate so many things, we practice during one year, two times a day, we missed classes for about one month…
This willingness to sacrifice was also observed during training sessions and competitions. When doing an exercise on the vault, a female got hurt when landing. After a few moments, she went to the asymmetric bars to do the warm up. She was clearly in pain whilst doing the exercises and when she landed on the floor again she immediately held one knee, while making facial expressions of pain. When she looked up, the coach saw that she was crying and they started talking:

   Coach: You should not compete if you have a lot of pains.

   Female athlete: But I really want to compete [crying].

   Coach: Is it due to a question of honour?

   Female athlete: Yes it is! I really want to!

   Coach: Well I think you should really stop. (Field note)

After a few moments, the gymnast decided to try the exercise once again, but she was unable to do the initial run. She started crying once again. Only then did she opt to go to the medical staff and receive assistance. Later, when interviewed, she was asked to reflect on what occurred.

   I got injured during an exercise in the vault. But I really wanted to compete in the uneven bars. I really wanted to do that apparatus. But my coach’s opinion was that I should stop. I also felt that I was unable to compete. I really was feeling a lot of pains. My body started to cool down, and the pains started to increase. Nevertheless, I was able to rise and I thought: ‘maybe this is not so serious. Maybe I just got scared’. So I tried to do the exercise but I was always feeling pains. After another try, I reflected better and decided to stop. My main objective was not the [national competition]. I should be focused on [two international competitions]. When I decided to stop, I did so because I thought about what my objectives were. If my main objective was the [national competition], I would probably continue competing on that day. I am a little bit crazy like that! [laughs].
Gymnasts frequently finished the training sessions with complaints about pain and injuries. This was visible not only from their facial expressions, but also by the way their movements were restricted. Recurrently, they also expressed signs of frustration, hiding, isolation, crying, anger, kicking, punching or throwing objects after an injury.

While performing an exercise a male athlete got injured. While leaving the practice mat he was vigorously throwing away the bandages. Eventually he started crying and covered his head with a shirt while going to an isolated part of the gymnasium. (Field note)

Consequently, being injured not only distresses athletes’ training, but also has an effect on the athletes’ mood. A female athlete said, “When I am injured I feel very down. And that reflects on other aspects of my life. I feel sad, thoughtful, not so energetic and positive”. A male gymnast linked frustration to the fact that injuries are a regression in his athletic development.

I feel frustrated because I know that without pain, I would be able to do those movements and exercises. We know that if we try and force the movements, we may be able to tolerate the pains and do the exercises. But constantly forcing and ‘massacring’ the body is not good. So, it is a little bit frustrating because we cannot accelerate the process. (Male athlete)

In this regard, Roderick (2004) also argues that when an athlete is injured and unable to compete, it may lead to the development of guilt, depression and frustration. Another athlete indicated that these feelings are frequently associated with the injury seriousness.

Interviewer: How do you feel when you are injured?
Male athlete: How do I feel? [laughs; pause for reflection]. Well, it depends on the injury seriousness. If it is a serious injury, one that completely puts me apart from practicing, I feel very demotivated, but not only on gymnastics. In fact, I have had several discussions with my parents because I failed in several school subjects. I was more worried with the injury recovery. When we are injured and stop practicing, we are supposed to have more time to study. But I did not dedicate that time for study because I was always thinking: ‘why has this happened to me? What am I going to do now?’. Everything was already planned and an injury changes all your plans, all what you have been fighting for… And suddenly you are tossed aside. It is a feeling of impotence.

On some occasions, coaches try to blame athletes for the injuries they acquire. This could increase athletes’ feelings of frustration and anxiety. However, many athletes tried to justify and understand the coaches’ behaviour:

Interviewer: How do your coaches treat you when you get injured?

Male athlete: [laughs] It depends. Every coach has his own personality. There are some that get upset and start complaining immediately. Once, I was already on a [international competition] and I hurt my a shoulder. I did not compete and the coach said to me: “it is your fault!”. And we become even more upset with each other.

Interviewer: How was that situation?

Male athlete: I hurt my shoulder doing an exercise on the parallel bars. I was going to do exercises on the parallel bars and on the vault.

Interviewer: How old were you?

Male athlete: I was 19. So, I got injured on a shoulder and I was unable to move. It hurt when I was just jumping. The physiotherapists were also saying that I was unable to compete. I started to take painkillers but that did not help. And the [coach name] said the reason I could not compete was my fault and he got mad. I understand the coach, but… The coach went to my room before the competition and started saying: ‘So, you can compete right? Can we count with you?’ And I answered: ‘I really cannot do it [the exercises], I barely move my shoulder. I am not going to compete like this’. I was without confidence on me, with my shoulder on that state. But it is never easy when we are injured and get negative feedback from the coach. But I understand that they are fighting for the same things and trying to help us.
Probably because they all know what it felt like to be injured, they always tried to support other colleagues whenever an injury occurred. During training sessions and competitions, as soon as an athlete performed an unusual movement or had a heavy fall, they started running towards their colleague to see if s/he was ok.

Female athlete: Whenever someone is injured, of course we try to give them more attention. And I also feel that [receiving more attention] when I am injured. It helps us during that period, because we have a sensation of emptiness.

Athletes’ strong bonds may help to explain these feelings. Another gymnast mentioned:

Male athlete: I understand what they feel when they are injured. And we have that spirit of trying to help. Sometimes, when other athletes are unable to do good exercises because they feel pain, of course we feel bad for them too. I always try to be with them and smile, to give them the motivation to go on: ‘Come on, try to forget it, you are going to do better on the next apparatus’. We always try to find a positive side, and not let everything tear apart.

One of the implications of these findings is that athletes are far more supportive of each other than perhaps is the case in other figurations. For instance, Roderick (2006a) described how footballers would frequently participate in discourses which joked about and/or stigmatized injured colleagues. Sometimes, when the injury was clearly incapacitating athletes cried along with their injured peers. During a national competition, a succession of three serious injuries occurred in three different apparatus. The audience fell silent, several athletes were crying and even the judges were giving emotional support. Interviewed gymnasts were asked to talk about that particular competition. An athlete who competed after one of those injures mentioned:
Male athlete: Well, it already happened to me before [suffering a serious injury during a competition]. The environment on that competition was very heavy. Athletes crying, people stressed up. I was also stressed with the fact that [male athlete] got hurt, but I was also returning from an injury. So, I tried to be focused on what to do. That competition was very important for me.

Seeing a colleague get injured and showing severe pain, before competing, is what Howe (2004a) described as public acute pain. This pain may affect the way a gymnast focuses on their exercises. One of the athletes that got injured on that day described:

Female athlete: When I see “ugly” injuries, and I have seen quite a few, I get goose bumps.

Interviewer: I remember what happened on [national competition].

Female athlete: Yes, I am one of those injured. I have seen [a male athlete] getting an injury on the kneecap during an exercise on the floor. He started screaming! And I was warming up, because I was going to do my exercises on the floor next. I did my exercises ok, but next, on the vault, it also happened to me [a serious injury to the knee]. My other colleagues also started to cry. A few moments after, another male athlete got a serious injury. His knee ligaments cracked! Everybody was getting crazy with what was happening! I did not want to be there anymore, I just wanted to leave.

7.4 The Use of Pain as Punishment

On some occasions, athletes reported that coaches used corporal punishment in order to pressure them to continue practicing. According to Pinheiro et al. (2014, p. 10) corporal punishment is a “physical abuse to which athletes are frequently submitted”. It is the infliction of pain for the purpose of coercion. Athletes described the use of corporal punishments when they were afraid of doing an exercise or when they complained about pains.
Female athlete: When I was little, I had a coach who beat me. Still, when I was little, I had another coach that sometimes would hit me until my leg was red. And on the next day the coach would do the same thing. I was afraid of the coach. And now I still am. I feel the same thing like when I was little every time a coach yells. Because when I was young I never knew what was going to happen after.

Interviewer: When you say young, how old were you?

Female athlete: Ok [pause]. Not so little, 13, 14… After that age I started to react. And things started to be more verbal and less physical.

Interviewer: What do you felt when that happened?

Female athlete: We got angry. Especially because we were a small group.

Interviewer: What about other?

Female athlete: Things happened with everybody. Sometimes we joked with the situation.

Interviewer: Did you tell your parents?

Female athlete: Well, sometimes.

Interviewer: And what they told you?

Female athlete: In reality, nothing. In fact they knew nothing, we would not tell those things! (…)

On another example, a male athlete reported:

When I was little, I have been close to giving up, at least two times. I was not as strong as I am now and the coach beat us all. We were so happy when the coach could not come to trainings. We were always looking at the door to see if the coach arrived. Sometimes I faked to be sick to avoid going to practice. The trainings were very harsh. There were times that my mother tried to talk with the coach. But the coach was also aggressive with her. The coach was always beating me, hitting me on the back of my head. Every time I was unable to do something the coach would hit me until I fell on the floor. (Male athlete)
Male athlete: On one occasion I ruptured my knee ligaments. When I told the coach, s/he just started beating me a lot! I was completely beaten! From that time on I just decided to never tell again, even if I broke something. My mother picked me up at the end of training session and I told her that my knee was hurting a lot she took me to the hospital. At the hospital they found that I had a knee ligaments rupture. When my coach found that I went to a hospital s/he phoned my mother and they started arguing. My mother wanted me to leave gymnastics, but I really like this [pause]. Afterwards, the coach beat me every training session. Once, I was doing an exercise on the bar, but I was not being able to do it as I wanted. I was really trying, but I just was not understanding the movement. It was not because I did not want to do it. The coach slapped me on the chest so hard that a ring remained marked on my skin during a week. I was leaving the bar when the coach pushed the hand back and did this movement. (...) I think my mother is also afraid of the coach because s/he reacts very badly. When my mother took me to the hospital it was like a movie! The coach barely did not hit her. Everything just because she took me to the hospital. On the next day I returned to the gymnasium to practice and the coach beat me even more because I went to the hospital. But deep under s/he was a good coach with a lot of experience.

Although these gymnasts were aware of the deviant nature of the acts they experienced, their commitment to the sport ethic, and their sense of dependence on the perpetrators led them to develop a heightened level of tolerance towards these corporal punishments. Additionally, coaches’ opinion and how they act when an athlete is injured has a strong impact on the athletes’ behaviours. They are a part of the gymnastics figuration and their acts and beliefs may affect or even constrain athletes’ perceptions and actions. While most of the data gathered in previous research about pain and injury reflects on the coaches’ role, it rarely reports their opinions and perspectives. Therefore, it
seems relevant to now focus on coaches and how they explained and described their acts and feelings when an athlete is injured.

### 7.5 Coaches’ Perspectives on Pain and Injury

Coaches’ support and opinions may have a decisive influence on athletes’ actions. During competitions, when an athlete has an injury, the coaches tried to give emotional support. They immediately got closer to the athletes competing next, using strategies such as pats on the back or encouraging words. In this regard, coaches were also asked to talk about how they act when they have an injured athlete that is unable to practice or compete.

I always try to help. I try to be supportive and take them to the best specialists. Above all, nowadays I try to avoid risks. To be the best coach possible and try to prepare them the best I can. We know in advance that those who practice this sport may suffer injures. And that is a real ‘shit’. There was one year when several of my athletes got injured [name of the athletes]. It was a period during which I have been more absent, and I do not think it was a coincidence. In fact, previously, my athletes were suffering injures rarely. Nowadays I try to be more demanding, asking them to work harder and to do more repetitions. (...) But, there is an assumed risk: this sport is very dangerous (Male team coach).

Coaches’ behaviour during public competitions, and also the way they described their support, may contrast with some violent and less supportive experiences interviewed athletes’ previously described. Nevertheless, all coaches acknowledged that doing high performance gymnastics entails several risks. Athletes are not viewed as “normal” people, instead, they are expected to continue competing while in pain or injured. Furthermore, the amount of care they give to an injured gymnast is not only influenced by the injury seriousness,
but also by the time of the season when it occurs and also by the athletes’ next objectives.

Female team coach: Well, it is related to when the injury occurs. For example, if they are preparing an [international competition], I will always give them a lot of attention trying to help them recover as fast as possible. For example, [athlete name] suffered an injury on her back. She has more time [this athlete was not trying to reach that important international competition]. I try to give her everything she needs to practice, but I have a higher tendency to turn off my attention. I know what she is doing, but I am not monitoring everything. They tell me if they are feeling better. I do this in part because during that recovery period they have more time to be normal people, and they do not have to continue practicing when they do not feel good to do so.

Interviewer: When you say ‘normal people’, what you mean?

Female team coach: More normal. [pause] For example, when you hit with your arm on something. You can opt to carry a bag on the other arm. If I am injured on my back, I will not sit down on a hard chair, I will choose a softer one. I do not want to be sat on a place were I am going to feel pains. High performance athletes, when they are injured they keep practicing. (…) It is something you would not do unless you really have to.

This perspective is similar to Roderick et al. (2000) and Safai’s (2003) findings in professional and amateur sport respectively. These authors discussed that the stage of the season and importance of the forthcoming competitions affected the extent to which athletes are constrained to compete injured. Therefore, and as argued by Safai (2003) the culture of risk is highly complex and therefore should not be explained only according to the increasing commercialization of sport. In gymnastics, the time of the season when an injury happens had an impact not only on the attention coaches gave, but also on the treatment they advised and on the decision to continue while injured. Sometimes, injuries and consequent surgeries are so frequent, that coaches also mentioned having difficulty deciding if an athlete should continue
competing. The fact that those injuries had a negative effect on the athletes’ performance was also very relevant.

Female team coach: What [name of the athlete] has is very limitative. She did 4 elbow surgeries. And I think that at some point, we need to reflect if the motives to continue practicing are still worth. (…) The two more recent surgeries, she did because the objectives were close. She could be on [international competition]. And that was something she really wanted to do. She was already qualified for [international competition] when she had that problem on the elbow again. If she did not do the surgery, in [month] she would not be able to go to [international competition] in [month (6 months later)]. She only did the surgery in order to go to [international competition].

Interviewer: And what is your opinion, concerning her health?

Female team coach: The doctor says the surgery is not very invasive. He does a little hole, vacuums the articulation and that’s all. It only takes about thirty minutes. But because it is on the elbow, of course she has to be anaesthetized. In terms of health issues, she also did that question. She is 21 but she still wants my opinion about that. And what I tell her is that I understand the reason why she did it [the surgery]. I think it is not evasive, but of course, we are not supposed to be doing surgeries all the time. The same injury returned recently. It just changes the arm where it returns!

