**A Letter to My Younger Self: Using a Novel Written Data Collection Method to Understand the Experiences of Athletes in Chronic Pain**

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This study seeks to extend the variety of written methods used in sport and exercise research by outlining the use of a novel written technique for data collection: ‘a letter to my younger self’. The use of solicited letter writing has long been endorsed as a valuable technique as part of the therapeutic process, but has yet to be considered as a method of collecting qualitative data. In this study, 21 participants who had experienced chronic pain while playing sport were invited to write a letter back to their younger self. A dialogical narrative analysis was used to analyse the written letters and our results are presented in two forms. First, a ‘collective letter’, written using amalgamated participant quotations. Second, an accompanying commentary which illustrates the characterisations, structure, and narrative themes that were evident in the data collected. Our findings extend existing knowledge of chronic pain in sport, contrasting previous literature that has presented degenerative stories. Further, we also illuminate the danger of the performance narrative in privileging personal agency and the risks this poses to receiving support during chronic pain. We conclude by challenging researchers to consider the importance that should be attributed to hindsight and the value of re-describing experiences with wisdom and knowledge of the significance of the past.

Keywords: hindsight, re-description, narrative, injury

While the use of written documents has long been considered of major importance by biographers and historians, in comparison, the sport and exercise community has been relatively slow to recognise the potential that written documents can have in enhancing our psychosocial understanding of sport and exercise experiences (Day 2016). Yet despite this slow start, over the past two decades momentum has been slowly gathering. In particular, the use of two main written sources have dominated this body of literature: written diaries (e.g., Day and Thatcher 2009) and autobiographies (e.g., Sparkes and Stewart 2015). Researchers adopting these sources have strongly endorsed their use, recognising their potential in exploring how athletes represent themselves or their experiences and highlighting their use in collecting data that may be unobtainable using face-to-face interviews. As calls have been made for more diverse and novel methods of collecting data (e.g., McGannon, Smith, Kendellen, and Gonsalves 2019) the variety of written sources has gradually expanded to include written story completion (Clarke et al. 2017), expressive writing (Salim and Wadey 2018), and online writing such as blogs (Bundon 2017). The authors of these novel methods have not only expanded the toolbox available to qualitative researchers, but have demonstrated the versatility of writing as a creative and participant-led method of data collection.

This study looks to extend the emerging variety of written methods through the use of a novel technique for data collection, solicited letter writing. The use of letter writing has long been endorsed as part of the therapeutic process. For example, letter writing has been suggested to help family members to reflect on problems (Vidgen and Williams 2001) or to engage the client by writing collaboratively (Bacigalupe 1996). Variations of this method have also been used by Nau (1997) who suggested that letters may also be written to objects, describing the therapeutic benefits of asking a client to write to his amputated leg. Further, Kress, Hoffman, and Thomas (2008) introduced a temporal dimension to the use of letter writing. Their study encouraged participants to envisage themselves at a time and place when they may be ‘older’ and ‘wiser’. Letters were written back to the current self, encouraging participants to consider what would help in the current phase of their life. As a collective, these studies endorse the use of letter writing, suggesting that this technique may allow an individual to reflect on a problem, recording desired changes or conversations that they would like to have, but which they may be unable to verbalise face to face. Further, the range of studies using this technique demonstrates the potential for creative application by changing the author of the letter (e.g., current self, future self), the addressee of the letter (e.g., therapist, family member, current self, body part), and the temporal dimensions (i.e., past, present, future).

While there is limited research that has explored the use of letter writing as a qualitative data gathering technique, two studies that fill this void describe the use of a correspondence method between researcher and participant (Kralik, Koch, and Brady 2000; Harris 2002). Kralik et al. used a combination of e-mail and letter writing to collect life history data from women experiencing chronic illness, while Harris used hand-written correspondence with women who self-harm. Both studies have illustrated the depth of detail and intensely personal accounts that may be collected using this method, yet both also described the challenges of responding to participants’ letters. For example, Kralik et al. described the research dilemmas faced when participants asked for advice in their correspondence. Similarly, Harris (2002, 5) described the need to ensure that her responses to letters included the right balance of care and empathy, were non-judgmental, and that the participant felt “… that she had been heard and that the words she had written had an effect on both researcher and the study as a whole”. Such challenges echo the use of this technique as a therapeutic tool, cautioning that the very nature of correspondence places the researcher in a therapeutic position. Thus while this method has been shown to gather rich data, the researcher’s ability to engage in such a study may be dependent on their therapeutic competencies, time available, and the availability and accessibility of referral networks where participants require further professional support. These demands on the researcher may be an indication as to why letter writing has not been well used in research since the publication of these two papers 20 years ago.

In the sport and exercise context, the use of letter writing as a method of data collection has been similarly sparse. Yet of particular note is Salim and Wadey (2021) who encouraged injured athletes to write letters as part of a gratitude intervention. Participants were asked to write and deliver (i.e., read out loud) a letter of gratitude to thank a person who had showed them kindness. Participants described that writing the letter allowed them to reflect on the support provided to them, while delivering the letter resulted in feeling closer to the recipient and a sense of self-satisfaction. Although Salim and Wadey presented the use of letter writing as part of an intervention, their study provided important implications for correspondence methods. As well as reporting positive outcomes from the gratitude intervention, participants described their embarrassment when reading the letter out loud, feeling exposed, awkward, and self-conscious. Such responses perhaps indicate that letters contained content that was emotional, deeply personal, and previously unsaid, thereby indicating the poignancy of written mediums.

