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Exploring the mental health and wellbeing of professional academy footballers in England

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ABSTRACT

The mental health and wellbeing of elite footballers is beginning to receive much needed attention in research and practice terms. However, to date much of the knowledge generated and initiatives designed to improve provision for elite footballers' mental health and wellbeing is centred on adults. The mental health and wellbeing of junior footballers attached to elite development programmes have largely been over-looked. In England, this is particularly concerning given an estimated 12,500 young professional academy footballers are attached to such systems. Semi structured interviews were conducted to explore the extent to which social ties and interactions with significant others shaped the mental health and wellbeing of twelve professional academy footballers based in four category one football academies in England . Drawing on concepts derieved from symbolic interactionism, the analysis of the findings highlighted; i) the demands and expectations of their role often negatively affected emotions, ii) concealment of mental health and wellbeing issues to significant others in primary and secondary social networks, and ii) portrayals of the self-intended to foster positive relations with significant others to avoid stigmatization. Future research and practice should seek to inform and promote more effective interventions and models that more adequately support the mental health and wellbeing of professional academy footballers.

Introduction

The intention of this paper is to explore the extent to which the mental health and wellbeing of elite professional academy junior and youth footballers' are influenced by the social relations and interactions with significant others. Whilst some research points to the positive mental health benefits of elite sport participation,[1] other works have identified extraordinary stressors experienced by elite athletes which elicit signs of anxiety, depression and distress.[2] Burgeoning research in this area has suggested that mental health issues among elite athletes[3] and specifically footballers[4] are common. For young elite athletes, psychological stress, anxiety of competition, disruption to family life, demanding schedules, physical exhaustion and abusive relationships with coaches are just some of the challenges faced which impact on their mental health and wellbeing.[5] In addition, living away from home,[6] experiencing and coping with injury,[7] sports related stress[8] or over emphasis on training,[9] and the loss of athletic identity[10] have also been identified as risk factors compromising athlete mental health and wellbeing. This burgeoning body of research has been complemented by several initiatives developed to raise awareness of and improve the provision and practice for elite

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athlete mental health and wellbeing. Yet this research, policy and practice mental health and wellbeing agenda on elite sport has been centred mainly on adult populations and to date has largely failed to consider the unique demands and challenges faced by junior school age athletes participating in specialized elite talent development pathways and programmes. This is concerning, as it has been suggested that the genesis of many mental illnesses in adolescence and adulthood are recognized as occurring during this critical junior to adolescent transitional period.[11] As such, there is a clear need for research, which pays greater attention to the mental health and wellbeing needs of children and young people participating in elite youth sport contexts. In order to somewhat redress this gap in research, we focus our attention on 12 young elite footballers participating in an English professional football category one academy talent development programme to explore how their experiences and interactions with significant others influence their mental health and wellbeing.

Academy football, mental health and wellbeing

Much research which has been conducted on or with elite child footballers has, for the most part, focused upon tactical performance,[12] improved athletic expertise[13] talent identification and optimal development systems and environments,[14] psychological support,[15] mental toughness, and recovering from and prevention of injury.[16] The primary aim of this body of research is focused on supporting the development and/or analysis of performance with little attention so far thus afforded to mental health and well-being in professional football academy settings.[17] This underscores a perception of children who engage in elite sport primarily as athletes and secondarily as children.[18]

Throughout the academy journey professional academy footballers will encounter other experiences and interactions that could potentially threaten their mental health and wellbeing. For example, non-normative transitions (i.e. transitions such as the prevention of play due to de-selection or injury) which are often unforeseen and unplanned for and evoke a combination of negative thoughts and emotions.[19] Involuntary curtailment of involvement in their sport can expose young elite footballers to feelings of anger, depression and anxiety, whilst fuelling a drop in confidence and self-respect.[20] De-selection has been found to put academy players 'at risk' of becoming psychologically depressed on a clinical level.[21] Through a strong attachment to their sport professional academy footballers may form what has been acknowledged as an 'athletic identity'.[22] A loss of athletic identify can occur when involuntary curtailment sport, which is deleterious to mental health and wellbeing in former adult professional footballers.[23] The threat and realization of de-selection from academy football can lead to feeling that aspects of the self are lost.[24] Academy footballers are also in competition with fellow players for a place in the squad the same development programme, meaning they often fail to develop 'deep' friendships as the relationships and interactions they experience are devoid of trust and emotional intimacy. In particular, competition with other players negatively impacts on friendship-building within the academy and hinders the development of meaningful close friendships with teammates.[25]

Fairly recent developments in the provision for professional academy footballers in England include the introduction of the Elite Player Performance Plan (EPPP).[26] This has further embedded an early specialization approach to youth and junior football development, which has exacerbated and intensified training and playing time demands for professional academy footballers amid greater scrutinization of performance from coaches.[27] Typically, professional academy footballers aged between 9 and 16 years participating in a category one academy development programme engage in 12h of weekly training on top of matches and travel.[28] Whilst the central thrust of the EPPP is the development of footballing ability, greater emphasis on welfare and holistic support of professional academy footballers is also stipulated.[29] Yet, elite young athletes who experience mental disorders tend not to seek help due to a lack of mental health literacy, negative past experiences of help-seeking and fears of being stigmatized.[30] This suggests even if mental health

and wellbeing support is available, it is unlikely young elite athletes, such as professional academy footballers referring themselves to such provision is likely uncommon.

As such, the complex relationships and interactions in the context of professional football academies appear to have implications for the mental health and wellbeing of professional academy footballers, which are poorly understood. In order to begin to address this lacunae, the following research questions were developed to interpret how and in what ways the mental health and wellbeing of professional academy footballers may be shaped by; 1) Responding to the perceived demands and expectations of the role of a professional academy footballer, 2) The experiences and management of social interactions with significant others within the academy environment, and 3) How and in what ways social interactions influenced identity construction and management as professional academy footballers.