Sometimes coaches use pain as a way to measure if the training is being effective. Training and not feeling pain is sometimes taken to be a sign that the athletes need to practice harder.

Male team coach: My athletes practice with pain and sometimes when recovering from an injury.

Interviewer: And how do you deal with that?

Male team coach: My opinion is that you have to go until it hurts. You have to enter pain, a bearable pain. And on the next day you have to reach again that threshold, or sometimes even go further. I always try to manage the exercises through pain. Always reaching pain.
National Team coaches have a strong reputation, which may increase the liability of athletes to rigidly follow their instructions. On the other hand, as stated by Gervis and Dunn (2004, p. 222), “a coach’s reputation is built upon the athletes they produce”. Thus, “through their gymnasts’ results, coaches strive for recognition, success and seek to increase their influence within their sport” (Pinheiro et al., 2014). Coaches may use their influence and reputation among athletes to constrain them to continue training, even after a serious injury and without reflecting on later consequences.

Male team coach: I do not let an athlete give up from gymnastics just because he is injured. I do not admit the possibility of an athlete abandoning when he is injured. I think it is wrong because he is judging gymnastics for wrong reasons. And I always try to help them. I have had athletes with injury situations that supposedly were unresolvable which I helped to solve. [Name of athlete] when was 17, he was going to give up due to an injury on the back. We did some structural changes on the training exercises and eventually he is ok now. [Name of athlete] at 26 had a herniated disc, which he still has and is going to have. We did strength workout and we solved the problem. He is going to continue doing gymnastics till he cannot anymore. With additional care of course. Just as I have with [name of the athlete] back when he is more tired. I know I cannot abuse. But those are fragilities we have to deal with. We have to know our athletes. We have here a group of athletes that we cannot treat equally. Some are more resistant in some things and others in another.

Injuries are recurrent and sometimes coaches are unable to remember which injuries their athletes have or had exactly. During a training session one male team coach was talking with a physiotherapist and mentioned: “they have so many injuries that sometimes I do not even remember what the injury is or which side it is on”. If coaches forget and neglect athletes’ injuries, while preparing the training sessions or selecting the exercises, this may impose even higher dangers to athletes’ health. The coaches’ perspective is that practicing
while in pain and injury is an unavoidable result of all high performance sports, not only gymnastics:

Female team coach: Only high performance gymnastics is harmful. And that only happens on a later stage of their career. And us, coaches, we have to alert parents to that. People have to know what they are going to do, all the problems associated with high performance. But that is not only on gymnastics. It happens in all sports. High performance sport gives no health in any sport. So, they have injuries, overload injuries because they practice the same things over and over. When that happens, we need parents to understand.

Interviewer: And you talk with parents about that?

Female team coach: They are here with us since very little, so they are used to this sport and start to see how it is... And sometimes problems happen.

All coaches were high performance athletes. During training sessions, they sometimes talked with each other about the injuries they had when they were competing. Some injuries are very similar to those their athletes have. This gives them a sense of being able to understand what their athletes are feeling and how they can help them. For instance, a female team coach said: “I also had the same injuries, so I really think I can understand what they are feeling”. Coaches also compared the conditions they formerly had. On one occasion a female team coach said: “When I was young, the balance beam had no sort of protection. And I was constantly rolling on the beam, hitting with the back of my neck. Today I have 3 vertebra almost “glued””. At the same time, because they are former International athletes they can be an example for the athletes. During their sport careers they accepted risks and performed while in pain and injury, which may legitimize what they demand and expect from their gymnast.
Interviewer: Is there any relation between your former career as an athlete and what you are now as a coach?

Male team coach: Yes, it influences a lot. When you are performing an exercise you can feel your body getting sore and your mind starts to block you. You cannot go further from what you feel. But I know that the body is always able to give more, we just have to be mentally prepared. It is truth! Sometimes we establish a limit and we should not do it. We have to ignore that limit and go further. Their body always withstands more than what we think. For example [athlete name], he sometimes starts complaining ‘it is hurting, I cannot anymore’. I know that he is able to give much more. The limit is on his head. Mentally, he is very weak. On the other hand [athlete name] always tries to go further and complains much less.

In this regard, coaches said that depending on the athlete’s personality, they take their complaints more or less seriously.

Female team coach: When they complain, I try to ask when it started to hurt and during what exercise. Because they sometimes complain about little pains. We practice several hours, sometimes a little thing, in three days may become huge and she will be unable to practice during several time. But it also depends on the athletes’ personality, sometimes we give them more attention, sometimes less. There are girls with sensitive personality, everything hurts. For example [name of an athlete] when she was very young, I never gave her too much attention. Because sometimes she complained for serious things, but other times she complained because she simply tripped over and had pain in a finger. We devalue a lot some girls’ injuries. Sometimes they tell that it is hurting a lot when you tell them to do a flick on the beam. “My foot hurts, I am so in pain!” And they cry a lot, a lot... But you, after some years of practice, you know if they are really with pains and what you should do. You have to do a psychological intervention. "Ok then, if your foot hurts today, instead of 5, you are going to do 3 repetitions". And there they go and do it. They had no pain on the foot!

Interviewer: So, why do they complain?

Female team coach: Because they have fear. Afterwards they go practice on the floor and nothing hurts! It is impossible.

Those gymnasts who continue practicing while in pain and assume more risks are often presented as an example for the colleagues. In fact, coaches incentivize athletes not only to accept pain, but also to deal with it as an objective or a sign that they are practicing well. Athletes become enmeshed on
the gymnastic figuration and its norms, which “makes it difficult for them to stand back and examine their personal experiences in a more detached manner” (Pinheiro et al., 2014, p. 4). Furthermore, “whenever the pressure or tensions to which their groups are exposed increase, their level of involvement gets higher and it becomes more difficult for them to approach such situations in a more detached way” (Pinheiro et al., 2014, p. 4). Subsequently, athletes tend to accept pain and injury and other kind of sacrifices, in order to achieve the results several actors, such as coaches, expect. As a result, athletes may worsen injuries. One coach talked about an athlete who had several surgeries. His/her opinion was that it was a mistake to let the athlete continue competing while injured.

Male team coach: [Name of the athlete] is my gymnast who has had more surgeries, 4. He had surgery on the fist, feet and knee. The knee injury was very serious, it occurred at the end of [an international competition]. On the second competition day he was more tired. The first vault jump he did very well. On the second he fell sideways and broke the leg. We were able to recover him with a lot of work and efforts. But for a gymnast it is very difficult. Today he is practicing but he still has his own fears.

Another coach talked about how his decision, to take an athlete to several competitions, helped worsen an injury.

I did a very serious mistake, which was taking [name of the athlete] to [an international competition]. He was with pains on the back, but they were more serious than what they seemed. He was unable to do good performances. I should have taken [name of the athlete]. He would be able to do a good performance and to not get more injured. But I really thought the injury was not so serious. After the [a different international competition] we continued practicing and trying to heal. He participated on the [national competition] with pains. After, on [another international competition] things got even worse. We tried to do acupuncture and electro-stimulation. That worked with me once. I believed that he would recover. But he did not. After the treatment, when he arrived home he seemed to be an old men, he was unable to move. So, nowadays, I believe that when you are hurt, it is better to do nothing. But competitions
do not change their dates and that is a dilemma! At the end of the [international competition] I told him: “it would be better if you stayed at home!” [laughs]. But there was also here a romantic side, he did good result on the last participation on that competition. There was here a romantic side that avoided us to have some vision and think how stupid it was. Today it is easy to say it was stupid, but…

Trying to blame the athletes and showing anger are strategies that increase pressure and constrain athletes to compete with pain and injuries. Athletes trust their coaches’ opinion, which may increase their influence. A female team coach mentioned:

She [female athlete] might tell you that she has one objective. But during daily trainings, you never see her really trying, unless you push her to do it. And she accepts and does it. So, she is very ‘trainable’. When she was smaller, I really had to command her! (…) I coach her since she was 6. So, I think you can imagine how well we know each other… For the good and for the worse. So, she knows that if she tells me something, and I think it is not true, and that she is able to do it, I will certainly tell her to do it anyway. She knows it is not worth telling me no. (Female team coach).

As previously observed, coaches sometimes used corporal punishments on their athletes. In fact, when they were athletes, they also suffered corporal punishments. During training sessions coaches occasionally talked about this part of their past.

‘When I was an athlete my coach slapped me and afterwards I would do things better [laughs]’. Female team coach.

When talking during an interview about this subject a coach mentioned:
Male team coach: When I was an athlete sometimes they [coaches'] hit me on the back of my head, or gave me a slap on the face. This kind of abuses. But were they deserved? Most of them I think they were!

Interviewer: Why?

Male team coach: Because when we are kids we just want to play and joke with each other. We do not take gymnastic serious and the coach has to do something. The coach can do it with a slap or something like that. Probably the coach should use another strategy but I am sure it would not be so effective. Sometimes when [athlete name] starts complaining I ask: 'Do you want some slaps? Try harder and stop complaining'.

Interviewer: And what he answers?

Male team coach: He answers that slaps would not change anything but I answer: 'Yes it will. You already took 2 or 3 slaps and you tried harder'. It is like a stimulus. When you are afraid, tired or with minor pains it really works. When sudden serious happens you wake up fast. The same thing happens when you are practicing. You receive a stimulus that scares you and become more willing to practice. And you can reach that willingness though a slap or grabbing athletes ears. This stimulus creates and changes behaviours.

No coach starts his/her profession without having previous experiences and knowledge about sport. Gilbert and Trudel (2001) contend that coaches' past experiences are one of the biggest source of knowledge. Therefore, coaches may tend to reproduce their coaches' strategies, especially if they perceive them as effective. The next coach explained the outcomes desired when s/he does a physical punishment.

Male team coach: I give some slaps on the back of the head. Sometimes they deserve it when they try to get smart. Of course we should not do it, but it does not mean it is not good for the athletes. When they complain or perform badly I may slap them and ask 'what is wrong with you?'

Interviewer: And how do they react?

Male team coach: Sometimes they act surprised because they are not expecting it. Other times they got scared. But I tell them to not be afraid of me.
7.6 Conclusion

The findings discussed in this chapter, found several parallels with research in professional sport discussed in section 2.5. Furthermore, and as observed in section 2.6 about amateur sport, this research recognizes that: like professional athletes, amateur athletes seem to have a high level of tolerance of pain and injury; quality of medical treatment tends to be measured in the recovery time; coaches actively reinforce the culture of risk and the acceptance of pain and injury in sport. Thus, male and female gymnasts and coaches revealed similar experiences of pain and injury. In Nixon (1992) terms, athletes’ are enmeshed in a sportsnet that may constrain them to accept different kind of sacrifices. Coaches in particular, expect from athletes the acceptance of this culture of risk. If they fail to comply, data in this chapter indicate, they may use strategies such as corporal punishments. Athletes high involvement in the sportsnet may compel them to consent to this kind of abuse. Despite several similarities found in male and female athletes, several gender differences could also be found. The next section will reflect on the gendered nature of gymnastics.
Chapter 8 – The Gendered Nature of Gymnastics

8.1 Introduction

Previous sections focused on the characteristics of the Portuguese Artistic gymnastics figuration and more specifically on the culture of pain and injury. More particularly, those sections highlighted several aspects shared by all gymnasts. To advance our understanding, this section tries to reflect and shed light on the gendered nature of gymnastics. Gender may be a key that unintentionally or unexpectedly opens different paths to those who start practicing gymnastics. Thus, male and female athletes may have different experiences in sport. Sport can and should “be viewed as a gendered cultural space” (Messner & Sabo, 1990, p. 17). As Annandale and Hunt (2000) argue, the impact of social relations of gender can affect the health of men and women, and therefore, their pain and injury experiences in sport. This section explores gender and its impact on the way athletes are enmeshed in the culture of pain and injury, how it affects the training environment, the coach-athlete relationship, training intensity and athletes’ competitiveness, as well as how athletes tend to express pain and injury. In response to Guttmann (1991) critics that much research focusing on gender do not take into account the distinctiveness of how it is negotiated, this section also offers a figurationally informed discussion about how gender is negotiated, the power differences inside the gymnastics figuration and how gender may change the way athletes are socialized to and express pain and injury. In contrast to previous work which has argued that the male-female differences in pain and injury experiences are different only by degree (Young & White, 1995), this chapter argues that males
and female gymnasts experience different training environments, indicative of varying power relations relative to their coaches. The gendered ideologies that persuade these relations lead to specific weight control and pain and injury experiences.

8.2 Gender Differences in Training Environment

During the observational research, one of the most apparent differences between the male and female training sessions was the way athletes did the warm-up and the amount of time they were allowed to rest between exercises.

All females started perfectly lined up, doing exercise sequences according to the coach’s indications and under coach strict supervision. The coach is always watching the athletes and continually giving corrections. Most of the warm-up exercises try to explore and improve gymnasts’ flexibility and corporal posture (Field note).

Female gymnasts were all lined up and doing the same exercises at the same time. There was an on-going comparison between gymnasts’ abilities and coaches were talking with each other about their skills and what they should improve. On some occasions coaches started mocking them “you look like a banana”, “lift up, it seems like you have no neck!” (Female team coach, Field note).

This was very different to what was observed during male team training sessions.

Male athletes already know what warm-up exercises they should do and have the autonomy to decide its sequence. Coaches use this time to study the exercises gymnasts are going to do next. Sometimes male gymnasts play with each other and are clearly relaxed (Field note).
Differences in training environment were observed not only during the warm-up. In fact, differences could be found throughout all training sessions. Male athletes were seen talking with each other, having rests and at times making jokes. On the other hand, female gymnasts were constantly repeating the exercises, rarely talking with each other and being continually evaluated by their coaches. Female coaches were similarly aware of these gender differences:

Female team coach: If they [female gymnasts] are used to training intensively, it is normal that they do not talk with each other so much. Males clap their hands giving support to each other, and that really helps them. But I think women do not need that. Probably they also support each other, but in a different and more private way.