Although the therapeutic benefits of letter writing have not been researched in sport and exercise there are numerous examples of elite athletes who have published letters online [https://www.theplayerstribune.com/en-us/collections/letter-to-my-younger-self]. Most often these letters use a format in which the individual uses hindsight to write back to their younger self, providing advice, encouragement, and often assisting the younger self in identifying solutions to their situation. As Freeman (2010, 24) suggested “…we must often await the future in order to discern more fully the meaning and significance of what has gone on in the past”. Thus, hindsight provides the perspective of an actual older, wiser self – an individual whom we propose is invaluable in understanding a range of experiences in the sport and exercise context.

The aim of the current study is to explore the use of an older, wiser, self letter in an athletic population (i.e., those who regularly engage in sport across all levels) who have experienced chronic pain. As a group of researchers, we are passionate about the need to better understand pain in those who take part in sport, yet our motives for choosing to explore the use of older, wiser, self letters with this population go beyond our research interests. Our aim here is not to finalise who should or should not use this method, but to justify why our exploratory work on this method focuses on this population. First, the experience of pain has long been recognised as a largely subjective experience, making it difficult to convey to others. Pain sensations are not tangible or concrete (Strong et al. 2009) and consequently, may be difficult to articulate (Frank 1995). Despite this recognition of the difficulties associated with both describing and comprehending pain, there has been a reliance on spoken qualitative methods to understand pain and injury (Day and Humphrey 2020). The use of letter writing may provide an alternative platform, which allows the participant more time for contemplation and reflective description. Further, letters addressed to the self do not need to be understood by an ‘outsider’ and consequently, participants may write in a way that is more intuitive and which resonates with their own language and embodied experiences.

Second, existing research on chronic injury has highlighted that athletes in chronic pain desire support, but struggle to articulate their needs to others and instead often hide or avoid discussion of injuries. For example, Tynan and McEvilly (2017) described the fear of punishment associated with disclosing injury to coaches, while dancers represented in McEwen and Young (2011) tried to actively silence pain, moving their focus away from pain and the body while dancing. Similarly, as Spencer’s (2012) mixed martial arts work illustrated, to attain victory those experiencing pain learned to live with and through pain. Yet experiences of living with and through pain are not restricted to elite athletes. As Lev (2021) described in his study of long-distance runners, injured body parts that interfere with running routines may be automatically denied and resisted, causing a sense of alienation from the body.

Despite learning to live with and through pain, athletes have described the desire to be supported through their pain by those within their sports network. For example, Cavallerio, Wadey, and Wagstaff (2016, 105) present the story of Sally, a young rhythmic gymnast who is unable to share her overuse injury with her coach. As Sally’s story describes:

I walk off the carpet. Tears continue to stream down my face. My body is

shaking from the pain. I want to scream. I want to shout. I want Trudy [coach] to understand the pain. I want her to know how much I care about the Regionals. I just don’t know *how.* I don’t think I can.

I say nothing.

 As researchers, coaches, and applied practitioners we might theorise about how to help athletes such as Sally. Our alternative is to ask Sally and other athletes like her: what would have helped at this point in time? What did you need to hear? What (if anything) would you tell yourself to do?

Finally, as Frank (1995, 150) suggests “the pedagogy of suffering means that one who suffers has something to teach…and thus has something to give”. What echoes strongly throughout the literature is that those experiencing chronic illness and/or pain *learn* to ‘live with’ the disruption to body and self (Charmaz 1995) and in doing so may move from defying or ignoring pain to reconnecting with their physical body (Hunt and Day 2017). This learning places the individual in the position of ‘wounded storyteller’ (Frank 1995) and thus as someone knowledgeable about how chronic pain and/or illness may be experienced over time. The use of an ‘older, wiser self letter’ draws on what has been learned over time, opening up the opportunity to give back to others in a similar situation. Consequently those experiencing chronic pain may be well placed to explore the value of letters written in hindsight.

**Methodology**

**Narrative Inquiry**

In line with our aims and use of a narrative methodology, the study was underpinned by ontological relativism (i.e., reality is multiple, created, and mind dependent) and epistemological constructionism (i.e., knowledge is constructed and subjective). Thus narratives are the cultural and social resources from which people construct their personal stories and understand the stories they hear (Smith and Monforte 2020). In this paper we adopt a dialogical perspective (Frank 2010). Given the aims of our work we were drawn to Frank’s (2005, 967) suggestion that ‘dialogue depends on perpetual openness to the other’s capacity to *become someone other* than whoever she or he already is.’ Thus, adopting this approach allowed us to consider what written letters might *do* to the imagined younger self. Narrative dialogism focuses on how stories work *on* and *for* people, with recognition of the other’s unfinalizability (Frank 2005). This approach therefore provided the opportunity for us to question how dialogue from the older self might move the younger self in chronic pain towards some areas and activities and away from others.

In this study we use a narrative lens to consider the dialogue created, not between two people but between one person at two historical time points. As Reissman (2008, 105) writes “Stories don’t fall from the sky (or emerge from the innermost “self”); they are composed and received in contexts- interactional, historical, institutional, and discursive - to name a few”. In setting out our position we use the term ‘dialogue’ to intentionally represent two-way communication. The younger self configures the story, they are present during the experience of chronic pain and determine the plot through their actions and sequences that become part of the story. Consequently they represent what might be termed the primary story. The older self acts as the narrator of the primary story, a story that is told with knowledge of later events and the ending or story resolution. In narrating the primary story, the older self uses retrospective re-description. Kvernbekk (2013, 642) describes “… earlier events can be given a new status, most notably as causes of later events, but also because we simply change our judgment of their meaning and significance in the light of later events”. In this case, by asking the older self to write back to the younger self we are inviting them to use retrospective re-description, selecting aspects of the original story that speak to them, thus providing dialogue that may endorse, challenge, or modify the primary story from their older, wiser position.