Heuristic framework

In order to understand how and why the relationships and interactions experienced by professional academy footballers shaped their mental health and wellbeing, we drew on concepts developed from the theoretical perspective of symbolic interactionism. In particular, the concepts of mind self and society, presentation of self, and stigma developed by Mead and Goffman and Thoits' development and application of 'social ties'. Meads[31] concept of mind, self and society allowed us to examine how professional academy footballers perceived others and interpreted their own experiences and behaviours within the academy setting. In order to comprehend players' interactions within the culture of a professional football academy, Goffman's[32] dramaturgical society was drawn upon. The behaviours exhibited by professional academy footballers explored a portrayal of the 'self', shaped largely by perceptions of those in power. Goffman's analogy enabled us to gain an understanding of how professional academy footballers sought to represent themselves in and through the social interactions between other professional academy footballers, their parents and coaches.

Related to the presentation of the self is identity management considered important in shaping mental health and wellbeing of elite athletes.[33] This allowed us to explore the extent to which professional academy footballers sought to manage their athletic identity whilst considering how this masks the authentic self. Here, Goffman's[34] work relating to stigma allowed us to explore the extent to which professional academy footballers sought to present selves that concealed or revealed perceived undesirable and invisible imperfections, such as negative mental health and wellbeing. Thoits'[35] work on mechanisms which link health outcomes with social ties helped us infer how social interactions and various forms of social support may shape mental health and well-being. Whilst the positive effects of social ties on mental health is illustrated, Thoits also suggests a 'darker side' of social life exists when social relationships 'can be tense, conflicted, or overly demanding, namely, sources of stress and strain rather than benefit'.[36] The effects of interactions with social ties can occur through 'primary groups'; defined as being informal and fairly small in size such as nuclear family and friends, and secondary groups, ties that are more formal in nature based on hierarchical positions within a group, such as in an academy setting. A sense of acceptance by a group contributes to positive mental health but being overly obsessed with conforming to rules and regulations could have an adverse effect.[37] Using these concepts as a heuristic framework allowed us to interpret how and in what ways the social interactions and relationships experienced by professional academy footballers shaped their mental health and wellbeing.

Methods

Given the intentions of this study to understand the perspectives of end users (professional academy footballers) within professional football academies, a qualitative methodology underpinned by an interpretivist epistemology was adopted. Twelve professional academy footballers (children and adolescents) were interviewed. The exploratory nature of a semi-structured interview allowed the

researcher to gain an insight into how participants variously interpreted and experienced social interactions with significant others in the academy setting, and explore the thoughts and feelings evoked from such interactions and actions.[38] Each was a member of a category one professional football academy in the north of England at the end of 2016/2017 season.

Professional football academies have traditionally been noted as 'closed shops' to outsiders.[39] However, as a parent of a professional academy footballer the first author had access to participants and was able to develop the sample using a snowball approach[40] by drawing on friendships with other parents who recommended other potential parents of academy footballers willing to allow their child to take part. Following institutional ethical approval, which drew upon the 'Ethical Guidance for Undertaking Research with Children and Young People' document, contact was made with all participants initially through their parents or guardians. Participant information sheets and consent forms were provided to parents and children, which detailed the topics to be discussed, particularly highlighting that whilst the mental health and wellbeing aspects of the research were the focus of analysis, questions asked of the children would be centred on how they experienced their interactions and relationships in relation to the 'self'. Permission was granted by a gatekeeper (parent) for each child interviewed. Subsequently, 12 participants agreed to take part in the study. Interviews were held at the family homes of the young footballers at a time convenient for themselves and their parents. The author conducted the interviews with each lasting between 30 and 44 minutes. To further comply with institutional ethics procedures in conducting research with children and young people, a parent remained in proximity to the child but not in ways they could interfere with or overhear the interview.[41] Parents remained in the home for the duration of the interview and waited in a location visible to the researcher and participant close to where the interviews were being conducted, but where they could not overhear any dialogue.

Table 1. Sample of professional academy footballers.

Participant	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12
Gender	M	M	M	M	M	M	M	M	M	M	M	M
Age	12	11	14	9	9	12	12	14	13	10	15	12
Years in role	4	4	6	1	1	4	4	6	5	2	7	4
Academy Category	1	3	1	3	1	1	1	1	1	1	1	1

Undertaking semi-structured interviews offered the participants' autonomy in relation to the responses they gave by allowing them to elaborate. This was achieved by providing statements and cues relating to the participants experiences of interactions in the academy setting with rather than direct questioning. This enriched the data, as it allowed each participant to provide an in-depth account of their personal experiences.[42] Through the pre-interview section the researcher reassured the participants of confidentiality and anonymity (particularly as they were children) so the participants felt comfortable to speak openly and honestly. The interviews explored the lived experiences their daily role, their interactions and relationships attached to the professional academy settings and how these impacted on their thoughts and feelings.

The interviews were transcribed verbatim and analysed utilizing the principles of thematic analysis to identify meaning units, codes and themes.[43] The meaning units were the raw quotes, lifted from the transcripts, which had a similar meaning and were coded based upon their significance in relation to the key research questions or their relevance to the concepts from the heuristic framework. Following this, the units were placed in a hierarchical structure, which worked to identify codes. Following a review of relevant literature, it was possible to develop related analytic codes,[44] which emerged as 'perceptions of others', 'uncertainty of status' and 'normalization of overtraining' Subsequently these codes were organized into sub-categories through the amalgamation of related codes.[45] These materialized as 'commitment', 'playing with injury', 'relationships

with parents' and 'reluctance to disclose'. The sub-categories were then amalgamated to create the themes, which are the focus for the analysis and interpretation for this research,[46] identified as (1) performing to perceived demands and expectations of professional academy footballers, (2) uncertainty and avoiding sanctions from parents and coaches, and (3) identity management.