Psychological research (Bowker, Gadbois, & Cornock, 2003) has argued that females tend to have lower levels of self-confidence and express this in sporting activities. This might relate to what Connell (1987) has called a ‘gender order’ which in sport, may favour males’ sense of superior athletic skills. As we noted earlier, gender notions of sport have a long history and continue to influence not only male, but also female behaviours (Hargreaves, 1994). Sport is then a social field that has produced and reproduces the ideology of male prominence. Thus, creation of a gendered social identity in sport may help to understand the development of stereotypes and differentiated treatment and athletes behaviour (Kauer & Krane, 2013). The influence of gender ideologies on gymnastics training could be seen in the way the respective training sessions were conducted. According to a male team coach,

Female gymnastics is very strict! Girls do not talk with each other. On the other hand, you go to a male training and sometimes there is music. We try to promote healthy environments and team spirit.
Because male and female gymnasts frequently practice at the same time, not only during National Team training sessions, but also during club training, coaches of female gymnasts may try to avoid losing their higher power over athletes by not letting them interact with male peers during training sessions. For example,

Male athlete: I do not like their [female gymnasts] trainings. Their training is totally different. I talk with [female gymnast] and she has a lot of problems with the coach. Our training is more relaxed, we talk, we rest and then we do the exercises. Girls cannot do that. They cannot talk and even look at others! They have to be just practicing. I would have abandoned gymnastics a long time ago... Once, I had a problem with [female team coach] because I was talking with [female gymnast]. I just asked her one thing and the coach completely freaked out! And the other female team coach also gets crazy if we talk with the female gymnasts. We are not allowed to talk with them. Sometimes it seems that someone died, we have to be so serious. And when we talk with them the coaches start complaining with us. I just want to ask: ‘how are you, are you ok, are you hurt, how much training do you still have to do? If the coach sees us talking, they will immediately start complaining saying that we cannot talk!

Interviewer: And what about your coach?

Male athlete: My coach sometimes starts arguing with the female coaches: ‘do you think your athlete will lose a training session just because she is talking during a few seconds?’

Interviewer: So, between male athletes you are allowed to talk.

Male athlete: Yes, we talk. I think we have more freedom than the girls. Maybe because we are boys... Coaches talk with female athletes and they do not respond.

Female athletes were also aware of the differences in the training environment. They viewed their training sessions as more intense and with more repetitions, but argued that these differences were both necessary and universal. This helped them to legitimate the training differences, the coaches’ authority as well as a “gender order”, inside the gymnasium, which according to (Connell, 1987) favours males.
Female: Athlete: Our training session is always more serious, with more rules, clearly more formal. Boys have more freedom. We are not allowed to act differently. When we talk our coaches say: 'you are already talking too much! What is happening? Do you want a cup of tea?'

Interviewer: And why is that?

Female athlete: Because our training sessions are more intense. I think we need to practice more intensively than them. I think this is why. But this does not happens only in Portugal, it is worldwide!

Additionally, to better reflect upon the gender order, and discuss gender-as-difference, Annandale and Hunt (2000) contend that it is important to conceptualize its complexity, rather than just describing it. Figurationalists often perceive gender social relations complexity considering issues of power shifts (Liston, 2005a). In this study, participants often referred to the females' lack of freedom. Thus, this lack of freedom can be associated with female gymnasts' lower social power and influence. A group of athletes, with the chance to talk freely about each other's problems, and receiving others' opinions, are likely to develop a greater sense of freedom. They may start to have more informed opinions. On the other hand, a single gymnast, being controlled and more isolated from external opinions will see her influence and opinions diminished.

As Nixon (1992) notes, athletes are more likely to become enmeshed in the culture of risk if the level of contact outside of the sportsnet is restricted, and it seems from the findings that the male gymnastics’ sportsnet is more open (to contact with females) than the female gymnastics’ sportsnet (to contact with males). Therefore, coaches’ constraints on female athletes may be fundamental keeping the sportsnet closed and so, avoid athletes challenging the coaches’ power or influence. A male team coach compared females to a “flock of sheep” where if someone gets lost, there will be a dog to bring them back together”. It
seems then relevant to discuss gender differences between coach-athlete relationships.

8.3 Coach-Athlete Gendered Power Differences

Messner and Sabo (1990, p. 107) contend that “the gender order is a dynamic process that is constantly in a state of play”. In fact, the interrelationships between varying forms and strategies of gender domination and subordination are in constant flux (Dunning, 1999; Kane & Snyder, 1989; Weidman, 2010). Annandale and Hunt (2000) refer to it as the fluid social relations of gender. According to Maguire and Mansfield (1998) female empowerment can be achieved by acquiring skills and physical characteristics of ‘established women’. However, and as previously discussed, female athletes may have a tendency to have lower levels of confidence in their athletic skills. This may help to rationalize the gendered power differences between coaches and athletes.

However, the highly gendered ideologies of coaches also serve to create a practice environment which is very different from males and females. This could be seen in a number of ways. A female team coach was observing the gymnasts and talking with another female team coach:

Female team coach 1: Female athletes are like robots. Coaches can shape them how they want. They are very dependent on their coach!

Female team coach 2: Yes, maybe because we start to work with them since they are very young! I have two athletes that I work with since they were 6 years old.
Female team coach 1: When we work with them since they are very young, we can ‘mould’ them. When they get older, they start to have a stronger personality and it gets difficult to ‘mould’ them (Field note).

As athletes become more enmeshed in the gymnastics figuration, they will be likely to be more influenced by their interdependence with other members of the figuration. These gymnasts tend to acquire a strong emotional involvement that may distort their understanding of both social processes and (un)ethical practice. Thus, “this makes it difficult for them to stand back and examine their personal experiences in a more detached manner” (Pinheiro et al., 2014, p. 4). Furthermore, “young athletes may lack the psychological maturity necessary to think critically about these relationships” (Stirling & Kerr, 2009). Thus, “young gymnasts come to incorporate the norms, values, beliefs, dispositions and behaviour patterns of the broader gymnastics group” (Pinheiro et al., 2014, p. 4) and consequently legitimate, or at least do not challenge, coaches’ practices. Young female athletes, traditionally perceived in a less influential position, may be particularly susceptible to the coaches’ practices.

Interviewer: What is your opinion about the male and female trainings?

Female team coach: They are very different because men and women are different. Women need to be led, otherwise they will start to act spoiled and complain about anything. Complaining about pains, or because they are afraid of doing an exercise. Women are always thinking about something, always with 1000 problems on their mind. So, you have to lead them and orientate them on what they have to do. For example, when I tell them to do 5 exercises on the balance beam they may say: “but yesterday I already did 3”. And they start explaining all their life, what they did during all day and justifying why tomorrow is a better day. What we have to teach and tell them is: “shut up and do it. I am the one that is here to think”. And it is very important for them to understand this! Because they always have little things [pains, injuries or fear]. Unless you are able to command them, you will not have high performance gymnasts. When you tell a female gymnast to practice a lot, she will do it, while with a male you have to set objectives, you have to be very specific.
When a female athlete tries to go against a coach instructions, or to have a different opinion, coaches may start yelling and calling them names. This verbal and emotional abuse may be designed to stimulate and push them to conform and work harder (David, 2005).

Women and men are different in term of how you motivate them. Women can be motivated for something during a long time, while a man will invest some time and then you have to give something new to motivate him. If you yell and shout at a woman, she will work more. If you are more authoritarian… While I see men replying to their coaches, that would be unthinkable for a female gymnast. That is something that does not exist. (Female team coach)

Young female gymnasts are enmeshed in this culture from very young ages, thus helping them to accept the coaches’ authority. This research supports David’s (2005) contention that many coaches do not hesitate to abuse young athletes verbally and emotionally, using insults and humiliating them. They use it as a prerequisite to “character building”, and to push them to the limit and beyond (David, 2005) which might otherwise be conceptualized as reproducing the culture of risk (Nixon, 1992). But the observed differences between male and female coaching is also an example of what sociologists describe as an ongoing social construction of gender – “doing gender” (Lorber, 1994; West & Zimmerman, 1987) (see section 3.2). In this several types of abuse serve as a means to preserve female athletes as more submissive. Thus, and without denying that verbal and emotional abuses also may occur in male gymnastics, all participants argued that female team coaches exerted more pressure and used their authority more. A male team coach mentioned:

There is one thing that I notice in female training sessions that is rare in male gymnastics. I am not saying that it does not exist. What I am saying
is that if it occurs, after some time the coach-male athlete relationship breaks up. I am talking about the training through coercion. I sometimes see it on the female team and it is something difficult for me to understand. The coach’s absolute power over a young female gymnast is clearly an old pedagogical paradigm. (Male team coach)

During training observations, coaches yelling and arguing with female gymnasts seemed to be a very natural and common strategy, in other words, normalized. At the same time, female gymnasts seemed to accept this strategy. Hargreaves (1994) notes that women are constrained to believe in, and to acknowledge their inferiority to a point that leads man to accept the ideology of male hegemony. Following Elias and Scotson’s (1994) theory of the Established-Outsiders, the dominant (male) group may assert its superiority to a point that it is hardly questioned by the outsiders (females). This may help to legitimize, in the mind of female gymnasts, gender social differences in sport.

A female athlete does an exercise on the floor and the coach argues with her out loud. According to the coach perspective, she was unable to do the exercise well. Everyone in the gymnasium, including the male team, could hear the coach yelling. The female athlete just listened with her eyes down and said yes with her head. When the coach stopped arguing she turned around and went to where the other colleagues were waiting to start their exercises. I was expecting that she might start crying or at least talk about what just happened with the other athletes. But they just continued practicing like “nothing happened” and without talking (Field note).

One of the possible consequences of the female team coaches’ constant pressure was a higher training intensity. Female athletes were constantly doing repetitions, while male athletes had time to rest between exercises. After a training session, male athletes would go to sauna or to a Turkish Bath. This never happened with female athletes. According to a male team coach, female athletes do not do these activities “because female team coaches want their
athletes to be constantly tense and do not want them to be relaxed”. Another visible difference was that female training sessions always started earlier and finished at the same time or even after the male training. This greater training duration occurred along with a higher visible competitiveness between female athletes.

Male team coach: They [female gymnasts] try to show that they are a team, but they are not. On the other hand, a male athlete always respects others’ work. On the female teams, not only in Portugal, gymnasts are always competing against each other. Sometimes even coaches are!

Maguire and Mansfield (1998, p. 122) associated female competitiveness with a ‘double-blind’ process: “some women are arguably empowered at the expense of other women”. Thus, winning or achieving good results, may be one of the few strategies female athletes have to achieve a greater power position inside the sport figuration. Moreover according to Maguire and Mansfield (1998), winning female athletes may create an “established” group and look to “outsiders” with a “they” image. Their body and its traditional gendered images also seemed to have an important role on who belongs to the established group. Furthermore, male and female team coaches also reproduced gendered concepts about the body.

8.4 The Body and Weight Control

Theberge (2000) argues that sport provides a context which may enable resistance to traditional ideologies about women’s bodies. These ideologies often associate physical aspects with social power. In other words,
“the social definition of men as holders of power is translated not only into mental body-images and fantasies, but into muscle tensions, posture, the feel and texture of the body. This is one of the main ways in which the power of men becomes ‘naturalized’, i.e. seen as part of the order of nature” (Connell, 1995).

During practicing sessions, male gymnasts often showed their muscular bodies with pride. They commented frequently on each other’s bodies; specifically about how fit and muscled they were. They also practiced many times without a t-shirt or other kind of upper clothes. Those who had muscular bodies tended to be more respected. One male athlete reflected on this in an interview:

They [male athletes] call me “middle body”. I always do a lot of abdominal workout. In fact, I am now addicted to it! And my colleagues now started asking me advice about how I do it. At some point I think I became a motivation for others to workout more (Male athlete).

Before and after training sessions, male athletes commonly did strength training. Sometimes they started the training sessions by doing small competitions, trying to test and compare each other’s strength. At the same time, female athletes might be training for flexibility. Female gymnasts were seen doing strength workout only when their coaches told them to. However, and because they are constantly performing physically demanding activities, they naturally started to develop bodies with more visible muscles. In fact, stronger and consequently bigger and heavier male gymnasts were more respected by their peers, and expected to have better results. Therefore, the male “concern with force and skill becomes a statement embedded in the body, embedded through years of participation in social practices like organized sport” (Connell, 1995, p. 85).

These ideologies are somewhat incompatible with weight-restricting routines and this may help to rationalize why male coaches and athletes think,
Male team coach: I think that their [female gymnasts] weight is overly controlled. (…) Have you noticed that [female team coach] tells [female gymnast] to run like crazy? The training session is always at a high intensity! It is because the coach wants her to lose weight. It would be better if she were less controlled. For example, with [male team athlete] I explained him why he had to lose weight. I let him reflect about it and he naturally changed food habits. This is how we should handle this problem. We should teach and explain them instead of controlling what they eat! There are examples on the female team that due to extreme control, they tend to eat more, or the opposite, bulimia. That is why I think there is a lot of stupidity in the way the weight problem is dealt with. You will not be a better athlete just because others impose on you a certain weight. But they [female team] live obsessed with the weight paradigm.

For different reasons, and with different consequences, male and female gymnasts show concern with their body. Males often try to have a muscular and fit body, while females desire a fit but fat free body. According to Maguire and Mansfield (1998, p. 122) “in the wider figuration of the ‘exercise-body beautiful complex’, the achievement of a body beautiful is status enhancing”. Bodies can be viewed as a mark of distinction in the sport context but also in many other figurations. Therefore, power accrues not only to males with dominant bodies, but also to women with ‘perfectly fit’ bodies. In fact, “slim, toned bodies are ‘established’ bodies” (Maguire & Mansfield, 1998, p. 122) and may have a strong connection with the female empowerment. Power in the sport figuration is therefore relational with male muscular bodies prevailing in a social context in which the overall balance of power favours the values of men. However, the embodiment of power symbolized in the appearance and skill of ‘established’
women’s bodies, is interconnected with masculine hegemony (Maguire & Mansfield, 1998). In fact, only a female gymnast with an “outsider” body, reported feeling overly weight controlled. The fact that male athletes may assume more naturally a higher status, may also have implications for the different ways male and female trainings were conducted.

Female athletes did not desire to have muscular bodies for two reasons: they did not intend to gain weight, but also they rejected the image of female muscular bodies. A female athlete talking with a physiotherapist mentioned: “I hate how my arms are becoming so muscular. Look at this!” (Field note). Elias’s (1991) theory of the ‘civilized bodies’ perceives the body as a social sphere that is constantly regulated by others’ expectations. Therefore, current gender perceptions of (muscular) male and (thin) female bodies have a great influence on the athletes’ self-identity and therefore practice. Probably because with constant exercise, male bodies tend to adopt a muscular shape that is socially accepted and desired, they often showed their body with pride and admitted to having fewer concerns about their weight. Young et al. (1994) established also a connection between the strength and body size with male dominance, masculinity ethos and success. On the other hand, female athletes struggled against developing muscular bodies, not only due to aesthetic matters, but also because in gymnastics it is believed that heavier and more muscular female athletes will have more difficulty doing better performances. Therefore, female athletes diet was a concern for the coaches, which in turn both illustrated and facilitated higher levels of control.