**Participants**

Following institutional ethical approval, maximum variation (i.e., to contain cases that are purposefully different) and criterion based purposeful sampling (i.e., to select information-rich cases who met the aims of the study) were used to recruit a sample of participants who had varied experiences in competitive sport (e.g., types of sport, levels of play) and who had experienced chronic pain. We purposefully aimed to recruit participants at various levels of play and across sports because of the exploratory nature of the study. At the start of this study we had no knowledge of who could, or would, be willing and able to write a younger-self letter and consequently our focus was on recruiting those who had experienced chronic pain rather than narrowing recruitment by sport or level.

 Recruiting participants using the term chronic pain presented some difficulties as time points and terminologies used to describe chronic pain have varied across studies. As Howe (2004) described, pain may last for months or even years after injury. As a result, we specified that participants must have experienced pain for longer than one year to differentiate chronic from acute pain. This criterion requires a longer duration of pain than some previous work (e.g., six months suggested by Hunt and Day 2017) and therefore portrays our cautious approach to ensuring participants represented those in chronic pain. Further, in order to ensure that participants were able to reflect on their experiences using hindsight (i.e., that they had knowledge of later events), the onset of chronic pain was required to be at least two years prior to taking part in the study.

 To recruit participants, information sheets were sent to local sports clubs and organisations and adverts were placed on social media. In total 21 participants were recruited, 9 males and 12 females with an age range from 20 to 54. Their sports included team sports (e.g., rugby, hockey, netball) and individual sports (e.g., gymnastics, triathlon, squash). Seven participants were involved in club level competitive sport, six in regional, four in National, and four were International competitors. Participants reported a range of chronic pain symptoms, most of which were the result of acute or overuse sport injuries that had not recovered (e.g., chronic intractable-benign pain) and included knee, back, neck, hand, and foot pain. Although we stipulated that pain must have been experienced for at least one year, the average length of pain experienced was far longer, ranging from 2-28 years (*M = 9.6* years). All participants described that they still experienced chronic pain at the time of letter writing, although for some this was separated by bouts of no-pain (chronic recurrent pain).

**Procedure**

On agreeing to take part in this study, participants were invited to write an older, wiser self letter. Participants were first provided with a prompt that encouraged them to think about a specific time point for their writing: “I would like you to think about a time when you would have liked to receive this letter. This could be any time that feels right for you – it could be a time when you were struggling with chronic pain, or a time when you felt like you were coping well.” The aim of this prompt was to encourage participants to visualise their younger self, moving away from a more abstract image of self to imagining the younger self at a specific point in time. Participants were then instructed: “Now think about what you would like this letter to say. You might consider: What advice would you like to give to yourself? What would be most helpful or comforting to hear? What would you do differently? What would you encourage yourself to keep doing the same? What would you tell yourself about the future?” Instructions for writing the letter highlighted that participants should not be concerned with spelling, grammar or ‘getting it right’, but should construct a letter that feels right to them. Further, it was iterated that there was no ‘ideal length’ for the letter or ‘right’ way to approach this task.

 Participants were provided with the choice to email their completed letter back to the researcher, or in order to remain anonymous, to post their letter. On receipt of each letter a response was constructed that was individual to each participant. In line with Kralik et al. (2000) and Harris (2002) it was important to acknowledge that letter writing can be an emotional experience and that the researcher should demonstrate care and empathy towards participants. Responses to participants therefore not only thanked them for their participation but included a more personal response, considering the impact that the letter had on the researcher and on the study overall. Where it was considered appropriate, participants were also signposted to sources of support.

**Data Analysis**

A dialogical narrative analysis (DNA) was used to analyse the written letters. This form of narrative analysis focuses not only on the *content* of stories, but also their *effects* (Frank 2010). Consequently, the focus is on the relationship between the events being narrated and the event of narration, thus considering what happens as a result of telling the story. In line with Frank’s, description of DNA, this form of analysis allowed us to consider how the older self looked to approve, confront, and/or modify and guide the story being told by the younger self.

 To do this, we opened up our analysis with questions that Frank (2012, 46) proposed to involve the “fundamental balances” of DNA. Frank suggests five areas of questioning that were adapted for the purpose of this study. Adapting questions for analysis is common (and encouraged) in DNA to ensure that the questions used are deemed by the analysts to be most useful to the study (Frank 2010). Our questions included resources questions (e.g., what resources shape the telling of the primary story?), circulation questions (e.g., who understands the original story and who wouldn’t?), affiliation questions (e.g., who would be affiliated into a group of those who share understanding of the story?), identity questions (e.g., how is the younger self portrayed?), and questions about what is at stake (e.g., how does the older self convince the younger self of what they have to do and be in order to hold their own?)

 The first author began by making conceptual notes on the letters in order to identify aspects of the data that would open up dialogue on Frank’s five areas of dialogical questioning. As a research team we then posed these dialogical questions amongst each other, debating excerpts from the letters, and considering how our discussions of these questions answered the broader aims of the study. In doing this we considered the effects that the letters had on us as the reader and recorded all of our comments. For example, “this part of the letter feels like a hug, there is warmth and understanding, it’s almost paternal” and “I’m so angry seeing how much pain people end up being in, but who am I angry at, which character?”. Throughout the analysis we kept procedural memos to record how our ideas changed and developed, providing a trail of our interpretations and linking together ideas from dialogical questions. For example, when considering how the older self convinces the younger self (questions about what is at stake), we moved from debating the motivational power of ‘battle language’ to what connects older and younger self (questions about affiliation), thereby recognizing the parallels between battle language and affiliation with the performance narrative. The final stage of our analysis was to write up our interpretations. Here the research team acted as critical friends, continuing to promote debate and discussion as results were written up.