Results and discussion

The perceived demands of professional academy football and sacrificing the self

For all participants, the decision to enrol at a professional football academy was initially a parental one, however, all soon committed fully to academy schedules and believed this necessary in order to make adequate progress. Although the demands of the academy schedules were found to be a stressor, all participants articulated displaying and maintaining attitudes and behaviours towards a high level of commitment in order to retain their position in the academy. Many felt as though they were sacrificing other aspects of their lives:

> Yes my childhood - That could be my career so I have to put full commitment into that first then maybe think about friends and family ... getting up to the age of 18 it's a big step and I have to show I have full concentration on football. It is so hard but it could be worth it. (P1, aged 12).

All participants believed that non-attendance would be viewed in a negative light by academy staff. Although none of the participants were told explicitly that they would be de-selected or released as a result of occasional non-attendance, nine out of twelve believed or feared that this would affect their position within the academy. The following statements are indicative of this perception:

> I feel that it would be seen as a bit undedicated to be honest I don't think that they would like it if you missed a training session for something else ... they might just say at the time 'oh it's fine' but then when it comes to the decision of a scholar or something like that then they will probably say well this player has never missed a session and this one is missing sessions for things then they will probably go with the one who is more dedicated. I couldn't face worrying about that so I always turn up. (P8, aged 14).

> They would probably release me ... it was big to turn up to training they always talked about attendance and stuff ... like you become a better player if you turn up to all the sessions and they shout at players who choose other things which is not nice. (P9, aged 14)

As found in other studies, demanding training schedules put elite athletes at risk of overexertion which can result in prolonged periods of physical and mental fatigue[47] and increased levels of stress have also been found as a by product of engagement in overtraining.[48] Within the data, it emerged that the participants feel the strain of their schedules and often feel tired or overexerted:

> To be honest you never really feel 100% because our training schedule is so much. You have to look like you want to be there. I wouldn't show that I am tired. I would try to look more awake and try to concentrate a bit more so that they think that I am up for it, but it does stress you out you're worried they [coaches] will pick up on it. (P6, aged 12).

Despite often feeling fatigued, the participants felt the need to display adherence to the demands of the weekly training schedule. It is clear the participants found the physical demands challenging and some attempted to conceal their feelings in order to present a favourable representation of their selves. The participants attempted to portray a representation of themselves that they felt conducive in willingly conforming to unwritten rules and expected behaviour. These front-stage performances masked backstage feelings and emotions. Whilst none of the participants suggested they had experienced mental disorders, Thoits[49] suggests situational demands can trigger mental disorders due to perceived challenges and threats originating outside of the control of the person.

Adherence to the demanding schedule unsurprisingly had costs for 10 of the 12 participants in the restriction of social time. Despite wanting to socialize 10 out of 12 participants confirmed that they would always attend training over a social event as they were not prepared to jeopardize their

position within the academy in any way to present themselves to coaches as dedicated. For these professional academy footballers, the separation of football and social life is challenging:

> When you do not have football and your mates ask you to go out you want to go but you know it's not right to go because you have to rest, it does make you feel sad. (P3, aged 14).

> I would miss the party and prepare well – sleep and eat well. If I attended (the party) I would feel really guilty. If I had a bad game the next day I would know why. (P7, aged 12).

Indeed, it was also common for the participants to suggest that social sacrifices being made were compounded by attempts to distinguish themselves and their outward displays of commitment to their role and demands required of them with reference to fellow footballers.[50]

> P8 [aged 14] – "My friendships are not great because I am not really close with anyone. In the team we are not that friendly because we are in competition for the scholarships and my mates near mine don't invite me to much anymore because I never play out because of footy.

Here, the desires to have meaningful social ties within and beyond the academy setting are compromised. A lack of time spent engaging in meaningful social activities and the underdevelopment of companionship can lead to loneliness, depression and anxiety and a disequilibrium between desires and achievements can occur, which can have deleterious effects on mental health.[51]

Out of the preparedness to conform to what they believe are the expectations within the academy setting, playing with injury also emerged as a common behaviour. As a result of the determined focus on maintaining a position within the academy, players tended to mask injuries. When asked if he had continued to play whilst in pain P3 [aged 14], responded:

> All the time but you try not to show that you are injured because the physio will keep you from training. Thoughts come into your brain like that maybe you can't play for a long time, I would be devastated . . . I would be conscious of what they (coach) thought. I don't tell anyone unless it'll affect me in the long run.

Indeed, many of the participants were concerned with how being reluctant or refusing to play because of pain and injury would be interpreted by their parents and coaches. For example, P7 [aged 12], stated:

> There are a couple of people (Other players) who complain and you can tell the coach gets annoyed . . . and they (coaches) say jokes like "oh are you injured again?" but you know it's not a joke, so you just carry on so that you're not seen as negative really. I do play in pain because it shows mental strength, that's what they want to see.

Playing with and concealing pain and injury and to risk further injury whilst presenting mentally tough selves was explained by the participants as a necessity in order to avoid de-selection or release from the academy:

> P1 [aged 12] – I carried on until the end when I got my fractured finger . . . because there was another goalkeeper a trialist there and I wanted them to see that even if I have a knock I can carry on . . . I don't want my place to be taken by someone else so I just don't tell anyone and carry on . . . it's commitment it's - well evenif he has got an injury he can carry on and do it.

It is clear the participants sought to display behaviours consistent with their perceptions of the demands and expectations of significant others within the academy setting to mould the impression they make on others and to stage manage social interactions. Here, our participants attempted to construct convincing, identifiable performances for others. Hence, the self which the participants presented in overt displays of sacrificing social life and playing with injury were versions of themselves aligned with what they perceive is required to reach their goal of becoming a professional footballer. The competitive environment of football work reinforces that players are expendable. Consequently the professional academy footballers in this study feared failure and felt compelled to display behaviours consistent with over commitment in the hope of retaining their place within the academy.[52] Relationships with significant others have been found to shape the

perceptions of elite athletes, and their willingness to conform is born out of the endeavour to maintain positive relations. This is what we turn to next.