12 One of the females had wider thighs and some ‘signs’ of cellulite.
Of course I cannot say that I do not care about girls’ weight. For example [athlete name] is a very heavy girl, considering the amount of impacts she has to do. I always tell them: ‘do you want to eat cookies or candies? Eat them in front of me’. Because if they do eat, the weight will tell it... I really prefer if they ate them in front of me. As we often talk about weight, they have a tendency to have those behaviours [eating in secret]. Sometimes I tell them ‘you ate so much pasta today’. Or, ‘at night, you are going to sleep and you ate at dinner as much you did at lunch’. That is not a good thing to do, even for a normal person. But it is even worse if you are an athlete and want to lose 2 or 3 kilos. (Female team coach)

Male and female gymnasts reported different levels of care about diet and nutrition. While female athletes mentioned constantly monitoring the food they ate, male athletes seemed to have much less control. During training sessions, male athletes were seen eating bananas or drinking juices. On the other hand, when female athletes ate something, they did it privately. Even during a 4 hours training session, they were not seen eating anything. Accordingly, all interviewed female gymnasts mentioned being worried about their weight and what they ate.

Interviewer: Do you have any care with alimentation?

Female athlete: Yes I do. I try to avoid eating things that may not be good for me. Things that may not help me to maintain my body. I know that if I am heavier, I will not be able to do things well. But if I lose too much weight, I will be weak and without energy.

On the other hand, most of the male athletes revealed having few cares with their diet, unless they are clearly overweight or close to a very important competition.

Male athlete: I try to be careful with what I eat when a big competition is really close. But for most of the time I completely forget and eat anything I want. Sometimes I get really hungry and start eating candies and salty snacks.

Male team coaches mentioned not having many difficulties controlling their athletes’ weight and diet.
Male team coach: I promote a good diet, but I do not worry too much. I just weigh them once every month. I just had problems with one athlete after surgery. But he asked me for help, we provided a nutritionist support and he lost weight. Fortunately we do not have those problems with male athletes. But I think that what happens in female gymnastics is just wrong!

Data gathered seems to indicate continuous weight control on the female team, while on the male team actions are taken mainly when an athlete requests, or if it clearly affects their performance. It is broadly accepted that female gymnasts benefit from being relatively small and lean (T. Benn & Benn, 2004; David, 2005; Ryan, 2000). Therefore, great pressure is placed upon female gymnasts' body and low weight. Moreover, along with technical skills, judges and spectators place great importance on appearance, gracefulness and elegance. These factors may compel coaches to constantly control athletes’ weight during practicing sessions. This can be perceived, in a ‘Foucauldian’ perspective, as a surveillance arrangement that “functions anonymously to engage athletes in a disciplinary practice to maintain an ideal weight” (Johns & Johns, 2000, p. 227).

Female athlete: When I practiced with [coach name] we were weighed at least every week. And that is very stressful for us, we feel very nervous because it is another problem... And I have not had many weight problems like other athletes. But I still felt nervous because I was being extremely controlled.

Interviewer: How was the day when you were going to be weighed?

Female athlete: We were very nervous, and if we were overweight coaches started to do long talks and complaining. And that is bad... Girls do not like those weight related things (laughs). We do not like to be called fat! It is probably one of the worst things you can say to a woman, I think. But luckily I rarely had weight problems.

Interviewer: So, you saw it happen to other gymnasts?

Female athlete: Yes, but I was always afraid that it could happen to me also. And I felt bad for the others. It is bad, yelling at them in the
gymnasium in front of everybody, saying “you are fat!”. I even was a little embarrassed for them.”

Interviewer: And how did they react?

Female athlete: They were sad and started crying... At times, irritated... It depends on their personality.

Interviewer: And what about boys?

Female athlete: That does not happen with boys because they do not have weight control as much as we have.

Female team coaches may impose food abstinence along with other strategies such as calling gymnasts names, humiliating them, yelling and involving parents in the weight control. Indeed, coaches’ “are relentless about weight because physically round gymnasts don’t win” (Ryan, 2000, p. 11).

Female athlete: Supposedly we must be very careful with what we eat, but we are not always able to do it. It is very difficult to control it...

Interviewer: How do you try to control it?

Female athlete: We try to control our weight first. But our coaches also do it. And our parents at home... Well, everybody!

Interviewer: And what do you feel about it?

Female athlete: I am always fighting it! [laughs] For me it is very difficult to control my weight... (...) We are supposed to be weighed every week, but it depends. If you are having problems, then you will be weighed more often.

Athletes are constrained to maintain a certain weight, “and if they exceed such weight the coach threatens them with withdrawal of either competition or food” (Pinheiro et al., 2014, p. 8).

But of particular relevance here is that this obsession with weight has a detrimental impact on health care.
Female athlete: I have been pressured to lose weight, and that pressure started on my family and has gone up to the federation president! I had to assume a commitment with the federation, with my club, with my coach, I felt a lot of pressure. I barely handled and almost gave up!

Interviewer: How was that?

Female athlete: I had a meeting with the club president and he told me what weight I should lose until a certain date, or the federation and the club would stop helping me and care about me. That was a lot of pressure! They told me it was for my good, and to not think that I should do it just because they were asking it. But I never felt ok with the commitment they were asking of me. (…) I feel it is very hard to understand why I have to do it. Because I do not feel a big difference, I am just able to lose or win 1 Kilo. (…) My coach tells me that when I am heavier I have more injuries. So, if I tell him/her that I am injured, the coach will start to think and insist that I am heavy. So sometimes I try to ask for the physiotherapists help without letting the coach know. But if I cannot handle pain anymore, or it is really serious injury, just I have to tell…

Interviewer: And how does the coach react?

Female athlete: Usually starts complaining about my weight, telling me that I have to lose weight. If in a good mood, the coach may ask me where it hurts and how the injury occurred [laughs].

Female team coaches believe that heavier gymnasts may suffer more injuries. On the other hand, male team coaches implement daily strength training in order to avoid injuries. Weight may not be considered a problem, as long as the gymnast has strength to correctly perform the exercises. But a central consequence of linking weight to injuries is that it pressures athletes to seek medical treatment. Thus, gender seems to have a relevant role on how coaches and athletes behave, and thus, despite sharing common sacrifices, gender might influence the way coaches and athletes act in relation to pain and injury. The next section discusses how gender might influence the process through which athletes are enmeshed to accept these sacrifices.
8.5 Gender, Socialization and Pain and Injury

The data presented in previous sections indicate that male and female gymnasts tend to accept pain and injury during their sporting activities. However, the way they are encouraged to accept this sacrifice exhibits some gender particularities. The observation of male and female training sessions revealed some gender differences on how the respective ways in which the normalization of pain and injury occurs.

Coaches have a strong influence on both genders, but play a more decisive role on the development of female athletes. That is, male athletes were encouraged to continue competing by their peers and coaches, while female gymnasts were mainly encouraged by their coaches, and rarely, or in a more private way, by other female athletes. Male athletes joked with each other over injuries, and commonly encouraged peers to take risks and to continue competing while injured. Thus, and according to Annandale (1998) these ‘structures of power’ reinforce the cultural message that males should be able to prove their masculinity by risking their health. During several training sessions, a male gymnast that was unable to compete due to a neck injury was mocked by colleagues who challenged his masculinity: “You fag! Remove that bandage fast and I dare you to do the exercise again!” (Male athlete, Field note). Later, during the training session, the same athlete started challenging his colleagues to do dangerous double front flips from the tumbling floor to the pit. He imitated a chicken and said out loud “You pussies! You are afraid of doing those double flips!” (Male athlete, Field note). Performing through pain and taking risks may be “one socially acceptable way to demonstrate masculinity” and “seen as a
badge of manhood” (Malcom, 2006, p. 498). Expressions which threatened male gymnasts' masculinity, such as “gay, do not be like a girl, you do not have courage to be a man” (Male athlete, field note), were commonly heard during training sessions. Male athletes were dared to prove their masculinity by practicing injured or taking risks. Coaches reinforced this encouragement by also using these expressions, especially if they wanted to see an athlete trying harder or taking more risks: “do not be a pussy and try to do it”. Messner (1992) also argues that male athletes socialized to alienate, disregard or view their bodies instrumentally, thus increasing the liability of acquiring injuries.

Conversely, female athletes were more reserved with each other, and consequently the coaches assumed a more central role in this continuous socialization to pain, injury and risk acceptance. Again, expressions associated with gender stereotypes were used. A female gymnast got injured during an exercise and the coach said: “what happened? Have you broken a nail?” (Female athlete, Field note). On another occasion, a female gymnast was immersing a leg in a bucket full of ice after a training session. When she removed it, the leg was clearly red. A coach saw it and joked: “Next time you should put your body on ice and you will not need to go to the beach in order to get tanned” (Female team coach, Field note). Thus, the way in which others responded to gymnasts injuries females perpetuated gender ideologies. Females seemed to be associated with a sense of frailty (Dowling, 2001), while male athletes were identified with toughness and physical dominance. This may support an “ideology of gender that ascribes different natures, abilities and interests to men and women” (Theberge, 2000, p. 322). During an interview, a male coach reflecting on these differences mentioned: “a female team coach
cannot ask them to act like a man. What they would do is to tell them to try harder, or they will not be able to reach their goals”. Consequently, male and female athletes’ tend to behave and express according to what is commonly associated and accepted for his/her gender. Thus, it also influences the way they express pain and injury.

8.6 Gendered Expressions of Pain and Injury

Elias’ (1994) work on civilizing processes and body rationalization, introduced the concept of ‘civilized bodies’. Humans tend to shape and regulate their emotions and bodily expressions through a civilization process. Accordingly, there are gender differences on how males and females can or should behave and express their feelings. Connell (1995) describes this as a socialization into the male and female role, and deviants are usually observed as a result of failure in socialization. Males are expected to be dominant and to always try hard, especially in competitive environments such as sport. On the other hand, females are usually associated with a more a less dominant and elegant image (Maguire & Mansfield, 1998). These differences may have an impact on the way male and female gymnasts express and report pain and injury.

When males faced an injury, they tended to observe it as a sign of their work, and sometimes something to show others with pride.

A male gymnast failed an exercise on the Horizontal bar and scratched his back on the bar. After a few moments of visibly expressing pain, the
athlete started showing his scratches with pride to the junior gymnasts (Field note).

Male higher status, and athletic self-confidence, may result on a more public and visible way of dealing with injuries. As observed on the previous field note, these standpoints toward pain and injury were taught and passed on to young gymnasts. Consequently, younger athletes are expected to have the same attitude toward pain and injury. As Scambler and Hillier (1997) argues, social pressures on men may lead them to risk their health, and therefore, injuries may not be seen a failure, but as a sign of hyper-masculinity.

On the other hand, female athletes dealt with injuries in a more private way. At least during the observed training sessions, female gymnasts never talked openly about their injuries. “When questioned about how they were, they frequently answered ‘I am ok’, even after a big impact or when receiving medical assistance” (Field note). Females probably avoid talking about injuries, because they do not want to be publicly associated with the notion of female frailty. Furthermore, for females, injuries may be associated with failure in the execution of an exercise, and athletes that fail may be depicted as the weaker or even outsider group. Thus, female athletes, with a lower degree of social power inside the gymnastics figuration, expressed carefully and where possible, disguised pain and injuries.

Male team coach: Females tend to want to recover faster from injuries. I do not know if they resist more to pain, if their notion of pain is different. But female gymnasts try not to show that it is hurting and reach a certain performance level. On the other hand, boys prefer to have a more careful recovery. ‘If it hurts a lot I will stop’.

Interviewer: And why is that?
Male team coach: Male gymnasts are more relaxed, they talk about everything, and they do not have taboos. They always try to support each other. If I am practicing with another male, I will not fear showing my doubts, my injuries or my weaknesses. Because I know I will receive support. With girls things are not quite the same. They fear showing their doubts, their perspectives, their objectives, everything! I think you have noticed that males are more exhibitionists. Female behave modestly. They like to have their space, and that people around know little about them.

Common male expressions observed after an injury were frustration, anger and throwing or hitting objects. When they did this, they attracted the attention of other athletes to what happened. This could be a visible way of expressing that they are trying hard and injury was just a part of that process. Thus, their masculine social status should not be doubted. This may be related to the fact that males reported injuries and asked for medical assistance more often than the female peers. Furthermore, they spent more time receiving assistance. Therefore, males disguising injuries might not be a concern.

Female team athlete: Boys are always complaining about injuries! They complain about little things. We only complain when it really bothers us. Another reason why female athletes do not report injuries so often could be explained with the fact that female team coaches had more authority.

I think that males complain more about injuries. But it is because female team coaches’ sometimes do nothing and just tell them to continue. Eventually they would stop complaining because it is not worth. They may say ‘it is hurting me’ and the coach say ‘do the exercise anyway!’. There will be a moment where they simply will stop complaining. (Male athlete)
8.7 Conclusions

It can be therefore seen that notions of gender difference, fundamentally structure gymnasts’ training environment, coach-athlete relations and bodily perceptions. It stands to reason, thus, that gender also plays a significant role in mediation of injury, particularly in terms of the public/private expressions of pain, seeking medical assistance and in the timeframes they construct for themselves to recover from injuries.
Chapter 9 – Final Considerations

9.1 Introduction

This thesis has sought to examine the gendered experiences of pain and injury within male and female artistic gymnastics athletes. The entire research process was designed in order to better understand how male and female gymnasts deal with pain and injury, reflecting on the particular impact of gender on these experiences. The applied research methods were designed to obtain data as in-depth as possible, and contribute with new viewpoints about this body of work. No previous study directly compared male and female experiences, along with the coaches’ perspectives within the same research project. Thus this thesis offers a distinct contribution to the growing literature about pain and injury and gender issues.

The intention of this Chapter is to reflect on the role and importance of leading theoretical and methodological issues that have been explored. Furthermore, it aims to develop the significance of the findings in terms of a contribution to existing knowledge about pain and injury and gender in sport.

9.2 The Research Problem

Through the use of overt observation during 9 months, and subsequently undertaking semi-structured interviews, it was possible to develop knowledge and contextualize the figuration being studied. The initial main objectives were:
- Through the research process, develop a methodology that allows coaches and athletes to act as naturally as possible and to express their experiences and emotions;
- To understand as in-depth as possible the figuration under study, including participants’ social life and athletes’ medical care;
- To identify how coaches and athletes deal with pain and injury, assessing if coaches’ perspectives influence athletes’ perspectives;
- To examine the gendered nature of gymnastics, including possible differences in training, the socialization to pain and injury and how male and female athletes express pain and injury.