We open our results section with what may be termed a ‘collective letter’. This letter, written using amalgamated participant quotations, illustrates the characterizations, structure, and narrative themes that were evident in the data collected. In writing the collective letter we considered the narrative structure, characterization, and plot of all of the participant letters to form a template. Again, we drew on the work of Arthur Frank (2010) to guide how our collective letter was developed. Frank (2010, 106) suggests that analysts need to ‘see the story off the page’. Thus, we began by drawing out a trajectory that represented the narrative structure for each letter. This trajectory allowed us to visualise how the letter changed as the story unfolded and how each character (older and younger self, other characters) was represented at different time points in that trajectory. In doing this, we also returned to our dialogical questions (e.g., who would understand this part of the story and who wouldn’t? How does portrayal of the younger self change at this point?). We then considered similarities, differences, and insightful features of these trajectories. In doing this we held two aims: first, that the collective letter should be representative of the data collected and second, that atypical or extreme cases should also be included. In line with Flyvbjerb (2006) we felt it important to acknowledge that atypical or extreme cases may reveal more or richer information, often helping to clarify deeper causes behind a problem. Consequently, our aim in developing the collective letter was not to develop one single, finalized interpretation, but to tell a metastory rich in information and depth. In writing and revising the collective letter, we returned to our data and identified salient quotations that could be used from our participants to exemplify key features. Finally, we worked on the flow and readability of the letter through drafting, editing, and reading the work out loud as a team of researchers to ensure that it was coherent and represented the letters we had received. Following the collective letter, we provide commentary on how the narrative structure of the letters provides insights into the experiences of chronic pain.

**Judging Rigour**

In line with our relativist approach, we invite our reader to consider a number of criteria, considered and selected because of their fit and appropriateness for the purpose and objectives of this study (Burke, 2017). First, given that one of the unique features of DNA is the concern for both the story’s content and its effects, *resonance* offers a valuable method of judging the work. As a research team we were deeply moved by the poignant and emotive letters written by our participants. Yet representing the privilege of receiving such letters in a research paper can be challenging. We hope that the use of a collective letter may afford the reader some semblance of what such letter may ‘do’ for the recipient and encourage our readers to consider what this letter does and how they feel it. Second, *coherence* should also be considered. Does the letter provide a complete and meaningful picture? Does this fit with existing narrative theory and research on chronic pain and illness? Third, we ask the reader to judge whether our method is *transparent*. Given the novelty of this method of data collection, it is important for our work to present a clear audit trail of decisions and demonstrate the scrutiny involved in our exploration of the data.

**Results**

**Collective Letter: ‘A Letter to My Younger Self’**

*Dear Younger Self,*

*Over the past few years, I have watched you battle on, through the pain, the debilitation, and the times you’ve reached rock bottom. As you sit all alone, engulfed by darkness it feels like no-one understands, but now I do.*

*What you’ve been through is catastrophic, it’s devastating that you’ve endured so much, and I want you to know that you are incredible. After a misdiagnosis from one physio, referrals, scans, and finally rehab that doesn’t work, who are you meant to trust? Why can no one fix this? Oh how I wish there had been another way, a better way.*

*When I think about you it brings me to tears. You deserve so much love and compassion but you push everyone away. Struggling isn’t a weakness; you don’t have to do this alone. Your teammates won’t think you are weak for taking some time to look after yourself, but they will think you are stupid for playing through this injury. You are only hindering the team, not helping them. Remember that. Don’t be like me, don’t pretend to be strong. I understand that you don’t know how to ask for help, but this needs to change. Push yourself out of your comfort zone, open up about your feelings. You need to fight harder, you need to know that you deserve to get help. Trust me, when you do this you will realise how much people care.*

*I am writing this letter as a warning of what you will face if you continue to treat your body as you do. Please listen to this -you need and deserve to get help. Follow what you are told and be honest with them. Tell them how much pain you are in. Explain the symptoms and don’t try to pretend it doesn’t hurt. You will regret not seeking help and now because of your actions, the pain still brings me to tears. You try to return to sport but on a late night training the pain is worse – it hurts, it fucking hurts every time to be truthful.* *If you continue then you will face many years of chronic pain in the near future,* *ranging from pain so severe that you can’t sit down to intermittent discomfort that prevents you from playing the sports that you enjoy so dearly.*

*You could avoid this. Don’t push your body too much, every session chips away at you. Stop! Stop and listen to your body, it is screaming at you to stop and rest. Take that time out – let’s try and make this a think that we do from now on.*

*Spoiler alert: it does get better, but not in the way you imagine now. There are times when you play sport again, but the pain never goes away, it becomes part of you and you learn to accept it. There are other sports that you enjoy and can focus on and you do find a love for these. The love will never be as strong but that doesn’t come as a surprise. You find new friends when doing other activities outside of sport and stay in contact with those who you play with. Now you enjoy coffee mornings and book club. Leaving your sport isn’t the end. You develop a new confidence that you didn’t have before, a new strength in what you can do and greater ambitions, as you know that you can conquer tough new things. You will go through dark times to get there, but it will definitely be worth it I promise.*

*With love.*

*Your Older and Wiser Self*

**Configuring the Narrative and Opening the Story**

As Kvernbekk (2013) highlights, the beginnings of stories are not random, but are configured into a beginning-middle-end structure. This structure demonstrates the temporal quality of narrative and presents the wholeness of the story. In this case, the beginning of all of the written letters cast the characters of the older and younger self. The casting of a narrative is important, teaching the reader of the story how to relate to and understand the main characters. Further, as Holley and Colyar (2012) describe, the casting of the main characters will also express the purpose of a narrative. Thus we might question *how* each character in the letter is cast and *what* this contributes to the story being told. Of particular note here is that the intended reader is the younger self. Thus the positioning of the character of the younger self is of crucial importance, informing the younger self ‘*this is how I see you now’* and thus revealing the purpose of the narrative.