Uncertainty and avoiding sanctions from significant others

Parents and coaches are significant in providing emotional support and shaping the experiences and mental health of elite young athletes.[53] Whilst the participants in the study were keen to express that parents were a source of social support,[54] most participants revealed that they received negative feedback from parents on a regular basis when the conversation centred on performances. This usually occurred post game or training.[55] P4 [aged 9] recounted a time when it was thought he didn't play well, stating 'My mum said you didn't look like you were trying your best. It made me feel sad.' On the same topic P4 [aged 9] commented: 'He (father) said well if you're going to do that you're going to have to miss it (football) because my attitude towards it wasn't good so he said I will ban you for a week of football and I was crying in the van.'

A fear of failure was shaped through interactions with primary social ties. For all participants, the perception of performing poorly negatively affected their feelings and emotions.

> After the game you think about what your parents are going to say . . . I don't like that feeling to be honest. It's like you know you have done bad and someone is just going to tell you that you have done bad, and it makes you feel bad about yourself, you don't like feeling as though you have let them down. (P3, aged 14).

Some participants stated that their parents' mood and emotions would also continue to affect their relationship beyond the performance:

> What are they going to say about me, am I going to get told off or will it be constructive criticism? . . . If I have had a brilliant game I would have a lovely weekend and it would be dead nice but if I haven't played well then I know there would be a cloud over the rest of the weekend. Say I had a game on a Saturday then the Saturday wouldn't be (good) . . . say if I am making loads of mistakes and it's not gone very well It'll be a bit of embarrassment. (P1, aged 12).

The extent to which the participants successfully performed to the perceived expectations of role partners such as parents impacts on their self-esteem. Higher levels of self-esteem are associated with feelings of happiness and satisfaction whereas low self-esteem is linked with anxiety and depression.[56] It was clear that the participants were constantly concerned with the negative perceptions from significant others from their primary social ties and the sanctions that may follow.

Many participants had experienced negative feelings connected to the player–coach relationship, an established connection important for emotional well-being.[57] These feelings tended to be associated with uncertainty over coaches' perceptions of player performance. This uncertainty was compounded by a perceived lack of feedback provided to the participants from coaches. Most participants reported feeling frustrated but also anxious and stressed due to a lack of feedback from their coach, as explained by the following two participants.

> You don't know what you need to work on it's annoying . . . you're wondering what they think. You don't feel sure of how you have done . . . their (coaches) head is down and they are shaking their head which shows something that you have done wrong but you're not sure what. You're confidence is gone. (P7, aged 12).

> It is just a guessing game to be honest if I feel I play badly they don't tell me how to improve or where I have gone wrong. If I score they don't even say well done so I am always thinking what do I have to do for them to rate me? (P8, aged 14).

All participants confirmed that they had experienced de-selection for all, or part of a match and they viewed this as a negative experience and as a sanction. Indeed, most participants revealed they felt little or no emotional support was offered from primary or secondary ties when de-selection had been experienced. They were also often uninformed as to why they were deselected, believing it to be performance related. For example, P4, aged 9 stated: 'I would think it was because they don't

want me to play because I haven't been good at training, but no one told me anything and my parents just said I need to try harder.' Such experiences often evoked negative feelings and emotions, as explained by P1 [aged 12]:

> I got kicked out of the team and told that I am not playing . . . he (coach) said I am going to tell your dad now . . . it made me think does he actually think that I can make it? Does he actually think that I am good at what I do? I felt a bit sick because I was worried what my dad would say.

The uncertainty and anxiousness exacerbated feelings of self-doubt, which intensified at the end of the season when decisions are made as to whether players would be retained or released from the academy programme. The fear of being released manifested in psychological distress.[58] Some participants felt uncertain in relation to their place at the academy at this juncture, as P4 [aged 9] explained 'I feel a little bit scared in case I get dropped I get butterflies in my tummy.', and P11, [aged 15] recounted:

> That time of year is horrible . . . there have been times when I felt secure, that I had done enough to retain my place but you never fully know until it happens (retain or release meeting with coaches). You never really know what they think of you. Then there have been times I thought I was definitely going, I was worried sick for weeks but you didn't want to let on, I couldn't concentrate properly on playing or school.

All participants attempted to foster favourable responses from coaches and parents in their interactions, leading many participants to mimic actions and behaviour they believed were desired and required from their primary and secondary social ties. Players created a 'game face' to satisfy to conceal their true feelings and emotions.[59] This is highlighted by P3 [aged 14] when he described his persona on the pitch: 'I think a lot of it now is just showing it (positive reactions) even though you don't feel it, you just show it. It's like acting a bit. Just try and make it look positive, that you are doing what they want you do.' P8, [aged 14] concurred: 'In a session you're always trying to make a good impression in whatever you do especially the things they have told you to do you are trying to catch their eye.'

It was clear when analysing the data that the participants were particularly concerned with avoiding two types of sanction, either disapproval from parents or negative perceptions by coaches (which may lead to de-selection). This led to an appraisal of the self; the 'me' being reflections on the perceptions of others and the 'I' being resulting actions.[60] In these instances, the 'me' is affected negatively which in turn evokes negative emotions. The interactions with others were interpreted by the participants (mind) which informed their actions in a manner believed to be desired (self) within the social setting of the academy (the generalized other). When considering 'the self' the behaviour of the participants within the academy was largely performative.[61] The participants performed a form of 'impression management' behaving in ways they perceived conducive to pleasing significant others rather than displaying behaviours they would engage in by choice. The intention was to evoke positive responses from parents and coaches in order to increase their self-worth, self-efficacy and maintain a position within the academy. Their 'athletic identity' evolves as a result, and some of the issues experienced by professional academy footballers in relation to this are examined next.

Portraying the identity of a professional academy footballer

All participants attached important meaning to their identity as a footballer. Over commitment, social sacrifice and performing whilst injured were behaviours all participants were keen to impress on significant others in their interactions to foster positive relationships with parents and coaches. A common notion was that to be a professional academy footballer held a desirable status, as P3 [aged 14] stated 'It means everything, everyone knows me as a footballer, and I have to keep it that way.' Indeed, the identity of being a professional academy footballer was one that afforded the participants a sense of pride when reinforced by others in their social networks and was a source of positive self-esteem.[62] Key to maintaining this identity, was a perceived obligation to portray mentally tough selves to significant others, as P8 [aged 14] explained:

'To be an academy player you have to show you are tough mentally so even if you are feeling it, you can't let anyone see . . . it's not what they (coaches and other players) want to see.'

