

**Athletes' views on care in coaching:
Perspectives of women footballers in the U.K.**

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Abstract

In recent times, researchers have argued that coaches should develop relationships that are caring and meet the needs of athletes. Yet, the views of athletes themselves are notably absent from this research. In response, this study used interviews to explore the care experiences of 4 case study footballers. Findings demonstrated that; 1) club culture influenced the care that participants received; 2) dialogue was both an enabler of good care, but also a means of disseminating uncaring attitudes; 3) a 'web of care' was provided by individuals other than the coach. These findings provide an original contribution by using the voice of athletes themselves to consider care in coaching.

Keywords: Care, Football, Female, Dialogue, Culture,

Introduction

From a psychological perspective, the work of Jowett and colleagues has long identified that coach-athlete relationships are key to successful coaching (e.g. Jowett, 2007ⁱ). Similarly, from a sociological perspective, it has been argued that social interaction between athletes and coaches are at the heart of the coaching process (e.g. Jones, Armour and Potrac, 2004ⁱⁱ). This emphasis on relationships reflects a view of coaching as a pedagogical task, in which teachers (coaches), learners (athletes) and curriculum (sport) all interact within a given sporting context (Armour, 2011). ⁱⁱⁱRelated to this, it has recently been argued that *care* is a key component of coach-athlete relationships (Cronin & Armour, 2018^{iv}). Such a conclusion is not controversial. Indeed, reflecting the view of coaching as a pedagogical process, it has long been established that coaches have a duty of care, which is akin to that held by teachers. What is new, however, is the view that care in sport coaching has been taken for granted. For example, it has been suggested that care has largely been viewed through a minimum standards approach, which focuses on safety (e.g. risk assessment) and non-malevolence (i.e. not harming) (Cronin & Armour, 2018). While safety and non-malevolence are vital, and should always be pursued, there is a difference between simply not-harming and actually caring. Indeed, the minimum standards approach, while essential, does not consider the relationship between coaches and athletes. This is remiss because Gano-Overway and Guiverneau (2018^v) argue that caring relationships are essential to develop trust, and as a means of helping athletes excel to their full potential. Thus, care in sport coaching is an area that is essential, valuable and yet potentially underappreciated and misunderstood.

To clarify what is meant by care, authors (e.g. Cronin & Armour, 2018) have utilised Noddings (2013^{vi}) care theory. This theory describes two concepts central to caring relationships; engrossment and motivational displacement. The concept of engrossment is where the carer is being attentive and showing an interest in the other. The second concept of motivational displacement occurs when one (the carer) experiences 'motivational displacement' as the carer's energy and actions flow towards serving the needs of the individual being cared for, instead of their own. These concepts require a carer to exhibit empathy to understand the need of the other and compassion to act on the other's behalf.

The engrossment and motivational displacement concepts have been observed in a number of coaching studies. For example, Knust and Fisher (2015, p. 38^{vii}) studied the care provided by Female NCAA Division 1 Head Coaches. Specifically, the coaches considered their team to be “like a family”, suggesting that individuals should care for each other, just like they would their families. In this metaphor, coaches are compared to ‘parents’ who are engrossed in serving the holistic needs of their ‘children’ i.e. athletes. The perspectives of athletes who received this care are not reported however.

With a few exceptions (e.g. Gearity, 2012^{viii}), research on care in sport has rarely included the voice of athletes. This is ironic, because Noddings argues care occurs by listening to the voice of the cared for (i.e. a form of engrossment), and acting on their concerns, motives (i.e. motivational displacement). Yet within much care research, the voice of the coach has dominated (e.g. Jones, 2009^{ix}; Knust and Fisher, 2015; Cronin and Armour, 2018).

Therefore, there is a distinct need to consider how athletes experience care. Indeed, without such work, researchers run the risk of using coaches’ perspectives to decide what constitutes ‘good care’. This may lead to paternalistic and controlling recommendations that effectively disempower athletes by overlooking their unique viewpoint. Related to this, UK Sport (Grey-Thompson, 2017 p.14^x) have recently stressed the importance of gaining the “unique athlete perspectives, which are being overlooked and undervalued”. In response, this study begins to fulfil this gap by reporting the care experiences and preferences of female footballers in the UK.