Elias’s figurational theory, and in particular the concepts of interdependence and process informed the research design. Being an active observer, thus conducting overt participation during several months seemed to be an appropriate strategy to better understand the processual ways in which athletes are socialized within the sport context. Additionally, and because athletes are interdependent with other actors such as coaches and medical staff, particular attention was given to all these members of the gymnastics figuration. During the observational research, one of the strategies used was to be near the physiotherapists’ table and to talk with him/her about the gymnastics figuration. His/her deep knowledge about the athletes’ experiences and the coaches’ perspectives, enabled a better understanding of the gymnastics figuration. In order to improve understanding of athletes’ experiences of pain and injury, both, athletes and coaches were interviewed.
The data gathered provided both perspectives, and thus better explained the interdependences and power relations within the sportsnet.

The methodology was developed and adjusted through the course of the research with these objectives in mind. Thus, the duration of the overt observation was conditioned and managed according to the time required to gain trust and establish rapport with the members of the gymnastics figuration. Becoming an “insider” and a trusted and useful member of the group helped to obtain and interpret knowledge that otherwise would be very difficult to access. During this process, the figurational concepts of involvement and detachment enabled the gathering of rich data while at the same time, maintaining a relatively detached analytical perspective. Furthermore, the data collected and initial knowledge gathered from the observations proved to be relevant, not only to adapt interviews to each athlete and coach, but also to explore themes and situations that otherwise would be superficially explored or difficult to elaborate upon.

Another key aspect was to develop new knowledge about the gendered experiences of pain and injury. For this, it was extremely important to have the possibility to observe, directly interact with and interview male and female athletes and their coaches, within the same research and environment. Thus, the value of this study lies in the importance of the data collected, the use of methodological triangulation, and the development of a new approach to gender studies of pain and injury in sport.
9.3 Social Bonds and Isolation

This research has helped to illustrate how participating in high performance sport may affect several aspects of athletes’ social life. The importance of this knowledge was revealed later, when trying to understand how athletes tended to behave when in pain or injured. Participants acknowledged the existence of several positive aspects deriving from their participation in gymnastics, such as being able to travel and to experience several countries and having a strong group of friends inside gymnastics, and these ideas seemed to rationalize other social and physical sacrifices.

On the other hand, their commitment to gymnastics led them to continue practicing even during holidays. Furthermore, their training sessions were frequently far from the athlete’s “home”. Thus, they found it difficult to find time to socialize with friends outside the gymnastics figuration, as well as to study and avoid missing classes. This closed network of interdependences reinforced the bonds between coaches and athletes to an extent that some athletes were unable to perceive of their life without gymnastics, because all their life revolved around it. This shaped a suitable environment that helped coaches to demand from athletes a stronger commitment. This idea of closed, dense, centralized and stable sport network is in accordance with Nixon (1992) description of sportsnets that enmesh athletes in the culture of risk. Therefore, understanding how athletes are enmeshed in the gymnastics figuration was essential to conceptualize why they tended to assume these sacrifices as the only way to continue competing at high level.
9.4 The Medical Reality-Check

Issues around medical care emerged as one important aspect of the experiences of pain and injury. The athletes only had medical support during the National Team training or competing sessions, or during official competitions. The medical support consisted of one physiotherapist at a time, and the doctor’s opinion seemed to be required only when an incapacitating injury occurred. Athletes’ relationships with the physiotherapists were described and perceived as close and very friendly. Thus, athletes tended to trust physiotherapists and particularly neglect opinions from medical staff without a sports background. Physiotherapists were primarily focused on helping athletes to continue competing, or to recover as soon as possible, instead of fostering a full recuperation. This is in accordance with Roderick’s (2004) description of injury, and how, in sport, it is conceived in terms of time rather in terms of the physical changes. Collected data also show that coaches tend to pressure physiotherapists to hurry not only the recovery time, but also the treatment process during training sessions. This illustrates the fact that while athletes trust the medical staff, the medical staff are often pressured to perform fast treatments and advise short recovery times, possibly representing a threat to athletes’ longer-term health.

On the other hand, athletes also acknowledge that coaches expected them to recover quickly and to always try to continue competing. Thus, it was found that when facing what they considered as normal or recurrent injuries, they might disregard medical treatment. Additionally, when athletes “fail” to comply with this behaviour, and complain about were was regarded as “little things”, coaches recognized the need to conceal aspects of athletes’ injuries.
Thus, the way medical treatment was negotiated emerged as a key aspect in the culture of pain and injury. It constrained not only gymnasts to accept pain and injury but also the medical staff. Coaches had also an important role, acting as a mediator towards risk, if the medical staff or the athletes failed to comply with this culture.

9.5 Athletes Are Not Normal People

This research has revealed that pain and injury are seen as inevitable results of high performance artistic gymnastics. The key features of the ‘culture of risk’ described by Hughes and Coakley (1991) were observed in the Portuguese gymnasts – willingness to sacrifice; striving for distinction; acceptance of the injuries risk; desire to constantly improve performance. Furthermore, athletes conceived of pain as a sensation they routinely have to deal with, not only while practicing, but also during rest periods. On the other hand, injuries could be perceived as a more serious condition, if they directly affected their performance or practice sessions. Many athletes laughed when talking about pain and injury, probably (intentionally or unintentionally) trying to decrease the seriousness of this subject. During their daily practices, and as similarly observed in other studies (Charlesworth & Young, 2006; Young et al., 1994), they often tried to neglect or even depersonalize pain and injury. Gymnasts tended to understand and accept these sacrifices, in pursuit of better performances and peer recognition. Furthermore athletes were highly supportive of each other when they were injured. This willingness to sacrifice contrasted with expressions of frustration when unable to continue competing.
Gathering and interpreting coaches’ own perspectives gave a privileged standpoint. In previous research, coaches’ ideas about pain and injury were mainly obtained through other members of the sport figurations, such as athletes or the medical staff. Thus, this research not only locates coaches’ influence over other members, but also positions their own perspectives of pain and injury. This knowledge proved to be very important in order to better understand the interdependences of the culture of pain and injury in sport. Coaches mentioned that they did not regard athletes as normal people. In fact they always expected athletes to continue practicing and competing while in pain or injured. They perceived pain and injury as inevitable consequences of high performance sport. As Roderick, Waddington, and Parker (1999) argue, coaches' ideal athletes are those who accept the culture of risk. Furthermore, athletes’ attitudes towards pain and injury influenced the way coaches’ behaved with them. They tended to be more severe and more demanding with those athletes who would complain more and about pain and injuries, and on the other hand, more careful with those who took higher risks. This differentiation between athletes legitimated some strategies they used to punish those athletes that complained more and that showed fear of taking risks. Coaches perceived verbal abuse and corporal punishments as strategies that could help change the athletes' commitment to high performance sport.

9.6 Does Gender Matter?

Gender (along with pain and injury) was a central issue of this research. As observed in section 2.8 several articles indicate that the attitudes of male and female athletes towards pain and injury are more similar than they are
different. Chapter Six covered social networks shared by male and females, while Chapter Seven covered similar experiences of pain and injury. However, this thesis also offers in Chapter Eight insight about different socializations and gendered experiences of pain and injury. Initial differences were found on how the trainings were conducted. Male athletes’ higher power balance in the gymnastics figuration allowed them to practice in a more relaxed environment, and to talk more freely with their peers. On the other hand, females’ strict training sessions constrained them to exercise continuously and denied them moments of relaxation. As discussed in section 3.3.1, historical stereotypes about gender and sport still influence many contemporary practices. This may help to explain the different training experiences that male and female athletes have. It is worthy of note that all athletes were able to perceive differences in the training environment between male and female gymnasts. However, only coaches were able to clearly distinguish how they differently deal with male and female athletes. Gymnasts are deeply enmeshed in the culture of risk and thus unable to stand back and examine their relationship with the coaches in a more detached manner. Coaches of the female team are in a relatively more powerful position, when compared with the relationship between male athletes. One of the strategies female team coaches used to perpetuate their stronger position is related to rigorous weight control. As other authors observed (Tansin Benn, Dagkas, & Jawad, 2011; Ryan, 2000), great pressure is placed upon female gymnasts’ bodies. This research found that male athletes perceived their body as a sign of their dominance and status, while female athletes were concerned with their coaches’ perspectives. Elias’s theory of (1991) civilized bodies helps to explain how the body and weight control may have a particular influence on
the athletes’ perceptions. While coaches of the female team were seen yelling with their athletes, this was never observed inside the males’ team. However, several male athletes reported corporal punishment. Probably because male are the established group, coaches feel the need to use corporal punishments. On the other hand, females, with a lower power ratio, easily and unquestionably accept coaches’ instructions, and thus they avoid corporal punishments.

This thesis gathers new data about the gendered differences in athlete socialization to accept and deal with pain and injury. According to Annandale (1998), structures of power reinforce the idea that males may use the sport field to prove their masculinity. Therefore, males’ socialization to pain and injury is often accompanied with a stigmatization of those who do not take risk. On the other hand, those who take risks and suffer worse injuries due to that boldness may be glorified. Thus, male athletes do not tend to hide pain and injury. In fact they may show recurrent injuries with pride, or show visible anger and frustration when an injury is incapacitating. Contrariwise, female athletes dealt with pain in a more private manner. Due to their outsider position, female athletes may try to avoid a visibility that may increase the traditional sense of female frailty.

9.7 Summary

This study contributed to the existing sociological literature on sport-related pain and injury, and for the first time, examined the perspectives of male and female athletes and their coaches within the same research project. The figurational perspective proved to be particularly useful in analysing the
multifaceted nature of pain and injury gendered experiences. Its perspective which embraces both macro and micro elements of social life, as well the central ideas of interdependences, power relations, figurations and the established-outsider relations, helped to develop a theoretical framework that can better rationalize male and female similar and different experiences. The findings presented here confirm the existence of the culture of risk in sport at all levels and within male and females athletes. Nevertheless, these findings also distinguish the particular ways in which gender as a key role on how the culture of risk is socialized and experienced. Thus, while both male and female athletes experience and tend to accept pain and injury, they are constrained in different ways and ultimately express and deal differently with pain and injury. This highlights the importance when conducting studies about gender, of avoiding dealing with female and/or male experiences separately. Sociologists should be able to describe and conceptualize the ongoing social construction and interaction of gender as fundamentally relational, processual and interdependent.
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Appendixes

Appendix 1 – Observation List

**Possible Introduction:** I am here to observe the gymnastics team during competitions and training sessions. This research is a part of my PhD and I intend to better understand your training sessions and how challenging they can be. Afterwards I would like to do individual interviews.

**List of things I should try to look for:**

**Interaction between peers:**

How they play with each other;

If they incentive peers and how they do that;

**Interaction between male and female gymnasts:**

Do they talk about pain or injuries?

In relation to all these points I will always try to check possible differences and similarities between male and female gymnasts.

**Interaction between coach and athletes**

How does coach give instructions;

How does coach incentive them;

The way coach talks to them;
Coach expressions of frustration/joy, happiness or anger;

Athletes’ behaviour after coach reactions or feedbacks;

Coach reaction in presence of a new, ‘old’ or recurrent injury;

Differences between male and female coaches and between male and female athletes.

**Athletes’ behaviour**

How they express emotions such as frustration/joy and pain;

Do they accept injuries or try to ignore/hide them;

**Interaction between the coach/athlete and the medical staff**

Where and how the medical treatment is conducted;

How much time males and females spend receiving treatment?

How can I regard the physiotherapist autonomy?

How does he/she interact with the coaches and athletes?
Observation 1; Male and Female training session – Date xx/xx/xxxx

- Male team coach [name] is talking with me: “Nowadays, everything is much different in pedagogical terms. If it was like in my time, all athletes would leave gymnastics” (during the interviews I should try to understand what s/he meant with this).

- Female Team Coach [name] talking with me: “When I was an athlete, my coach slapped me, and then I performed better!”

- Conversation between two Female Team Coach’s [names]:
  
  Female team coach 1: Female athletes are like robots. Coaches can shape them how they want. They are very dependent on their coach!
  
  Female team coach 2: Yes, maybe because we start to work with them since they are very young! I have two athletes that I work with since they were 6 years old.
  
  Female team coach 1: When we work with them since they are very young, we can ‘mould’ them. When they get older, they start to have a stronger personality and it gets difficult to ‘mould’ them.

- One female athlete tells the physiotherapists that she is unhappy with her muscled arms. Contrariwise, I can see that male athletes show with pride their muscular bodies, and often practice without a shirt.

- A female athlete does a performance on the floor and coach [name] argues with her out loud. S/he complains about why she is missing that exercise. Everybody on the gym could hear her/him. The young female athlete just says yes with her head and never speaks. When s/he stops arguing she turns around and goes to the line where other colleagues were waiting to start their exercises. I was expecting that she cried or at least talked about what just happened with the other athletes. But they just continued practicing like “nothing happened”.

- The male athletes are frequently joking and smiling while practicing.

- The coach [name] discusses with the physiotherapist about the treatment that one athlete is receiving form another physiotherapist. The physiotherapist does not agree with that treatment.
Observation 2; Male and Female Competition Day – Date xx/xx/xxxx

- A male athlete suffers a serious injury.
  - A Referee comments: You can feel the environment getting tense and heavy!
  - Coach of the male team: That is nothing, be calm! I have seen a lot of injuries like that! Why are you crying? The athlete did not answer. He just started crying more.

- All male athletes wish good luck to each other (competitors and teammates) before competition.

- Only male athletes publicly eat during competitions.

- Another male athlete suffers a serious injury.
  There is no adequate material to transport the gymnast outside the competition floor. While he is being removed, the public gives him a huge applause. After a few minutes an ambulance arrives. A referee was helping the athlete but another referee asked him to return to his post. I feel it is like “the show must go on”. The parents go with the athlete to the hospital. After about 1h the athlete returns just to observe the training session.