The participants also revealed in portraying a mentally tough self, they consistently avoided speaking about thoughts or feelings that they perceived would be interpreted as 'weak' in their interactions with significant others in primary and secondary groups, despite regularly experiencing negative emotions. Consistent with all participants, P6 [aged 12] recounted hiding his emotions:

'You don't want people thinking you're weird or stupid. People would find it amusing if you showed emotions such as crying to the coach or your mum. People give them stick and call them names. So you show them you are tough.'

The professional academy footballers in this study were conscious of stigma attached to discussing mental health and wellbeing challenges within the academy setting and avoided seeking help with emotions and feeling that negatively shaped their wellbeing.[63] Revealing a culture of silence around mental health and wellbeing stigma, consistent with all participants in the study, P7 [aged 12] noted:

'I would not communicate my feelings with any coaches as I would not want them to feel sympathy, nobody does, I mean, you just don't . . . it may be seen as mental weakness and as a footballer you have to be mentally tough.'

One participant was released at the end of the 2016/2017 season following a seven-month period of injury, and whilst he had suffered emotionally, he divulged feeling uncomfortable speaking about it:

'I don't like that much attention I feel better to like keep it inside me . . . I just feel better if I don't (talk) . . . I have not had that many people to talk to so I feel better to keep it inside me . . . I am in a routine of doing it probably.' (P9, aged 13)

The EPPP specifies that the responsibility for player welfare (inclusive of wellbeing) lies with the welfare officer employed by the academy.[64] However, P9 along with seven other participants were unaware of who their designated welfare officers were and communicated never having contact with them. In addition, advice given to professional academy footballers often reinforced stigma in relation to challenges to mental health. Two participants revealed that they had intermittent contact with a sports psychologist in the form of attending workshops. The information the participants received tended to encourage the concealment or self-management of emotions, strategies designed to enhance performance. P6 [aged 12] recounted information he had received in a session:

The psychologist says stay positive and don't let your feelings get hold of you, she says don't let your feelings take over your body if you feel sad you don't want to show it because you would focus on that in a game and you could become conscious of people seeing it and it would affect your game.

Contrastingly other participants revealed the introduction of a designated mentor, who had no responsibility for performance development and with whom they are encouraged to talk about their thoughts and feelings.[65] Each of the participants signed to this academy described this as positive and appreciated the opportunity to speak openly and confidentially. In line with Goffman's[66] analogy of backstage and front stage settings the participants tended to conceal their emotions and behaviours when front stage, that is, when interacting with coaches and fellow academy players, whereas backstage, they were more willing and able to be open.

It is clear from the data that the participants constructed and managed a footballing identity, which they performed for social audiences.[67] With the aim of avoiding stigmatization professional academy footballers chose to conceal their emotions and present a version of themselves as mentally tough around significant others. Likened to Goffman's[68] conceptualization of 'total institutional life', football clubs (and especially the experiences of professional academy footballers) are often shaped by a variety of 'encompassing tendencies', which collectively combine to form a highly enclosed and structured existence. Such an environment may serve to cultivate narrow identities, as sporting performances become central to the athletes' lives restricting alternative roles or interests that help facilitate

a differing sense of 'self'. Here, the development of a strong focus on one, all-encompassing footballing identity, could have deleterious effects on the self[69] on mental health and wellbeing.

Conclusion

The aim of this study was to illicit an understanding of the how the interactions and relationships experienced by professional academy footballers shaped their mental health and wellbeing. The professional academy footballers in this study identified positive aspects such as a sense of achievement and heightened status. This suggested that their identity along with their social status as an academy player may offer a means of protection for their mental health and wellbeing.[70] However, the data which emerged indicated that the actions and behaviours professional academy footballers engaged in largely to protect their identity as a footballer are not conducive to the maintenance of mental health and wellbeing. Whilst no professional academy footballers alluded directly to mental health problems, they each encountered various challenges related to the maintenance of positive mental health and wellbeing, and the demands and expectations of the role often negatively affected them on an emotional level. It was found that professional academy footballers are predominantly concerned with the perceptions of significant others in their primary and secondary social network groups. Stressors are further exacerbated by the precarious nature of their environment and the present a certain and often inauthentic 'self'[71] in the hope of securing annual retention. Professional academy footballers are expected to self-manage an array of emotions whilst embarking on this endeavour; consequently, their mental health and wellbeing is threatened[72] whilst provisions to support them are scarce.

It is acknowledged that this study is limited in making generalizations given only 12 out of an estimated 12,500 academy players aged between 9 and 16 signed to professional football academies across England[73] were involved in the study. However, the idiosyncrasies in the data, and our conceptual examination of them, offer significant insights into the thoughts, feelings and emotions experienced by professional academy footballers, along with the subsequent actions and behaviours they chose to portray in choosing not to reveal and conceal, which can compromise mental health and wellbeing. Closer examination of and support for the mental health and wellbeing of junior elite footballers contracted to development programmes must be considered by stakeholders in football academies and policymakers in football authorities. Whilst the focus on the mental health of professional footballers is gaining momentum, there is a decided lack of attention on the mental health of child and adolescent academy footballers. Calls for further research (both epidemiological and intervention based)[74] are echoed here, that inform strategies centred on the mental health and wellbeing needs of professional academy footballers. Whilst the inclusion of chaplains and other mentors appointed to provide care for the wellbeing of professional academy footballers[75] are to be welcomed, the requirements and stipulations in the EPPP may not go far enough. Steps must be taken towards the construction of models for the management and care of professional academy footballers. As children and adolescents involved in academy football are in a subordinate position to adults, academy staff have an obligation to safeguard the mental health and wellbeing of professional academy footballers as part of a wider duty to care.[76] Evidence from this research is of use in the laying of foundations for professional football academies to build a working strategy for prevention and intervention. This should include the implementation of mental health screening alongside physical screening. In association with mental health professionals, academies must work to ensure that they effectively propagate information among the support networks of professional academy footballers. Coaching staff and families must be educated to understand related risks and should work to encourage open and honest dialogue to address the culture of silence and stigmatization associated with mental health and wellbeing. The formulation and enactment of future elite football development programmes and policies must aim to ensure that effective provision for mental healthcare commonplace in professional football academies.