All participant letters began by casting the younger self in a heroic role, for example: “You were a hero dealing with all you had to deal with, without enough support or compassion around you”. This narrative provides a powerful contrast to previous authors who have presented descriptions of chronic pain as destructive and degenerative stories. Take, for example, Day and Hunt (2019) who depicted stories of athletes in chronic pain who felt imprisoned by their pain, resorting to self blame and perceiving themselves as failed athletes. The key difference here is that Day and Hunt asked participants to *recall* what this experience was like at the time of injury, whereas the use of letter writing provides participants with an opportunity to *re-describe* using the benefits of hindsight. Thus by casting the younger self as a hero, the older self provides narrative re-description, using a story type that may not have been accessible or acceptable at the time.

Unlike the traditionally defined hero, participants positioned the younger self as what Gumb (2018, 464) termed the ‘ordinary hero’. Gumb describes that this type of hero does not perform altruistic feats or heroic acts, but instead continues to live an ordinary life despite the challenges they experience. In line with this suggestion, participants justified the heroic status of the younger self, based on what they had endured in their injury experience. For example:

For any person the inability to do things is tough, for someone who is extremely fit, competitive, and sports mad – it feels catastrophic. The hardest part is missing the buzz of competing, missing the companionship of shared ‘sports battles’, you become the outsider listening in – and it’s horrible.

Here the ordinary hero provides the antithesis to Frank’s Quest narrative by validating the longevity of their own suffering with no mention of any future benefits. While the Quest narrative suggests that conquering illness may supersede immediate welfare (Frank, 1995), the ordinary hero focuses on the physical, emotional, and social struggles of injury and the impact on the welfare of the younger self.

The focus on welfare validates the injury experience and casts the older self into an empathetic, understanding role. Again, this casting is revealing, demonstrating compassion that may not have been experienced at the time of injury. Letters indicated that the younger self lacked understanding from others, including friends and medical professionals. For example:

After a mis-diagnosis from one physio, MRI from and referral to another physio, and finally rehab that seemed not to work, who are you meant to trust? Why are they not fixing it? This gets into your head and you really aren’t sure if anyone quite understands how traumatic this is for a 16 year old.

The struggle to ‘fix’ chronic pain has been outlined in Hunt and Day (2019) who described how those in pain needed to show that they were actively engaged in healing pain rather than accepting pain. Our participants tell a similar story, outlining the frustrations of repeated help seeking and hoping for cure. Yet letters also highlighted the loneliness associated with this cycle, describing the lack of understanding and empathy from others. Such descriptions echo Charmaz (2002), who noted that audiences may deny, trivialise, or ridicule suffering. As a consequence, stories of illness can become silenced as time passes. Our participants recognised this silencing in two ways. First, they illustrated how such stories may even be unknown to the self. For example, as one participant described: “I see now in a way that you couldn’t then, that for a young guy to be so hobbled is heart-breaking”. Second, by validating that pain was both arduous and emotionally grueling, the older self encouraged the younger self to tell their story to others, for example:

You really need to try and come out of your comfort zone when talking about your feelings – even with someone you know such as your own husband –this really helps put all your feelings into perspective and you realise that you are actually going through a really tough time.

By encouraging the younger self to tell their story, the older self provides reassurance on the acceptability of emotion stories. Frank (2010) described that storytellers may work hard to sustain dignity and coherence at times when calamity is imminent. In the above example our participant highlights the need to let go of dignity stories, noting that affiliation (i.e., who would understand the story) might start with those already closest to the athlete. What is at stake (i.e., risk of calamity) should not be avoided but embraced, in order to help with the process of recognition. Yet as Bury (2008, 170) suggested, the process of recognizing and legitimizing chronic conditions may be particularly problematic because they do not ‘break out’ but ‘creep up’. Thus, disclosure may be difficult, particularly when individuals have uncertain knowledge about what may be appropriate behavior when managing the effects of chronic symptoms (Bury 2008).

**Narrating Injury with the benefit of Hindsight**

 Although the older self is initially cast in an empathetic role, in most letters this character develops into a wise informer, providing the reader with advice and guidance on how to navigate their injury story. Given the unique position of the older self, the focus here is not on abstract advice about managing chronic injury (i.e., I *would* do this) but instead focuses on regrets and missed actions (i.e., I *should* have done this). Thus the older self is able to provide commentary based on their knowledge of the injury outcome. As Freeman (2010) suggests, hindsight shapes and deepens moral life by allowing us to see things that we could not or would not see earlier on. Thus, letters provide insight into aspects that the athlete may have been unaware of at the time, but which could have changed the injury story. Such suggestions echo Widdershoven (1993), who highlights the role of redefinition in narrative, whereby new meanings can be created by rhetorically redefining experiences. By placing experiences in a new context (i.e., with knowledge of subsequent events) they are redefined and new insights can be gained.

A common focus of all letters was to encourage the reader to engage with their physical self and recognise the pain they were experiencing. Letters acknowledged that the younger self would not or could not accept the pain, and aimed to persuade the reader to engage with their body using a variety of strategies. This focus on acceptance mirrors the work of Bigguet and colleagues (2016), who suggested that for those in long term pain acceptance may vary from being seen as ‘the only way forward’ to being seen as a ‘threatening way forward’. In Bigguet’s work, those participants advocating the need for acceptance strove towards integrating the body into the sense of self, seeing pain as a message to set limits and say no. Writing in hindsight, all of our participants framed their letter with acceptance as the only way forward. To do this, some participants invoked collaborative conversation, gently inviting the younger self to engage in dialogue and envisage visual aspects of the injury:

Your knees are starting to hurt right? It’s called Osgood-Schlatter, where your bones are growing quickly your ligaments can’t keep up and are stretching like an elastic band, getting thinner and thinner. I know you can’t think of anything worse but go and get it checked out straight away because you’ll leave it and try to play through it and it’s only going to get worse and you’ll be out of sport for even longer, trust me!