- Now a female gymnast suffers a serious injury. She is crying but trying to continue competing. However, she had to stop. Meanwhile the injured athletes are talking about their past injuries, such as dislocated kneecap injuries.
Appendix 3 – Interviews Guidelines

Athletes’ Interview Guideline

✓ Why did you start to practice Gymnastics?
✓ For how long are you a member of the Portuguese National Team?
✓ What are your expectations?
✓ Is there any relation between your gymnastics career and your personal life?
✓ And between gymnastics and your academic or professional life?
✓ What is your opinion about the intensity and duration of your training sessions?
✓ I am aware that there is a financial reward to those athletes who achieve certain results. What is your opinion about that? Does it influence you in any way?
✓ Do you take any medication/supplements systematically? If yes, which, why and for what?
✓ Do you have any special care with your alimentation?
✓ What is an injury for you? And pain?
✓ Have you ever practiced or competed while injured and/or with pain?
✓ How often have you practiced while injured and/or with pain?
✓ If yes, tell me about some of the injuries you have had and what injuries have you had most frequently.
✓ How would you describe and measure the seriousness of an injury? Can you give an example of a serious injury you have had?
✓ When you are injured or with pains, what do you usually do?
✓ What takes you to compete with injury/pain? Why didn’t you stop?
✓ What do you feel when you are injured?
✓ Did you feel that your performance was different due to the injury/pain?
✓ And when your colleagues are with pains or injured? What do you feel?
✓ Do you usually talk about your injuries/pains? If so, with whom? What is the feedback you usually receive?
✓ Do you talk about private matters with your club/national team staff? And anything was made public?
✓ How do your colleagues treat you when you are injured?
✓ How does your coach treat you when you are injured?
✓ How does the physiotherapist treat you when you are injured?
✓ When you are injured, who decides if you should or not continue practicing? How this decision does take place?
✓ Have you ever felt any kind of pressure to compete with pain/injury?
✓ Have you ever felt any divergence between the coach and the physiotherapist opinions?
✓ What is your opinion about the medical support you have from you club/national team?
✓ What is your perspective about the details you receive from the physiotherapist concerning your injuries? And what about the information your coach gives to you about your injuries?
✓ Do you look for a medical opinion outside the club/national team? And if different what treatment do you choose? Does the federation know?
✓ Do you feel that you will have consequences to the future from the current injuries?
✓ If yes, why do you continue practicing?
✓ How do you see the male/female training sessions?
✓ How would you describe your male / female colleague’s injury report?
✓ And your male / female colleague’s injury report?
✓ And what about male and female medical treatment?
Coaches' Interview Guideline

✓ Why Gymnastics?
✓ How did you become a gymnastics coach?
✓ For how long do you coach the national team?
✓ What are your expectations?
✓ Is there any relation between your gymnastics career and your personal life?
✓ And between gymnastics and your professional life?
✓ And how do you see athlete’s personal life and their gymnastics career?
✓ And their professional life and gymnastics career?
✓ What is your opinion about the intensity and duration of the training sessions?
✓ I am aware that there is a financial reward to those athletes who achieve certain results. What is your opinion about that? Do you think it influences them in any way?
✓ Do you have any special care with your athlete’s alimentation? And weight?
✓ Do you recommend taking any medication/supplements systematically? If yes, which, why and for what?
✓ What is an injury for you? And pain?
✓ Have any one of your athletes ever practiced or competed while injured and/or with pain?
✓ If yes, how often does it occur?
✓ What are the most frequent injuries?
✓ What is your opinion about that? And how do you act as a coach in presence of an injured athlete?
✓ How would you describe a serious injury? Can you give an example of a serious injury an athlete have had?
✓ When an athlete is injured or with pains, what do you usually do?
✓ What do you feel when an athlete is injured?
✓ Did you feel that his performance was different due to the injury/pain?
✓ With whom you usually talk about the athletes’ injuries?
Have you ever had any divergence about the treatments or recovery with a player?
And with a physiotherapist?
When an athlete is injured, who decides if he should or not continue practicing? How this decision does takes place?
How do athletes treat other colleagues when they are injured?
And the physiotherapist?
Do you think that the athletes are pressured to compete with pain/injury?
What is your opinion about the medical support you have from your club/national team?
What is your perspective about the details an athlete gives you concerning their injuries? And what about the information you give to him about his injuries?
Do you normally advise a medical opinion outside the club/national team? And if different what treatment do you choose? Does the federation know?
Do you feel that your athletes will have consequences to the future from the current injuries?
If yes, what is your opinion about that?
Do you think that they are aware of the possible consequences?
How do you see the male/female training sessions?
How would you describe your male / female athlete’s injury report?
And your own male / female athlete’s injury report?
And what about male and female medical treatment?
What is/are your best moments in gymnastics?
And the worst?
<table>
<thead>
<tr>
<th>Nuno</th>
<th>Why did you start practicing gymnastics?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Athlete</strong></td>
<td>My mother used to practice gymnastics at [club name], as did my father. They put me there when I was little, in a class for babies. But then [club name] ended. I entered approximately by age 2, by age 4 it ended, and then I came to [club name] by age 6/7. During the 20xx games, I was doing lots of “gymnastics” in the couch, and my mother decided to bring me to gymnastics.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But you said you started by age 2?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>Yes, I went by age 2.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But why did your parents choose gymnastics?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>My mother was my coach at the kids’ class. But I only did some quick rolls. “Real” gymnastics I only started practicing by the age of 7.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But was it your mother that coached you? Was she your coach?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>My other was an athlete, and then she started as a coach.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Still is?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>Now she coaches trampolines here in [club name].</td>
</tr>
<tr>
<td>Nuno</td>
<td>And for how long have you been with the National Team?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>I have entered the National Team by the age of 10 and stayed until the end of last year, the end of last season. Due to the Nationals [competition] they pushed me out of the National Team.</td>
</tr>
<tr>
<td>Nuno</td>
<td>You want to talk about what happened?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>Fell 5 times, and that is it… Did not manage to get the 6 points.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But when did that happen?</td>
</tr>
<tr>
<td><strong>Athlete</strong></td>
<td>In the last national competition. That is when you saw me competing. Now I cannot go to training sessions, I do not get handguards, I have to purchase everything.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Explain to me the criteria to enter the National Team.</td>
</tr>
</tbody>
</table>
| **Athlete** | To enter the National Team, the minimum points we must obtain in the Nationals is 66. If I had not fell 5 times, I would have gotten 70 or 71 points, and I would still be
a part of the National Team squad. I mean, I am still part of the National Team, but not the Elite National Team. Now I am not entitled to receive handguards or other equipment’s, nothing…

<table>
<thead>
<tr>
<th>Nuno</th>
<th>What changes when you are part of the National Team?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Athlete</td>
<td>I do not have expenses in sport.</td>
</tr>
<tr>
<td>Nuno</td>
<td>They do not pay you any expenses? Why do you think that happened, why do you think you did not manage to get the results you desired?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Honestly, I am not sure, but in practices I was doing everything “clean”, without falling, nothing. I arrive at the pommel horse, in which I used to do 3 variations and not fall in those 3, and I fell 2 times. Maybe due to being nervous because it was my first exercise that day. And because it was the first, everything that came after was ruined.</td>
</tr>
<tr>
<td>Nuno</td>
<td>What do you expect from the future?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I now started training, and my goal is to go to the [year] European Championship. I had the chance to go two years ago, but got injured 3 or 4 weeks before, and another athlete took my place.</td>
</tr>
<tr>
<td>Nuno</td>
<td>How did you get injured?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I got hurt in a knee, and had to have a meniscal surgery.</td>
</tr>
<tr>
<td>Nuno</td>
<td>How have you been managing your life in gymnastics in regards with your personal life, family and friends?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I have a great relationship with my colleagues here in gymnastics and there are no troubles amongst us. And when there are, it is all fine by next day. But beyond gymnastics, I do not have a life. I only have time to study and nothing else. Sometimes not even to study. I never go out with friends, never.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But why?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I do not have the time.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But do you have any more friends, beside your gymnastics colleagues?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I had friends at school, but now I changed school, because the previous only had up to the 9th grade. I lost my old colleagues, made some new friendships, but that is not the same. It is different, because I do not have the available time they have to</td>
</tr>
</tbody>
</table>
be with each others, to go to the beach in the summer from morning to afternoon. I practice in the morning from 9h to 12h, and then from 17h to 20h. And that is my life, always has been. Sometimes I go to the movies with my cousins, and go on vacations with them, but I do not usually get to be with my colleagues, not even text them.

Nuno So, most part of your friends practice gymnastics?

Athlete Yes, because those are the ones I have known for a longer time, and trust the most.

Nuno And how do you feel about that?

Athlete Ok, I always lived like this. I would not know how to live it any other way.

Nuno Have you ever thought about that? The relationship between gymnastics and your personal life?

Athlete Yes, I have, but if you really want to reach a goal, like going to the Olympics, it is worth.

Nuno Do you think it is worth?

Athlete It is worth. I got to a point of not even going to school by the morning, so I could practice. I used to practice in the morning and in the afternoon, 3 times a week, before I got hurt. Now I do not know if I am going back to practicing twice a day. I have to take a look at my new schedule.

Nuno And your studies, how are they going?

Athlete I passed this year, but it was a close call. I had two teachers giving me a 10, because they know I push hard, and that all the free time I have, I use it to study. This year I got to the point of: by Monday, school, gym, sleep; Tuesday, the same; Wednesday I did not have classes in the afternoon, but I would go to the English Institute (I am taking the class, so I can work abroad, and do the Proficiency test); Thursday if did not have anything in the afternoon, I would study; Friday, the same as Monday, and by the weekend, I had Physics, Chemistry and Maths tutoring.

Nuno When do you have time for yourself?

Athlete Never…

Nuno How old are you?
<table>
<thead>
<tr>
<th>Athlete</th>
<th>16. The last girlfriend I had was about 5 or 6 years ago, and she was a colleague at gymnastics.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nuno</td>
<td>And your parents, what is their stance?</td>
</tr>
<tr>
<td>Athlete</td>
<td>My dad asks me if I have a girlfriend.</td>
</tr>
<tr>
<td>Athlete</td>
<td>I always tell him I do not. He says I need to get one. I always tell him I do not have the time and do not want to, because either I dedicate myself to one thing, or it will not have success. I already have to dedicate myself to school and gymnastics. To gymnastics mainly, because every month I would skip classes once or twice a week, to go to practicing at the High Performance Centre. You were also there, and we spend most of our time there. And then, when I go back to school, I had exams during those weeks and had to do it all in 2 or 3 days. How could I do 6 exams in 2 days? It is impossible… It was like, having a class, and then 2 exams, another class, and then 2 more exams. It was extremely hard…</td>
</tr>
<tr>
<td>Nuno</td>
<td>And your parents? What are their thoughts?</td>
</tr>
<tr>
<td>Athlete</td>
<td>They say I must work the hardest I can. It is the only thing they say.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Do they support your presence in gymnastics?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Yes. My father has not been following it much, because he is been living in England (I got here yesterday, because I have been there on vacations).</td>
</tr>
<tr>
<td>Nuno</td>
<td>Regarding your professional prospects, do you see any link between gymnastics and a future job?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I love sport and gymnastics very much, but I see everyday this gym for almost 9 years. I have been practicing gymnastics for 12 years. I see this gym so frequently, that I do not find the will to come here and study for another 4 or 5 years [the gym belongs to a Sports University]. Initially, I would have liked to go to Medicine, but I do not think I can, because it is all focused in studying a lot, and I do not have the time. Also, I do not have the grades required to enter Medicine, and getting the high-performance status is very hard at the moment, because before previously you just had to belong in the National Team. But now you must be an high-performance athlete. We must have really good results in the World and European Championships, be at the top half of the leaderboard, and be among the best 24.</td>
</tr>
</tbody>
</table>
| Nuno    | As you well know, I have watched several of your practices. Can you tell me a bit }
I got to a time when I was a bit fed up with this, because of all the recent injuries. Just 4 or 5 months ago I broke my toe. 4 or 5 years ago broke my elbow. Had several wrist injuries that forced me to stop completely, because the bone growth area broke, and then it would stop growing. If it heals like this, my hand would become twisted, so my doctor told me that either I would to stop, or go through surgery and put some irons so that the hand would not be like this. I had huge pains, which then became chronic, including in the knees. I also broke 3 fingers and did a ligament rupture. I got to a point I told myself “I cannot take this anymore! If I continue till 20 years old like this, I will die!”

To no one… With [coach name], sometimes. I feel like I cannot give any more than I do. I can speak with [current coach name], but if it were [previous coach] I would not speak, because s/he doesn’t understand. When s/he was my coach, I broke my knee in during trainings and did not tell him/her anything.

Because one time I told him/her I have got injured in the ligament rupture, and s/he started beating me. S/he totally beat me… And from then on, I did not tell him/her anything, even if I broke something… It was my mother, who picked me up that day, and I told her that my knee was hurting a lot. She took me to the hospital, and the doctor found a ligament rupture. When [coach name] knew I had gone to the hospital, s/he even called my mother and they argued. The only reason she did not took me out of gymnastics, was because she knows how much I enjoy this. She even got mad at [coach name]. S/he made a big fuss out of it. Then s/he would beat me in all practices. This one time, I was in the bars, and could not do what s/he was asking. Not because I did not want it to, it was just because I could not do it, I did not understand the exercise, and s/he gave me such a strong slap that I had his hand marked for a week, in my chest, ring and everything. I was coming down from the bars, s/he pulls his arm and hits me like this… His hand was marked here for a week. [laughs]

Help me understand what makes someone keep up with it.
Athlete: I honestly do not know, but it is always something that pulls me over. My will to go to the Olympics is so strong, that a person always keeps fighting.

Nuno: Do you feel you have suffered any kind of abuse here in gymnastics?

Athlete: Yes, from my coach [name]. [Current coach name] is very nice, and we get along just fine, because s/he experienced the same things we are experiencing. With [previous coach name] it was a completely different matter. But sometimes it works, sometimes a beating works! One gets afraid of getting beat again, and then does what the coach wants. With [current coach] it is different, but the truth is that we do not get there so quickly.

Nuno: For how long are you with [coach name]?

Athlete: Right after the 20xx Olympics.

Nuno: It is very recent, then. That means that you have spent a lot of time with [previous coach].

Athlete: When I was very young, I had another coach. That was my best coach. S/he took us to the cinema, to the pool, and was very sociable.

Nuno: Did s/he have any influence in your taste for gymnastics?

Athlete: Yes, in my and other 20 colleagues. And when s/he left, [a different previous coach] came. It was a huge difference. S/he would also beat us, was not nice to us, and would not take us to the movies, nothing. In the following months, 2 or 3 quit, and we stayed with him/her for a year. Sometimes s/he would go coach the girls, and leave us practicing all by ourselves.

Nuno: But why?

Athlete: I do not know. Since s/he started to coach girls, s/he would go there and came back when practice was over.

Nuno: When you say they beat you, you spoke in the plural. Was not it just you?

Athlete: It was not just me… But me, mainly.

Nuno: But why mainly you?

Athlete: [Previous coach name] would hit others, too. In [athlete name] too. This one time, [athlete name] father came to watch the practice, and [coach name] hit [athlete name]. He got up, and in the end went to talk to the coach and told him/her he did.
not want him/her hitting his son. S/he would hit us compulsively. I even got my ear bruised once, because s/he twisted it. Or gave us those slaps that leave our ear ringing.