Why Women’s Football?

Women’s football in the UK appears to be enjoying a relatively positive period of growth. Improved performances by the senior National Team at a recent World Cup, have been accompanied by; 1) the establishment of the Women’s Super League 1; 2) the integration of high profile men’s teams with women’s teams e.g. Manchester United Ladies; and 3) continued increases in participation at grass roots levels. Thus, a new group of young women are beginning to experience professional football structures in the UK. That said, it is important to note that women’s football remains a developing activity. Media coverage, participation and finances continues to be disproportionately small in comparison to male football (Women in Sport, 2015^{xi}). Similarly, coaching experiences are severely restricted in comparison to men’s football (Lewis, Roberts, & Andrews, 2018^{xii}).

On the paying front, Gledhill and Harwood (2015^{xiii}) report that opportunities for careers in women’s football are improving, but remain unstable and scarce because those players that are deemed talented are continuously recruited and in turn are liable to be replaced. The

same researchers have also reported that for those within the game, communication between coaches and players are perceived negatively on topics such as dual careers, player's strengths and weaknesses, and challenges that players may face (Gledhill & Harwood, 2018^{xiv}). Such findings, mirror the experiences of male players who have reported that a footballer's work place is a 'cut throat' environment (Roderick, 2006^{xv}). The cut throat' environment stems from the uncertainty that somebody could come along who is better than you at any time. Players argued that this results in a 'macho' context because individuals in this context put on a "hard front" and therefore an uncaring context is created (Roderick, 2006, p.92). Thus, as women's football begins to develop professional opportunities and mirror the structure of professional men's sport, it is important that any uncaring aspects of men's football are not transported into the women's game. Therefore, this study, which seeks to understand the care experiences of women players, is not only valuable but timely.

Method

Consistent with the aim of this study, the researcher chose to take a qualitative and purposive approach to gather an in depth understanding of player's perceptions of care. Four female footballers were sampled to explore their particular experiences of care. At the time of the interviews, all participants were playing in the Football Association Women's Super League (FAWSL).

INSERT TABLE 1 HERE

To collect data, each participant was interviewed and these ranged from 27 minutes to 48 minutes. The interview schedule was informed by theory from Noddings' (2013) work, including engrossment and motivational displacement. Once complete, interviews, were analysed using Braun and Clarke's (2013)^{xvi} thematic analysis. These themes were then discussed with participants to ensure the following findings were a trustworthy representation of participants' experiences (Smith & McGannon, 2017^{xvii}).

Findings

Three themes were identified across all four participants; 1) club culture influenced the care that participants received; 2) dialogue was both an enabler of good care, but also a means of disseminating uncaring attitudes; 3) a 'web of care' was provided by individuals other than the coach. Each of these themes is discussed below.

Theme 1: Culture and Care

The care experienced by participants was influenced by the social context of their football club and the aspiration to become an 'elite' professional. For instances, participants felt that the 'elite' context required coaches to care by balancing nurturing support and advocacy, with 'challenge':

He could put his arm around your shoulder, but he also knew when to absolutely go berserk at you... looking back it was right to get the best out of me.

he went out of his way to help me ...he'd give me a kick up the arse and tell me how I am too good to stop playing... some might need a kick up the arse but some might just need confidence or encouragement.

In a football context in which professional career opportunities are scarce, individuals may need both support and challenge to achieve. Knust and Fisher (2015) report similar results that caring for players does not always mean being 'nice' to them. Rather it should focus on helping athletes achieve what they want to achieve, by stretching them and helping them grow outside of their 'comfort zone,' and allow them to realise what they are capable of (Knust and Fisher, 2015). Thus, challenging athletes is not necessarily poor care, because it can be done with attention, consent and in the best interests of an individuals. Unfortunately, however, the participants in this study also noted that coaches did not always provide care and were perhaps neglectful, ambivalent or selfish:

He (the coach) didn't want me to be there. He was just bothered about getting in a better player as my replacement. We were just like a tick box, numbers 1-20.

She (the coach) treated everybody like a player, rather than like an actual person... she was only arsed about her reputation and who'd fit in the team at that exact time.