Whereas others took a more abrupt and direct approach, providing a forceful warning from the future:

Stop! Stop and listen to your body. You need to stop trying to be a gutsy and stubborn teenager and accept that you have over-trained your body. Your whole body is screaming at you to stop and rest. Your left knee is hurting so bad and you are doing more damage every time you run. It is time to stop!

Despite the different strategies used, the focus of both extracts is on re-connecting body and mind, persuading the reader to stop playing through pain. As part of this persuasive strategy, letters revealed the costs of playing through pain, demonstrating how the actions of the younger self have caused harm. This harm included emotive descriptions of pain: “Sometimes the pain brings me close to tears. You could avoid this” as well as descriptions of the physical symptoms:

I am writing you this letter as a warning of what you are to face physically if you continue to treat your body as you currently do. If you continue then you will face many years of chronic pain in the near future, ranging from pain so severe that you can’t sit down to intermittent discomfort that prevents you from playing the sports that you enjoy so dearly.

The harm described was not only related to physical well-being but also included the financial costs of playing through pain:

The money you have spent on being reactive to the condition when you could have been reactive for free! I’ve deliberately tried not to work out the financial implications of your/our laziness because it would shock.

Thus participants used their knowledge of the future to inform the younger self about the consequences of their actions. In line with Bigguet’s work, the body was therefore presented both as a resource (i.e., it allowed them to play sport) and as a hindrance (i.e., it prevents participation, acts as a financial drain). This duality of the body forces the focus onto well-being and taking care of the body. In the current study participants ranged in tone from proving an emotional plea to the younger self: “please listen to me” to more aggressive accusatory statements “stop being a fucking idiot” to persuade the younger self to engage in self-care. Despite the different approaches, all participants provided a similar message, illustrating that the body was a resource that the sporting story is shaped around and that playing through pain was destructive to their later well-being, turning the body from resource to hindrance.

The notion that athletes in pain may continue to play sport through pain is not new. Indeed, an abundance of research has explored the social and cultural reasons why athletes may continue to play injured (e.g., Young, 2004) and authors such as Everard, Wadey, and Howells (2021) have demonstrated the consequential downward spiral of physical and psychological decline. However there is much that can be learned from these letters. What is noteworthy in all letters is that participants took a neoliberal approach to health, encouraging the younger self to take action to support themself, for example: “Do everything within your power to look after yourself more carefully as I’m sure you can see even now that your life without sport will be a hollow one!” and “you need to fight harder, you need to know that you deserve to get help”. All suggested actions to the younger self involved the need to speak up, look after the self, and fight harder, without questioning the support provided by the organization (e.g., coaches) or organizational policy (e.g., team selection post injury). Indeed even when there was recognition that support was needed, the onus remained on the younger self to seek help: “What happened was unfair and you needed more pastoral care. You could have reached out for more support, although I know that you didn’t know how”. Thus even with the benefits of hindsight, participants placed responsibility for help seeking with the injured younger self, despite acknowledging that they were unable or unaware of how to do this.

This position can be understood by considering the suggestions of Carless and Douglas (2009), who assert that the performance narrative in sport can privilege individual and personal agency. Thus stories told through a performance narrative assume that people can control their lives, downplaying the significance of others and of environmental constraints. The use of the performance narrative may not be immediately apparent when considering the content of participant letters, given that letters contained descriptions of the emotional turmoil associated with injury. The demonstration of vulnerability may be unexpected in a performance narrative as successful athletes are often seen as immune to psychosocial difficulties. Yet storylines of vulnerability can follow a performance plot in which sport and self are inter-twined (Douglas and Carless 2015) for example, as in this case, where not playing sport impacts gravely on self. Consequently, athletes can show vulnerability in a performance narrative as not playing sport is unimaginable. As a result, despite recognizing their own vulnerabilities as an injured athlete, participants continued to conform to a performance narrative when making suggestions to their younger self, providing recommendations that required personal agency. Such recommendations may indicate that despite the benefits of hindsight, leaving the script of the performance narrative is challenging. Indeed, as Douglas and Carless (2015) describe, the performance narrative celebrates a culture of strength, resilience, and mental toughness, in which war metaphors are frequently used against potential vulnerabilities. In this case, despite recognizing and telling a story of vulnerability, the call to the younger self was to fight harder for help:

Now you are battling yourself and those parts of your body that want to defeat you. It’s a game of sport. The ultimate end is that you score the winning goal and you have to believe that will be the case. It is you versus the injury and ultimately you will win.

As Frank (2007) outlined, the stories that we tell and the way in which we tell them are the basis of inclusion and exclusion. In this case, telling a familiar story that ‘fits’ the repertoire of stories accessible to the younger self provides inclusion, affiliating both younger and older self. Thus, framing messages in a performance narrative acts as an inclusion device, situating older and younger self in the same narrative habitus.

**Closing the Story: A Glimpse into the Future?**

As we have seen, stories told through the perspective of the older self provide narrative re-description, persuading the reader to take action through their knowledge of the story ending. Yet in order to conform to a traditional story structure, letters must also have an ending. Although there may be a myriad of possible endings, the way in which a story ends can be framed as a story of success or failure. Stories of success encourage the reader to follow the proffered example, whereas stories of failure encourage the reader to learn from the example and not engage in similar behaviours (Banerjee and Green 2012). In line with the casting at the start of the letter (ordinary hero) and the narrative type identified (performance narrative), it might be expected that letters would end with stories of success, describing triumph over adversity and the return to performance. However, to tell such stories requires an absence of physical pain, something which none of our participants experienced at the time of writing. As a consequence, stories of success were framed around an ending of learning to accept and/or adapt to chronic pain:

So, it definitely gets better – just hang in there and keep going – now you barely even notice the pain and can just continue like before, it is different, but a good different. You adapt to the pain but the sooner you accept it is not going away the better!!!