Nuno  And did you talk among yourselves, whenever that happened?

Athlete  No, I would just sit, cry, and do it again.

Nuno  But you did not talk about it with anyone? Because that was not happening just to you and other could see…

Athlete  No the environment was too serious, we could not talk. I just had to do the exercises again…

Nuno  And after the practice?

Athlete  No, we would not talk about that. We would talk about something else.

Nuno  Did you talk to your parents?

Athlete  My parents? My mother knew [coach name] hit me…

Nuno  And what did she say to you? How did she react?

Athlete  She would say “I cannot do anything about that”. She was also afraid, because [coach name] did not react well to people. S/he made a big fuss when my mother took me to the hospital. Almost hit her too, just because I had gone to the hospital. I went to the hospital, came to practice the next day, and s/he hit me even more, for having went to the hospital.

Nuno  Now that s/he is no longer your coach, have you ever talked with him/her about this?

Athlete  No, and I never will. Ever! Deep down, s/he was a good coach. I liked the way s/he helped, more than I do [current coach], because s/he is more experienced. Now, regarding attitude, I prefer [coach name] way. Much more…

Nuno  I wonder what makes you keep going…

Athlete  When the new coach came when I was very young, everyone said “I do not want this, anymore. I cannot take this coach. I am going to quit”. From 15, only 2 remained, me and [athlete name], but even we were close to giving up.

Nuno  What do you feel when you see [coach name]?
Athlete

Now I do not feel anything, because when [athlete name] qualified to the Olympics, s/he was cool. Did not hit us. By the end s/he did not hit us, or anything. Sometimes s/he would give us some slaps in the back of the neck, but that was understandable. But I only see him/her as a former coach, nothing else.

Nuno

Have you ever talked about this to anyone?

Athlete

There was this once I showed my mother his/her hand marked in my chest, and she was like “[coach name] did that to you?”, and my father said “[coach name] is a really sick person”.

Nuno

And it stayed that way?

Athlete

Yes.

Nuno

But why? Do you think your parents had any kind of fear?

Athlete

No, because my mother know [coach name] since [club name].

Nuno

Changing the subject, what’s your point of view regarding training intensity?

Athlete

I feel that trainings are very intensive. Every training is very tough and sometimes we get here with lots of pain and contractures, and we leave even worse. When we are in training sessions, we have the benefit of having a physiotherapist. That helps a lot, and if we did not have a physiotherapist in training sessions, I’d probably would not reach the end of the week, neither would be able to complete the rounds, because practices are very intensive. They are daily, 3h30 in the morning, 4h by the afternoon. It is between 8h30-9h a day. That is a lot of time, per week, here. During school time, I practice 23h a week. In winter, I feel even more down, because I have school, I come here tired, and leave here even worse. I get home, and sometimes I cannot even do homework, I do them before entering the classroom. That is life… Sometimes teachers see me doing homework, and I tell them it is not my fault. I am not cheating, and I must do them, otherwise I will get a penalty.

Nuno

Teachers know you are a national team athlete?

Athlete

They do, my principal teacher knows, because I have to talk to her about exams whenever I go to training sessions. When will I do them, or which ones I have to do next.

Nuno

Do they support you in any way?
<table>
<thead>
<tr>
<th>Athlete</th>
<th>At school, yes.</th>
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<tbody>
<tr>
<td>Nuno</td>
<td>And at the National Team?</td>
</tr>
<tr>
<td>Athlete</td>
<td>They email my school telling them my training sessions’ schedule, they call telling when I need to go and to justify my absences. When I miss classes, I have trainings twice a day, and the absences are justified by the Federation. All my absences are justified.</td>
</tr>
<tr>
<td>Nuno</td>
<td>As you well know, whoever reaches certain goals here in the National Team, gets a financial support. Does that influence you in any way?</td>
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<tr>
<td>Athlete</td>
<td>Juniors do not get it. [athlete name] got the status now, or will get, but even so, I do not think he will start getting it. Just a while back we were talking about it, and only by the age of 18 you are eligible to start receiving it. But I think that if he gets the status, he will start receiving when he turns 18.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Does that influence you in any way or not?</td>
</tr>
<tr>
<td>Athlete</td>
<td>It is always a good thing having our own money, obviously, mainly due to the amount of time we dedicate to this. What I do not think it is fair, is the amount of attention and money football gets, in comparison with the amount of time they practice. They practice many times, but they are not as intensive or hard as ours. Here, an athlete gets a salary of 350€.</td>
</tr>
<tr>
<td>Nuno</td>
<td>What do you feel about that?</td>
</tr>
<tr>
<td>Athlete</td>
<td>A person practices sport because he enjoys it, not for the money, but it is always a useful thing. That is what I say.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Are you taking some kind of medication at the moment?</td>
</tr>
<tr>
<td>Athlete</td>
<td>No. By Winter, I take some vitamins, nothing else.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And food. Are you careful about it?</td>
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<tr>
<td>Athlete</td>
<td>I do not eat much. Perhaps that is the reason I got injured so often. Perhaps the injuries that happened were they influenced it.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Since you are talking about injuries, how do you describe the meaning of injury?</td>
</tr>
<tr>
<td>Athlete</td>
<td>To me, twisting a foot, or using crutches to walk are not injuries. An injury is having a cast, break a tendon, not being able to practice. When I was submitted to surgery, I could not even do a handstand. Having stitches, the skin becomes more fragile.</td>
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</table>
Only after a month of being operated, did I started doing handstands and balances, and even then, it hurt.

<table>
<thead>
<tr>
<th>Nuno</th>
<th>And why do you keep doing it while in pain?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Because I always lived like this. I cannot live without this. I am not ready to stay at home doing nothing. It is rare being sick, and the few occasions I am, I do not even know what to do. I do not understand how some people in my classes manage to get worse grades than me.</td>
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<tr>
<th>Nuno</th>
<th>You talked about having pain. What is a pain, in your perspective?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>A pain is a feeling that never stops, it is always there. Now, after the surgeries, I feel pain in my knees every morning. Until I start walking, they snap, and when they snap it always hurt. My wrists still hurt too.</td>
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<table>
<thead>
<tr>
<th>Nuno</th>
<th>Tell me more about your injuries.</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>I broke 3 fingers, had 2 knee injuries and an almost total menisci’s amputation. A meniscus is a disk, and I already broke it horizontally and vertically. If you divide the meniscus by 3, I only have 1/3 of the meniscus. In both knees...</td>
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<thead>
<tr>
<th>Nuno</th>
<th>You had parts removed. And was anything added?</th>
</tr>
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<tbody>
<tr>
<td>Athlete</td>
<td>No. If it were, it would have to be a meniscus from a cadaver, and it had to be compatible, otherwise my body could reject it. The doctor tried to stitch it. It is always the first choice by doctors, not amputate, but if the injury is too big, it will not regenerate, because it is not cartilage. And even after stitching it, it may not heal, and I may have to go to surgery again, to have it removed. So, there are always some downsides. The doctor told me he tried it every time, but that it was not possible. Removing bone may heal fast than other strategies, and I valued the fact that during the following week I was already putting weight into it.</td>
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<tr>
<th>Nuno</th>
<th>With medical recommendation?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Yes, he told to stop using a crutch, even with I was still with stitches. If I was only stitched, I would have to keep my foot off the ground for 6 months. I would get muscular atrophy, and would have to relearn to walk.</td>
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<thead>
<tr>
<th>Nuno</th>
<th>The times you were operated, for how long you stopped practicing?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>In my first knee injury, I had to stop almost a year. By the second time, since it was already a chronicle injury, it did not hurt. I would bend the knee and it would pop</td>
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</table>
when coming out of the position, and another pop when going back in. The second time was faster, because the pain was not there. It had not swell by the time I got operated. It did swell a lot after the surgery, but it was quick.

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<thead>
<tr>
<th>Nuno</th>
<th>Have you ever practiced while injured?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Yes I do. There is always an injury present, always something that hurts. In Winter I feel more pain, because of air humidity.</td>
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<thead>
<tr>
<th>Nuno</th>
<th>Where does it usually hurts?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Knees, specially when seasons change! [laugh]. Like old people…</td>
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<tr>
<th>Nuno</th>
<th>But you are only 16. Have you thought about that?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Yes. We used to go to the Medical Centre, to x-ray our wrists, and check our bone age. We already have a bone age between 20-30 years. A huge difference.</td>
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<thead>
<tr>
<th>Nuno</th>
<th>Do you talk with your current coach about all of your injuries?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Yes. I say “this is hurting, I am having some limitations, cannot do it”.</td>
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<tr>
<th>Nuno</th>
<th>How does s/he react?</th>
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<tr>
<td>Athlete</td>
<td>S/he says “we will do what you can”. S/he reacts well.</td>
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<tr>
<th>Nuno</th>
<th>And your colleagues, how do they react when you complain about an injury?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Normally. They try to support me. They say “you will recover, think about the championships”. Even now, [athlete name] was operated and when he came back, we gave him our support.</td>
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<tr>
<th>Nuno</th>
<th>During practice sessions I witnessed that sometimes you get a bit sad about some attitudes.</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>It is normal, I am used to it. [laugh]</td>
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<tr>
<th>Nuno</th>
<th>Used to what?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Bullying [laugh]</td>
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<table>
<thead>
<tr>
<th>Nuno</th>
<th>Do you think it is bullying?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>A little.</td>
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<tr>
<th>Nuno</th>
<th>But why? Why you?...</th>
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</table>
Athlete: My problem is that I grew too much, and now I do not have the strength to keep up with my body. And they laugh about it. [laugh] And I also do not like to do strength workout. When I had surgery, I grew 10cm in a month, because I stopped the floor impacts which were preventing me from growing. My father is [nationality] and 1.94m tall. I have two cousins, one is 2.07m and the other 2.04.

Nuno: How tall are you at the moment?

Athlete: 1.76m

Nuno: Do you think that practicing gymnastics influenced your height?

Athlete: I think I could have grown more. At this moment I just want to stop growing. I have had enough of breaking fingers in the parallels! I want to be smaller, like [athlete name]. That would be useful! [laugh]

Nuno: You talk about pain in a very heartfelt and emotive way.

Athlete: Because pain is always present, and sometimes they are really limiting. The day before [event name] I slipped and twisted my knee. It was hurting me a lot, and I did the event under pain. In the floor, I did not even do the second jump, so I would not go to the final. I did not want to compete more during the following day. Not that I did not want to, I obviously did want, but the pain was limiting me.

Nuno: Which emotions do you feel when you are under pain?

Athlete: I felt frustrated for not being able to do it, and frustrated for having pains. It always hurts, but I have to do the exercises. But sometimes I am unable to do them.

Nuno: Why do you say you have to do it?

Athlete: Because I must.

Nuno: But why stopping is not an option?

Athlete: Because I do not know how to live without this. [tears] I do not know how… I always had gymnastics.
<table>
<thead>
<tr>
<th>Nuno</th>
<th>Do you feel that you were respected when you are injured?</th>
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<tbody>
<tr>
<td>Athlete</td>
<td>Now I do, but not before. [coach name] forbid me to go the physiotherapy, so I could practice. And I still had not recovered from my knee…</td>
</tr>
<tr>
<td>Nuno</td>
<td>Why you never formed a complaint?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Never. Also for fear of the coach. And because sometimes a beating works. Most of the times that was the way that led us to get things done.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Have you ever felt your sport performance was influenced because of an injury?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Yes.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And how people react to that?</td>
</tr>
<tr>
<td>Athlete</td>
<td>In the last event, [coach name] told me “Cheer up. You were injured, you were in pain, and that event was not that bad”. I only got back to competing this year, because I got injured in December 20xx, and had surgeries in January and December 20xx.</td>
</tr>
<tr>
<td>Nuno</td>
<td>How many times did you have surgery, and to what exactly?</td>
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<tr>
<td>Athlete</td>
<td>I had surgeries to both knees, by arthroscopy due to meniscal injuries.</td>
</tr>
<tr>
<td>Nuno</td>
<td>At the moment, do you have any serious pain or injury?</td>
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<tr>
<td>Athlete</td>
<td>No. I have some elbow restrictions, because I have hyperextension, but apart from that, everything’s normal.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But is that hyperextension something natural?</td>
</tr>
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</table>
| Athlete | No. When I broke my elbow, I broke it by the joint, where he stretches, and the doctor said I would not ever be able to stretch the elbow again. For a whole year, I
did not even hold myself in the bar. I could not. We had a physiotherapist but s/he is now running some classes in college, so s/he could not come this semester. S/he used to come here everyday, and I always cried in pain during sessions, because calcification occurred differently [in both knees], and s/he always tried to force me to stretch. When I removed the cast, I could only stretch this [small extension] and that was enough to make me cry. By just 90º I would cry.

<table>
<thead>
<tr>
<th>Nuno</th>
<th>What do you feel when your colleagues are injured?</th>
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<tr>
<td>Athlete</td>
<td>I feel… Sometimes I think “better them than me”, but I really feel bad for them. Especially when they are from my team.</td>
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<tr>
<td>Athlete</td>
<td>Do you think your colleagues understand you when you are injured? I have seen them joking you around.</td>
</tr>
<tr>
<td>Athlete</td>
<td>Yeah, they push it.</td>
</tr>
<tr>
<td>Nuno</td>
<td>But why? Help me understand.</td>
</tr>
<tr>
<td>Athlete</td>
<td>Because I do not react the same way they do.</td>
</tr>
<tr>
<td>Nuno</td>
<td>In which regard?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I do not know how to explain…</td>
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<tr>
<td>Nuno</td>
<td>You told me you keep up with pain and injuries, that you have been involved in surgeries more than once, but even so, that still happens. Why?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Mainly because I do not eat properly. Not that I do not want to, I just do not feel like doing it, mainly after a training, because I get home by 22/23h. I get home sleepy, and only by thinking that I still have to do homework… I do not feel like eating. But I always eat something. Not much, but that way I also do not gain weight [laugh].</td>
</tr>
<tr>
<td>Nuno</td>
<td>Have you ever talked about personal issues with someone at the club or at the National Team?</td>
</tr>
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</table>
**Athlete** | Yes, I did. I trust them. When I go to training sessions, I usually share the room with [athlete name], and sometimes we talk about our everyday issues, about school… About issues we usually have. And we usually know how to keep a secret.

**Nuno** | How do you feel the physiotherapist treats you when you are injured?

**Athlete** | I used to have [physiotherapist name]. I also like [physiotherapist name], because s/he is also an athlete, and s/he jokes around with it. “Hey, look, you have to do what you have to do”. S/he always does what we need, while simultaneously we look at him as a colleague who is treating us.