These quotes suggest that at times, the coaches of participants in the study did not pay attention to or serve their athletes needs either by challenging or supporting them. Rather, these coaches appeared ambivalent to the individuals they were coaching, and this may have been influenced by a preoccupation with results within a performance culture:

He was literally just bothered about winning each week and that was it. If I am being really honest it was quite a draining and demoralising thing to be a part of.

These findings were similar to Gearity's (2012) research, which used data from 16 interviews with athletes. In that study, athletes described coaches as uncaring, when coaches put their own needs before the athletes and displayed unsupportive and selfish behaviours. Thus, similar to results from this study, good care can be both supportive or challenging but must involve paying attention to, and serving the needs of the athletes at hand.

Theme 2: Dialogue was both an enabler of good care, but also a means of disseminating uncaring attitudes

When examining instances of good and preferred care in this study, participants emphasised how dialogue is key to a caring relationship. For instance:

They (the coach) actually like care about how we feel. They even text us after training if we seem a bit off... if you're actually motivated, it makes you feel like the coaches actually care about you and would go to any length possible to make you into a better player.

In this instance, dialogue e.g. via text, is the means that a coach used to exhibit that they cared for player. Moreover, the player credits this with an improvement in motivation and performance. In contrast, coaches who did not often communicate with athletes were conceived as uncaring:

Normally I would be ok if I wasn't playing if I was getting help off the manager about what I needed to improve... But, there was absolutely none of that... He acted like he'd rather me not be there because it would save him the headache of coming up with a shit excuse not to play me.

That said, it is important to note that communication and in particular dialogue is not always positive. The nature of the dialogue and indeed the relationship between players is also key to establishing caring, yet respectful relationships.

It's not (communication) like every night or every session or anything. That would be looked upon as weird or excessive. It's just in a caring way every once in a while.

Thus, regular and yet appropriate dialogue appears key to demonstrating that coaches are paying attention to and serving the needs of athletes.

Theme 3: A web of care

Interestingly, Theme 3 demonstrates that this dialogue does not always need to be provided by the coach. Other individuals in the club have also provided care to these players at times during their careers. For example:

Because I was so far away from home, I was so lucky to have a physio, support team and coach like them, they were my first go to with anything.

The girls are like my sisters. I've got their back and they've got mine.

I see the girls more than I do my family. I really enjoy it... I love going and seeing all the girls, even the manager. We all get on and it's like our own little family. Sounds cringe, but it's true.

Such findings are consistent with Noddings (2003) work, in schools which aspired for a caring climate, with a feeling of warmth, support and stability. Noddings argued that such climates can be developed when powerful individuals (e.g. coaches or popular athletes in a sporting context), model and reward caring behaviours. Based on this, Fry and Gano-Overway (2017) measured caring climates in sporting environments and found that behaviours such as listening, supporting, and empowering can develop caring climates. Consistent with this, one participant described how a coach led to such a climate:

Her (the coach) caring for us is probably what's made us so tight knit as a group. And like we want to go out and graft together because we are like as close as a family. Without her caring for us, we probably wouldn't even have any of that to be honest.

Conclusions, recommendations and future work

This study of early career women footballers, demonstrated how coaches care can have a positive impact on athlete's experiences. Through the lens of the participant, care can be both supportive and challenging, but nonetheless involves attention as evidenced through appropriate dialogue, consent and an empathetic concern for players. Unfortunately, participants also reported uncaring acts which were characterised by a lack of dialogue, disinterest in the athlete as an individual, and a selfish concern for the coach's own interests. Coaches, should take action by considering how they care and enact dialogue e.g. do they use text appropriately. Do they show concern? Coaches may also consider how caring behaviours are exhibited are valued e.g. how do they reinforce caring behaviours. For coaching researchers, the study of women's football is an interesting starting point for gathering the perceptions of athletes in the UK. Further and broader studies are required to ensure that coaching and coaching is informed by the experiences of athletes. Such studies are necessary to move beyond a minimum standard approach to duty of care.

Table 1. Participants Sampled.

<u>Participant</u>	<u>Gender</u>	<u>Age</u>	<u>No. of Playing Years</u>	<u>Participation Level</u>
1	Female	20	14	FAWSL 2
2	Female	21	10	FAWSL 2
3	Female	22	16	FAWSL 1 and Senior International
4	Female	21	14	FAWSL 2

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