For many participants, accepting pain resulted in the end of their athletic careers. Thus participants were faced with a critical decision of whether or not to reveal the undesirable future to their younger self. Gigerenzer and Garcia-Retamero (2017) outline that wanting to know the future is a natural condition of humankind. Future knowledge can be used to make rational decisions and therefore more knowledge is generally seen as better. Yet knowing the future can also bring suffering and regret, and consequently some individuals may prefer wilful ignorance. In this case, all participants chose to reveal the future to their younger self, even when this included undesirable events. For example as one participant wrote:

I want to tell you, sooner rather than later, that you will not throw the javelin again without pain. You realise this after you try again and again during and after your rehab.

As the start of this quotation indicates, knowledge of the future can reduce ambiguity, providing closure on difficult experiences even when the future is undesirable. To counter this undesirable ending participants wrote about personal and relational growth after leaving competitive sport. For example:

The future is so bright for you- don’t let these little niggles get you down – yeah you may not be able to do what you used to be able to do – but you take up different sports such as swimming and water aerobics and make new friends or socialise with a whole new group of people, which actually does you some serious good and brings you out of your shell! You almost develop a new confidence that you didn’t have before, a new strength in what you can do and greater ambitions, as you know that you can conquer tough new things.

As this example demonstrates, chronic pain outside of the performance narrative is no longer devastating. What had once threatened the individual’s identity becomes a ‘little niggle’, losing significance in the future life story. Further, leaving the performance narrative does not result in narrative wreckage as might be envisaged, but the ability to find new meaning and coherence in life, characterised as a relational narrative (Douglas and Carless 2009). Yet, also visible in this example are the remaining glimpses of the performance narrative, as the individual finds ‘greater ambitions’ and can ‘conquer tough new things’. As Douglas and Carless (2009) describe, leaving the performance narrative can be difficult because alternative stories (such as the relational narrative) are construed as stories of failure and are therefore worthless. While the older self is able to frame the relational narrative as a success story, the concern may remain that this is not ‘good enough’ without the inclusion of some celebrated characteristics of the performance narrative (i.e., ambition, drive, success over others). Thus, in order to create a tell-able success story participants turned to familiar language in which their sporting endeavors have taught them to conquer other life challenges.

**The Impact of Letter Writing**

Although the prominence of our work has been on understanding the plot and characterization within the written letters, it is important to also highlight the physical and emotional impact that writing had on participants that was evident within the letters. Scholars have advocated the deep fidelity granted to embodied lived experience by narrative researchers who provide spaces for people to tell long, in-depth stories about their thoughts, emotions, and lives (Smith and Sparkes 2009). In this case, we were unsure whether the use of written letters would provide a similar space. In asking people to write rather than tell stories we become reliant on the participant to find their own space to open up their story. As researchers we were able to provide opportunity and motive to write, but unprompted, it was up to our participants to choose the thoughts, emotions and lives that they would write about.

 The use of a younger self letter provided participants with a known recipient for their writing and participants described their visualisation of the younger self, which provided a powerful embodied experience. For example:

Right now, I am watching you in pain and I feel so sorry for the emotions you are going to be going through over the next year and the reminders you will get throughout your life. It is even making me feel a lump in my throat as I write this.

The past cannot be changed and consequently telling the story to the younger self was an emotive experience for some participants. Sharing this emotion with the younger self allowed participants to express their sorrow for what had happened and show loving kindness to the younger self. Yet while visualising and writing to the younger self may be cathartic for some participants, we are also cautious that this method holds the potential to evoke difficult memories. It is therefore paramount for researchers to consider how to protect the well-being of participants. This may be challenging given that letters are written in a time and location to suit the participant. Consequently, clear indication of the support available must be given (e.g., working hours of the researcher) and sources of further support and referral networks may be provided as a matter of course. As previous authors on letter writing have warned (e.g., Kralik et al.; Harris 2000) the researcher must be sensitive to the needs of participants, individually acknowledging and responding to letters that are submitted. Consequently, this method requires the time, skills, and emotional investment of the researcher. It is also therefore important to consider the well-being of the researcher engaged in a writing project. As Day and Thatcher (2009) described, reading about personal depictions of events that have passed, with a limited ability to help can put the researcher into a passive role. In line with these suggestions, it became clear that procedural ethics (i.e., universal codes that define right/wrong answers) neglected sufficient care based practices. On receiving these letters we could not be morally neutral, value-free, or (as suggested by our ethics board) send a universal debrief template to all participants. Instead, using a reflexive ethical approach (Smith and Sparkes 2014) provided a more appropriate way noticing our reactions to participant letters and responding in an adaptable, responsive, and safe way that paid attention to the potential power imbalances between researcher and participant and was sensitive to each unique situation.

**Final Reflections and Implications of the Research**

This study set out to explore the use of letters, written in hindsight to a younger self in chronic pain. In doing this we sought to extend the emerging variety of written methods through the use of a novel technique for data collection and to provide an alternative perspective on the experiences of those in chronic pain. We therefore conclude by considering what is offered by this novel method of data collection.

First, this study opens up discussions about the benefits of hindsight. In part, the development of this method was sparked from frequently reading (and becoming frustrated with) qualitative papers that discuss retrospection as a limitation of the study. Conversely, we were inspired by what Freeman (2010, 21) writes:

What is happening now, in the moment is seen as Reality and hindsight as a source of distortion and error: Compared to the fleshy immediacy of the present, so manifestly *there* before us, the backward gaze of memory, with its desires and designs, and its distance from the past-present experience, can seem like a gauzy veil, if not an outright source of bald-faced lies...