**Nuno** | So, do you think he understands you?

**Athlete** | Yes. Many times, injuries are not treatable, most of them are not. As an example, the injuries I have on my shoulders are due to the constant execution of exercises and their heavy load, and also because I do not have enough muscle mass. That is why I have tendon aches, and cap issues. The physiotherapists do not treat me in a way to eliminate the pain, but rather having me fit for training, so it will not hurt me a lot. Physiotherapy is not a mean to heal, but a mean to just hurt less.

**Nuno** | If you had a physiotherapist that did not belong to the national team or sports in general, how do you think the treatment would be like?

**Athlete** | Now I must pay my treatments so I go to a medical centre. There is one other doctor there, [doctor name], which is also nice, but the treatment is too slow [laughs]. Not with [physiotherapist name]. [physiotherapist name] finishes the treatment earlier, because s/he knows how are training loads, and that the treatment must solve the issue fast.

**Nuno** | How do you compare both treatments?

**Athlete** | I prefer the physiotherapists, I do more things with them.

**Nuno** | But why?
Athlete Because they have different working methods. The doctor always has more people to treat by the afternoon. By the morning, there is at most only one person there, and that person is usually [female athlete] [laugh].

Nuno When you are injured, how is the decision made, regarding whether you keep practicing or not?

Athlete It is a joint decision, by me, the doctor and the coach. When I was in surgery, [current coach name] went with me to the medical office, and heard the doctor’s view, and shared his view as well, which is always the same as the doctor. [previous coach name] was exactly the opposite.

Nuno How was it with [previous coach name]?

Athlete I never had a big enough injury, that I had to go to the doctor with him, but according to [athlete name], he had an injury and the coach barely allowed him to just go to the gymnasium and do physiotherapy on the leg. He always started practicing right away!

Nuno What was that injury, exactly?

Athlete He had total rupture of the cruciate ligaments, meniscal rupture and kneecap fracture. [athlete name] started practicing a week after he was ok. They get a scar in that area [knee] and full of stitches. He could only start doing physiotherapy 3 or 4 months after surgery.

Nuno Does that scare you?

Athlete No. I have been through that already [laugh].

Nuno If you had to build a pyramid, about who is taking the call over you keep practicing, how would you build it?

Athlete At the moment, first the medical department, then the coach and only then me.

Nuno You at the bottom?
<table>
<thead>
<tr>
<th>Athlete</th>
<th>Yes.</th>
</tr>
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<tbody>
<tr>
<td>Nuno</td>
<td>Why?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Because I prefer to hear the coach and the doctor’s point of view. I always listen the doctor’s view first, and then the coach, and only after I make my call.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Is it you that makes the call then?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Basically, it was a call made by the doctor. I needed the surgery, and the doctor said “you will have to stop for a few weeks, and then see what can you do”, and the coach would also tell me what I can do. That is why I put the coach in second place, because s/he tells me what I can and cannot do. S/he has sport experience. S/he had anatomy at college, and s/he knows a few things.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Did any time the coach and medical team point of views differed from one another?</td>
</tr>
<tr>
<td>Athlete</td>
<td>With [previous coach name] yes, with [current coach] no. There was this one time where I was in training session, and s/he forbade me going to the physiotherapist.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Why?</td>
</tr>
<tr>
<td>Athlete</td>
<td>S/he said I did not need it. And I was “dying” [laugh].</td>
</tr>
<tr>
<td>Nuno</td>
<td>Dying?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Of pain.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Pain where?</td>
</tr>
<tr>
<td>Athlete</td>
<td>At the wrists.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And what did you do?</td>
</tr>
<tr>
<td>------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Athlete</td>
<td>I did not go to physiotherapy.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And why did not you go?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I was forced to follow the coach’s point of view.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Why do you say that?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Because s/he forced me not to go. If not, s/he would hit me. I never pushed it or even tried to go against, but s/he would have probably beaten me, and yelled at me. S/he would beat me a lot…</td>
</tr>
<tr>
<td>Nuno</td>
<td>Do you feel those experiences have any influence in what you are today?</td>
</tr>
</tbody>
</table>
| Athlete | [big pause] Some, maybe. At school I was made fun of, for practicing gymnastics. They would say it was for girls only. I always responded “go try it, then come and talk to me”.

Nuno | [previous coach name] would threaten you, then? |
<p>| Athlete | I wanted to quit, but then I had that problem: what would I do with my life next? I always enjoyed competing. |
| Nuno | By 12/13y old, you had those thoughts, already, about what would you do if you left gymnastics? |
| Athlete | Yes, I though “what will I do next? I do not know what I will do”. I already had those thoughts, and that is why I never quit. I waited for [coach name] to go away [laughs]. |
| Nuno | When [coach name] went away, [coach name] came… |</p>
<table>
<thead>
<tr>
<th>Athlete</th>
<th>Some things got better… But beating me was something common in both [laugh]. But what I say is that sometimes beating leads to success [laugh].</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nuno</td>
<td>So, what do you think that got better?</td>
</tr>
<tr>
<td>Athlete</td>
<td>It got better in some aspects because we started learning more and harder exercises. Different things.</td>
</tr>
<tr>
<td>Nuno</td>
<td>What is your opinion about the information you receive about your injuries?</td>
</tr>
<tr>
<td>Athlete</td>
<td>That I am aware of, they would tell me everything.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And you? Did you ever tried to hide an injury?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Yes. I tried hiding the knee injuries from [previous coach name]. I also tried to hide the wrist injuries, but I got to a point where I could not take it anymore. I had to say something. I was still with [coach name], but could not take it any more. “I do not care if s/he hits me, I have to tell him…” [laugh]. And s/he actually did not beat me. I was kind of surprised [laugh].</td>
</tr>
<tr>
<td>Nuno</td>
<td>You would hide them, because they may beat you?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Yes, and I did not want to get beaten.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And with your current coach?</td>
</tr>
<tr>
<td>Athlete</td>
<td>With [coach name], I do not have to hide. And even with [coach name], a bit closer to the end I would already tell him/her “I cannot take this anymore, I am tired” [laugh].</td>
</tr>
<tr>
<td>Nuno</td>
<td>What your coach now says when you complain?</td>
</tr>
<tr>
<td>Athlete</td>
<td>S/he usually says “ok, let’s see what we can do”, but sometimes s/he says it is bullshit. Sometimes we exaggerate due to a protection instinct, and we do not realise it. But it is typical.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Do you think that sometimes you overreact, then?</td>
</tr>
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<td>------</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Athlete</td>
<td>Now I do not, but I used to, before. When I do the strength workout, I sometimes say that I could not take anymore [laughs].</td>
</tr>
<tr>
<td>Nuno</td>
<td>Why do not you like strength workout?</td>
</tr>
<tr>
<td>Athlete</td>
<td>In order for me to do strength workout, I must have the necessary strength to do it, and I think the strength workout I did was not adjusted for me.</td>
</tr>
<tr>
<td>Nuno</td>
<td>Do you think you will have any consequences for your future?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I will, and by 70 I probably will not be able to walk, my knees will be even older [laughs]. But I believe that, in the future, there will be legs that will do the walking for me [laughs].</td>
</tr>
<tr>
<td>Nuno</td>
<td>But that knee age was told to you by a doctor, or is it how you feel it?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Well, throughout the years bones wear is normal, but my knees are worn almost to the maximum. Now, the impact I feel is bigger than before. I removed something like small pillows that we have inside the knees, so it would not hurt. But now it hurts again [laughs]…</td>
</tr>
<tr>
<td>Nuno</td>
<td>How can you do the exercises without that natural protection?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I do not know… [laug]</td>
</tr>
<tr>
<td>Nuno</td>
<td>As you well know, I have been watching the masculine and feminine practices. I would like to have your point of view regarding the way you look at the masculine and feminine teams' training.</td>
</tr>
<tr>
<td>Athlete</td>
<td>Masculine practices are different, less serious. For example, when we are in training session, the feminine team members must be equipped exactly the same. And then they are always serious. Only one or two act more natural. But the rest are just gaze fixed, and very serious.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And why do you think that happens?</td>
</tr>
<tr>
<td>------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>Athlete</td>
<td>Oh, that happens only during practice. Then the training ends, and we get along just fine. We practically live together, we just sleep in separate places [laughs].</td>
</tr>
<tr>
<td>Nuno</td>
<td>And what about loads and training?</td>
</tr>
<tr>
<td>Athlete</td>
<td>The females do more leg work. Ours is upper body, because of the rings. They only have one exercise in suspension. The rest is just solo, bar and jumps.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And how do you see the feminine and masculine training duration?</td>
</tr>
<tr>
<td>Athlete</td>
<td>The same. I think the duration’s the same… Sometimes they start earlier, but they also end earlier.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And what about injuries in females and males?</td>
</tr>
<tr>
<td>Athlete</td>
<td>They have more feet injuries, like twisting the feet in the bars. And backs. We have more injuries in the shoulders, elbows, knees… They are stronger at the knees than we are [laughs]. But I think we get injured more, in masculine [laughs].</td>
</tr>
<tr>
<td>Nuno</td>
<td>Why?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Because there is a greater risk. But they have injuries as well.</td>
</tr>
<tr>
<td>Nuno</td>
<td>And how do you look at medical treatment in both teams?</td>
</tr>
<tr>
<td>Athlete</td>
<td>I think the treatments are similar.</td>
</tr>
<tr>
<td>Nuno</td>
<td>I measured during several days the time spent in physiotherapy, by males and females. What do you think my findings are?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Females spend more time. Males have a big number of injuries. Another interesting thing that I would like to point out is that athletes from Lisbon have better medical conditions.</td>
</tr>
</tbody>
</table>
Nuno: Why?

Athlete: They have one national team’s physiotherapist at the gym. When we go there to practice, the gym sucks, it is in a residential building. However, they are always the first to receive information about the National Team. They are always the first to know. I got to a point where I was only informed about a training session on the day before. That is ridiculous! And we are also the second ones to be chosen. Priority always goes to the ones in Lisbon, because national coaches are from there. For example, [male athlete] won a national competition not long ago, won medals, he is much better than others, but he is not in the National Team.

Nuno: And do you think it is because he is from the north?

Athlete: If he was from the south, he would be always at the National Team. We must work twice as much, to be called.

Nuno: And does that happen with the females, too?

Athlete: In the female team not so much, because the all the best athletes are here, and there is no way to get around this. There are huge differences. [female athlete] reaches the 30th-40th place, and [female athlete] around 10th place.

Nuno: What was your best moment or moments in gymnastics?

Athlete: My highest point was competing for Portugal at the [competition name]. I managed to get 4th place, without any falls.

Nuno: And the worst?

Athlete: The last event I was in. If I had not fall, I would go as to the next competition.

Nuno: Better times will come…

Athlete: I think I am already way behind, specially in regards with [male athlete name].
<table>
<thead>
<tr>
<th>Nuno</th>
<th>But why?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Athlete</td>
<td>Because of injuries. I used to win [male athlete name].</td>
</tr>
<tr>
<td>Nuno</td>
<td>And do you think you will not manage to recover?</td>
</tr>
<tr>
<td>Athlete</td>
<td>Not in time to reach to him, but others perhaps.</td>
</tr>
</tbody>
</table>
Appendix 5 – Consent Form and Information Sheet

Consent form to the Portuguese National Artistic Gymnastics Team Athletes/Coaches

Project theme: Experiences of pain and injury in male and female Portuguese artistic gymnastics athletes. A Figurational sociology approach.

Name of Researcher: Nuno Jorge Sousa Pimenta

1. I confirm that I have read and understand the information sheet dated ___/___/____ for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason and without my care or legal rights being affected.

3. I agree to take part in the above study.

Athlete/Coach          Researcher

___/___/______
Date
Information Sheet

Social experiences in male and female Portuguese artistic gymnastics athletes/coaches.

You are being invited to take part in a research study. Before you decide, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information. Take time to decide whether or not you want to take part.

Thank you for reading this.

What is the purpose of the study?

Several studies in sport, have pointed to a high level of sacrifice in order to achieve the best sports results. With our study, we aim to understand if Portuguese national team gymnasts also endure the same levels of sacrifice. This research is part of a postgraduate, PhD study programme.

Why have I been chosen?

You have been chosen because you are an athlete/coach of the Portuguese Artistic Gymnastics National Team.

Do I have to take part?

It is up to you to decide whether or not to take part. If you decide to take part you are still free to withdraw at any time and without giving a reason. A decision to withdraw at any time, or a decision not to take part, will not affect the
standard of care you and your son/daughter receive in any way. Your consent does not oblige you to take part in the research.

**What will happen to me if I take part?**

If you decide to take part you will be given this information sheet to keep and be asked to sign a consent form. This will give your consent for a researcher from the School of Sport, Exercise and Health Sciences Society at the Loughborough University to contact you to invite you for an interview. With your permission, this interview will be tape-recorded and will last about 45 minutes. All the data gathered will be confidential and you will never be identifiable in the final work. The researcher will also observe some training sessions during 2013.

**What are the possible disadvantages and risks of taking part?**

There are no disadvantages or risks foreseen in taking part in the study.

**What are the possible benefits of my son/daughter taking part?**

The potential benefits could be a degree of greater reflection upon athletic lifestyles and health benefits (or not) related to practicing gymnastics.

**What if something goes wrong?**

If you wish to complain or have any concerns about any aspect of the way you have been approached or treated during the course of this study, please contact Secretary to Ethics Approvals (Human Participants) Sub-Committee: Zoe Stockdale, Research Office, Room 2.01 Rutland Building, "z.c.stockdale@lboro.ac.uk", +44 (0)1509 222423.
Will my taking part in the study be kept confidential?

All information which is collected about you during the course of the research will be kept strictly confidential so that only the researcher carrying out the investigation and his academic supervisor will have access to such information.

What will happen to the results of the research study?

The results will be written up into a final work. It is hoped that the findings may help to understand how Portuguese artistic gymnastics athletes manage to frustrations and joys, and respond to and manage pain and injury. Individuals who participate will not be identified in any subsequent report or publication.

Who is organising and funding the research?

The researcher with the help of his academic supervisor organizes the research. It is funded by the Portuguese Fundação para a Ciência e a Tecnologia (Foundation for Science and Technology).

Who may I contact for further information?

If you would like more information about the research before you decide whether or not to allow you son/daughter to take part, please contact:

Nuno Pimenta
Mobile +351934331101
Email n.pimenta@lboro.ac.uk

Thank you for your interest in this research