Notes

1. Roderick and Gibbons, 'To thine own self be true'; and Swann et al., 'Youth Sport as a Context'.
2. Foskett and Longstaff, 'The Mental Health of Elite Athletes'.
3. Rice et al., 'The Mental Health of Elite Athletes'; and Hagiwara et al., 'Relationships among Sports Helplessness, Depression, and Social Support'.
4. Gouttebarge et al., 'Symptoms of Common Mental Disorders'.
5. Ibid; Hill et al., 'Examining the Role of Mental Health and Clinical Issues'; Rice et al., 'The Mental Health of Elite Athletes'; and Roderick and Gibbons, 'To Thine Own Self be True'.
6. Gulliver et al., 'Barriers and Facilitators'.
7. Williams et al., 'Prevalence of Non-Functional Overreaching'.
8. Gustafsson et al., 'Fear of Failure, Psychological Stress, and Burnout among Adolescent Athletes'.
9. Harwood et al., 'Parental Stressors'.
10. Bauman, 'The Stigma of Mental Health in Athletes'.
11. Hill et al., 'Examining the Role of Mental Health and Clinical Issues'.
12. Memmert et al., 'Current Approaches to Tactical Performance Analyses'.
13. Kelly et al., 'Developing a Football-Specific Talent Identification'; Sarmento et al., 'Talent Identification and Development'.
14. Mills et al., 'Identifying Factors Perceived to Influence'.
15. Nesti and Sulley, *Youth Development in Football.*
16. Johnson et al., 'Growing pains'.
17. Mills et al., 'Identifying Factors Perceived'.
18. Donnelly, 'Child Labour, Sport Labour'.
19. Richardson et al., 'Developing Support Mechanisms for Elite Young Players'.
20. Alfermann, 'Causes and Consequences of Sport Career Termination'.
21. Blakelock et al., 'Psychological Distress in Elite Adolescent Soccer Players'.
22. Champ et al.. 'Supporting Identity Development'.
23. Sanders and Stevinson. 'Associations between Retirement Reasons'.
24. Brown and Potrac, '"You've not Made the Grade, Son"'.
25. Adams and Carr, 'Football Friends'.
26. Premier League, 'Elite Player Performance Plan'.
27. Noon et al., 'Perceptions of Well-Being and Physical Performance '; and O'Gorman et al., 'Translation, Intensification and Fabrication'.
28. Premier League, 'Elite Player Performance Plan'.
29. Roe and Parker, 'Sport, Chaplaincy and Holistic Support'.
30. Gulliver et al., 'Barriers and Facilitators'.
31. Mead, 'Mind, Self and Society'.
32. Goffman, 'The Presentation of the Self in Everyday Life'.
33. Hickey and Roderick. 'The Presentation of Possible Selves'.
34. Goffman, 'Stigma'.
35. Thoits, 'Mechanisms Linking Social Tie'.
36. Ibid., 374.
37. Ibid.
38. Bryman, *Social Research Methods.*
39. Parker, 'Chasing the "Big-Time"'.
40. Atkinson and Flint, 'Accessing Hidden and Hard-to-Reach Populations'.
41. Greig et al., 'Doing Research with Children'.
42. Cohen et al., 'Research Methods in Education'.
43. Guest, 'Applied Thematic Analysis'.
44. Rivas, 'Coding and Analysing Qualitative Data'.
45. Ibid.
46. Ibid.
47. Williams et al., 'Prevalence of Non-Functional Overreaching'; and Thompson et al., 'Understanding the Presence of Mental Fatigue'.
48. Noon et al., 'Perceptions of Well-Being and Physical Performance'.
49. Thoits, 'Mechanisms Linking Social Ties'.
50. Adams and Carr, 'Football Friends'.
51. Thoits, 'Mechanisms Linking Social Ties'.
52. Sagar et al., 'Success and Failure, Fear Of Failure'.
53. Knight et al., 'Parenting in Sport'; and Swann et al., 'Youth Sport as a Context'.
54. Hill et al., 'Examining the Role of Mental Health and Clinical Issues'.

55. Tamminen et al., 'The Car Ride Home'.
56. Thoits, 'Mechanisms Linking Social Ties'.
57. Swann et al., 'Youth Sport as a Contex'.
58. Blakelock et al., 'Psychological Distress in Elite Adolescent'.
59. Ong et al., 'The Boy Behind the Bravado'.
60. Mead, 'Mind, Self and Society'.
61. Goffman, 'The Presentation of the Self in Everyday Life'.
62. Thoits, 'Mechanisms Linking Social Ties'.
63. Bauman, 'The Stigma of Mental Health in Athletes'.
64. Premier League, 'Elite Player Performance Plan'.
65. Roe and Parker, 'Sport, Chaplaincy and Holistic Support'.
66. Goffman, 'The Presentation of the Self in Everyday Life'.
67. Hickey and Roderick, 'The Presentation of Possible Selves'.
68. Goffman, 'Asylums'.
69. Brown and Potrac, 'You've not Made the Grade, Son'.
70. Hill et al., 'Examining the Role of Mental Health and Clinical Issues'.
71. Goffman, 'The Presentation of the Self in Everyday Life'.
72. Roderick and Gibbons, 'To Thine Own Self be True'.
73. BBC Sport Football, 'Football Talent Spotting'.
74. Hill et al., 'Examining the Role of Mental Health and Clinical Issues'.
75. Roe and Parker, 'Sport, Chaplaincy and Holistic Support'.
76. Ibid; and Cronin et al., 'The Challenge to Care in a Premier League Football Club'.

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Bibliography

Adams, A., and S. Carr. 'Football Friends: Adolescent Boys' Friendships inside an English Professional Football (Soccer) Academy.' *Soccer & Society* 20, no. 3 (2019): 471–493. doi:10.1080/14660970.2017.1331164.

Alfermann, D. 'Causes and Consequences of Sport Career Termination.' In *Career Transitions in Sport: International Perspectives*, ed. D. Lavallee and P. Wylleman, 49–58. Morgantown, WV: Fitness Information Technology, 2004.

Atkinson, R., and J. Flint. 'Accessing Hidden and Hard-to-reach Populations: Snowball Research Strategies.' *Social Research Update* 33, no. 1 (2001): 1–4.

Bauman, N.J. 'The Stigma of Mental Health in Athletes: Are Mental Toughness and Mental Health Seen as Contradictory in Elite Sport?' *British Journal of Sports Medicine* 50 (2016): 135. doi:10.1136/bjsports-2015-095570.

BBC Sport Football. 'Football Talent Spotting: Are Clubs Getting It Wrong with Kids?' (2015) [online]. http://www.bbc.co.uk/sport/football/35054310 (accessed May 5, 2018).

Blakelock, D.J., M.A. Chen, and T. Prescott. 'Psychological Distress in Elite Adolescent Soccer Players following Deselection.' *Journal of Clinical Sport Psychology* 10, no. 1 (2019): 59–77. doi:10.1123/jcsp.2015-0010.

Brown, G., and P. Potrac. '"You've Not Made the Grade, Son"': De-selection and Identity Disruption in Elite Level Youth Football.' *Soccer & Society* 10, no. 2 (2009): 143–159. doi:10.1080/14660970802601613.

Bryman, A. *Social Research Methods*. Oxford: Oxford university Press, 2016.

Champ, F.M., N.J. Ronkainen, M.A. Littlewood, and M. Eubank. 'Supporting Identity Development in Talented Youth Athletes: Insights from Existential and Cultural Psychological Approaches.' *Journal of Sport Psychology in Action* 11, no. 4 (2020): 219–232. doi:10.1080/21520704.2020.1825027.

Cohen, L., L. Manion, and K. Morrison. *Research Methods in Education*. London: Routledge, 2017.

Cronin, C., Z.R. Knowles, and K. Enright. 'The Challenge to Care in a Premier League Football Club.' *Sports Coaching Review* 9, no. 2 (2020): 123–146. doi:10.1080/21640629.2019.1578593.

Donnelly, P. 'Child Labour, Sport Labour: Applying Child Labour Laws to Sport.' *International Review for the Sociology of Sport* 32, no. 4 (1997): 389–406. doi:10.1177/101269097032004004.

Foskett, R.L., and F. Longstaff. 'The Mental Health of Elite Athletes in the United Kingdom.' *Journal of Science and Medicine in Sport* 21, no. 8 (2018): 765–770. doi:10.1016/j.jsams.2017.11.016.

Goffman, E. *The Presentation of the Self in Everyday Life*. London: Pelican, 1959.

Goffman, E. *Asylums*. New York: Anchor Books, 1961.

Goffman, E. *Stigma: Notes on the Management of Spoiled Identity*. Harmondsworth: Penguin Books, 1963.

Gouttebarge, V., F. Backx, H. Aoki, and G. Kerkhoffs. 'Symptoms of Common Mental Disorders in Professional Football (Soccer) across Five European Countries.' *Journal of Sports Science & Medicine* 14, no. 4 (2015): 811–818.

Greig, A.D., J. Taylor, and T. MacKay. *Doing Research with Children: A Practical Guide*. London: Sage, 2012.

Guest, G. *Applied Thematic Analysis*. London: Sage, 2012.

Gulliver, A., K.M. Griffiths, and H. Christensen. 'Barriers and Facilitators to Mental Health Help-seeking for Young Elite Athletes: A Qualitative Study.' *BMC Psychiatry* 12, no. 1 (2012): 1–14. doi:10.1186/1471-244X-12-157.

Gustafsson, H., S.S. Sagar, and A. Stenling. 'Fear of Failure, Psychological Stress, and Burnout among Adolescent Athletes Competing in High Level Sport.' *Scandinavian Journal of Medicine & Science in Sports* 27, no. 12 (2017): 2091–2102. doi:10.1111/sms.12797.

Hagiwara, G., T. Iwatsuki, H. Isogai, J.L. Van Raalte, and B.W. Brewer. 'Relationships among Sports Helplessness, Depression, and Social Support in American College Student-athletes.' *Journal of Physical Education and Sport* 17, no. 2 (2017): 753–757.

Harwood, C., A. Drew, and C.J. Knight. 'Parental Stressors in Professional Youth Football Academies: A Qualitative Investigation of Specialising Stage Parents.' *Qualitative Research in Sport and Exercise* 2, no. 1 (2010): 39–55. doi:10.1080/19398440903510152.

Hickey, C., and M. Roderick. 'The Presentation of Possible Selves in Everyday Life: The Management of Identity among Transitioning Professional Athletes.' *Sociology of Sport Journal* 34, no. 3 (2017): 270–280. doi:10.1123/ssj.2017-0018.

Hill, A., Á. MacNamara, D. Collins, and S. Rodgers. 'Examining the Role of Mental Health and Clinical Issues within Talent Development.' *Frontiers in Psychology* 6 (2016): 2042. doi:10.3389/fpsyg.2015.02042.

Johnson, D.M., S. Williams, B. Bradley, S. Sayer, J.M. Fisher, and S. Cumming. 'Growing Pains: Maturity Associated Variation in Injury Risk in Academy Football.' *European Journal of Sport Science* 20, no. 4 (2020): 544–552. doi:10.1080/17461391.2019.1633416.

Kelly, A.L., C.A. Williams, and M. Wilson. 'Developing a Football-specific Talent Identification and Development Profiling Concept – The Locking Wheel Nut Model.' *Applied Coaching Research Journal* 2 (2018): 32–41.

Knight, C.J., S.R. Berrow, and C. Harwood. 'Parenting in Sport.' *Current Opinion in Psychology* 16 (2017): 93–97. doi:10.1016/j.copsyc.2017.03.011.

Mead, G.H. *Mind, Self and Society*. Chicago: University of Chicago Press, 1967.

Memmert, D., K. Lemmink, and J. Sampaio. 'Current Approaches to Tactical Performance Analyses in Soccer Using Position Data.' *Sports Medicine* 47, no. 1 (2017): 1–10. doi:10.1007/s40279-016-0562-5.

Mills, A., J. Butt, I. Maynard, and C. Harwood. 'Identifying Factors Perceived to Influence the Development of Elite Youth Football Academy Players.' *Journal of Sports Sciences* 30, no. 15 (2012): 1593–1604. doi:10.1080/02640414.2012.710753.

Nesti, M., and C. Sulley. *Youth Development in Football: Lessons from the World's Best Academies*. London: Routledge, 2014.

Noon, M.R., R.S. James, N.D. Clarke, I. Akubat, and C. Douglas Thake. 'Perceptions of Well-being and Physical Performance in English Elite Youth Footballers across a Season.' *Journal of Sports Sciences* 33, no. 20 (2015): 2106–2115. doi:10.1080/02640414.2015.1081393.

O'Gorman, J., M. Partington, P. Potrac, and L. Nelson. 'Translation, Intensification and Fabrication: Professional Football Academy Coaches' Enactment of the Elite Player Performance Plan.' *Sport, Education and Society* 26, no. 3 (2021): 309–325. doi:10.1080/13573322.2020.1726313.

Ong, C.W., P. McGregor, and C. Daley '"The Boy behind the Bravado": Player Advanced Safety and Support in a Professional Football Academy Setting.' *Sport and Exercise Psychology Review* 14, no. 1 (2018): 1–30.

Parker, A. 'Chasing the "Big-time": Football Apprenticeship in the 1990s'. Unpublished Ph.D. thesis, University of Warwick, 1996.

Premier League. *Elite Player Performance Plan*. London, 2011.

Rice, S.M., R. Purcell, S. De Silva, D. Mawren, P.D. McGorry, and A.G. Parker. 'The Mental Health of Elite Athletes: A Narrative Systematic Review.' *Sports Medicine* 46, no. 9 (2016): 1333–1353. doi:10.1007/s40279-016-0492-2.

Richardson, D., D. Gilbourne, and M. Littlewood. 'Developing Support Mechanisms for Elite Young Players in a Professional Soccer Academy: Creative Reflections in Action Research.' *European Sport Management Quarterly* 4, no. 4 (2004): 195–214. doi:10.1080/16184740408737477.

Rivas, C. 'Coding and Analysing Qualitative Data.' In *Researching Society and Culture*, ed. C. Seale, 367–392. California: Sage, 2011.

Roderick, M., and B. Gibbons. 'To Thine Own Self Be True.' In *Health and Elite Sport. Is High Performance Sport a Healthy Pursuit*, ed. J. Baker, P. Safai, and J. Fraser-Thomas, 149–162. Oxon: Routledge, 2014.

Roe, C., and A. Parker. 'Sport, Chaplaincy and Holistic Support: The Elite Player Performance Plan (EPPP) in English Professional Football.' *Practical Theology* 9, no. 3 (2016): 169–182. doi:10.1080/1756073X.2016.1221638.

Sagar, S.S., B.K. Busch, and S. Jowett. 'Success and Failure, Fear of Failure, and Coping Responses of Adolescent Academy Football Players.' *Journal of Applied Sport Psychology* 22, no. 2 (2010): 213–230. doi:10.1080/10413201003664962.

Sanders, G., and C. Stevinson. 'Associations between Retirement Reasons, Chronic Pain, Athletic Identity, and Depressive Symptoms among Former Professional Footballers.' *European Journal of Sport Science* 17, no. 10 (2017): 1311–1318. doi:10.1080/17461391.2017.1371795.

Sarmento, H.M., T. Anguera, A. Pereira, and D. Araújo. 'Talent Identification and Development in Male Football: A Systematic Review.' *Sports Medicine* 48, no. 4 (2018): 907–931. doi:10.1007/s40279-017-0851-7.

Swann, C., J. Telenta, G. Draper, S. Liddle, A. Fogarty, D. Hurley, and S. Vella. 'Youth Sport as a Context for Supporting Mental Health: Adolescent Male Perspectives.' *Psychology of Sport and Exercise* 35 (2018): 55–64. doi:10.1016/j.psychsport.2017.11.008.

Tamminen, K.A., Z.A. Poucher, and V. Povilaitis. 'The Car Ride Home: An Interpretive Examination of Parent–athlete Sport Conversations.' *Sport, Exercise, and Performance Psychology* 6, no. 4 (2017): 325. doi:10.1037/spy0000093.

Thoits, P.A. 'Mechanisms Linking Social Ties and Support to Physical and Mental Health.' *Journal of Health and Social Behavior* 52, no. 2 (2011): 145–161. doi:10.1177/0022146510395592.

Thompson, C.J., M. Noon, C. Towlson, J. Perry, A.J. Coutts, L.D. Harper, S. Skorski, M.R. Smith, S. Barrett, and T. Meyer. 'Understanding the Presence of Mental Fatigue in English Academy Soccer Players.' *Journal of Sports Sciences* 38, no. 13 (2020): 1524–1530. doi:10.1080/02640414.2020.1746597.

Williams, C.A., R.J. Winsley, G. Pinho, M. de Ste Croix, R.S. Lloyd, and J.L. Oliver. 'Prevalence of Non-functional Overreaching in Elite Male and Female Youth Academy Football Players.' *Science and Medicine in Football* 1 (2017): 222–228. doi:10.1080/24733938.2017.1336282.