The use of written methods in sport and exercise psychology has previously emphasised the value that written methods (such as diaries) have in collecting data as it happens, thereby celebrating the Reality of data collected. But what if we started to question the value attributed to temporal proximity, noting that it lacks reflection and that it is based on experiences in the ‘heat of the moment’, without considering how these experiences impact on the athlete and their relationships with others. Rather than suggesting that retrospection is a limitation, what if we celebrated hindsight as a strength of research, for its ability to allow for reflection and consideration of how specific events or experiences are placed within the life story of the athlete? As demonstrated in this study hindsight is a powerful tool, allowing for narrative re-description of events. This does not *distort* reality but *clarifies* the meaning and significance of the past.

Second, rather than being passive, narratives *do* things that can make a difference (Frank 1995). Some might suggest that in this case the difference is hypothetical, based on regrets and missed opportunities. Yet while the past cannot be changed, authors such as Caddick, Phoenix and Smith (2015) have highlighted the value of sharing collective stories. Caddick and colleagues highlight the power of collective stories to provide comfort, clarification, and encouragement/support. Further, they suggest that collective stories may provide narrative care by affirming what is valuable and sharing pain and suffering with others. Given that our participants illustrated the lack of understanding surrounding their chronic pain, the use of a collective letter may provide validation of their experiences and a sense of belonging. Thus, on an individual level, the collective story may hold therapeutic benefits. Yet moving beyond this, narratives are social, and as Smith and Sparkes (2009, 5) suggest ‘no story is one person’s alone’. Therefore collective stories that draw on the benefits of hindsight may help to broaden the narrative environment and open up new stories of chronic pain, widening the narrative resources available.

 Finally, in making suggestions about the value of hindsight it is also important to consider how the use of hindsight in this study extends our knowledge of chronic pain in sport. First, participant descriptions of their younger self in chronic pain contrasted previous literature (e.g., Day and Hunt 2019) that has presented stories of pain as degenerative and destructive stories. Our participants chose to tell the story of an ordinary hero, validating the struggles associated with chronic pain and recognizing the psychological strength of the younger self. In telling this story, participants provide us with guidance to better support those in chronic pain. For example, we might consider how to broaden the narrative environment to ensure that the story of the ordinary hero is accessible and accepted. Further we might also reflect on who hears the athlete story of chronic pain and how we ensure that pain is validated. Second, participant letters demonstrate that even with hindsight, the performance narrative remains dominant. The danger of this narrative type is that it privileges personal agency. Thus while our participants acknowledged that they were deserving of more support during injury, they encouraged the younger self to ‘fight harder’ to receive this support. Such findings illuminate the need for professionals such as sport psychologists to advocate for athletes’ rights, supporting propositions from authors such as Heil (2016) that we should be more willing to act on behalf of athletes’ rights and responsible organizational practices. Third, the letters we received from participants in chronic pain were both moving and harrowing. They depicted the lonely and arduous process of navigating chronic injury and therefore highlight the need to produce impactful research that can assist in better supporting those experiencing chronic pain.

 In conclusion, this study provides a novel method of data collection that extends the use of written methods and demonstrates the power of hindsight. There is, however, much work still to be done. Letters written in hindsight may be valued not only by the writer, but also by a range of readers (e.g., sport psychologists, coaches, healthcare professionals) as a form of narrative learning and as a source of narrative care for those experiencing similar difficulties. Our study highlights the importance that should be attributed to hindsight and the value of re-describing with wisdom and experience.

**References**

Bacigalupe, G. 1996. “Writing in Therapy: A Participatory Approach”. *Journal of*

*Family Therapy* 18 (4): 361-737. doi:[10.1111/j.1467-6427.1996.tb00057.x](https://doi.org/10.1111/j.1467-6427.1996.tb00057.x)

Banerjee, S., and K. Green. 2012. “’I Quit' Versus 'I'm Sorry I Used': A Preliminary

Investigation of Variations in Narrative Ending and Transportation.” *Psychology and Health*27 (11):1308-22. doi: [10.1080/08870446.2012.675063](http://dx.doi.org/10.1080/08870446.2012.675063%22%20%5Ct%20%22_blank)

Biguet, G., L. Nilsson Wikmar, J. Bullington, B. Flink and M. Löfgren.

2016. “Meanings of “acceptance” for patients with long-term pain when starting rehabilitation.” *Disability and Rehabilitation* 38 (13):1257-1267.  DOI: [10.3109/09638288.2015.1076529](https://doi.org/10.3109/09638288.2015.1076529)

Bundon, A. 2017. “Talking my Language: The Athletes First project and the Use of

Blogging in Virtual Disability Sport Communities.” In *Disability and Social Media: Global Perspectives,* edited byK. Ellis and M. Kent, 241-254. Oxon: Routledge.

Burke, S. 2017. “Rethinking ‘validity’ and ‘trustworthiness’ in Qualitative Inquiry:

How Might We Judge the Quality of Qualitative Research in Sport and Exercise Sciences.” In *Routledge Handbook of Qualitative Research in Sport and Exercise*, edited by B. Smith and A. C. Sparkes. Chap 16: 330-339. London: Routledge.

Bury, M. 1982 Chronic illness as a biographical disruption. *Sociology of Health and Illness* 4 (2); 167-182.DOI:[10.1111/1467-9566.ep11339939](http://dx.doi.org/10.1111/1467-9566.ep11339939%22%20%5Ct%20%22_blank)

Caddick, N., and C. Phoenix, B. Smith 2015. Collective stories and well-being: Using

a dialogical narrative approach to understand peer relationships among combat veterans experiencing posttraumatic stress disorder. *Journal of Health Psychology* 20 (3) 286-299.

Carless, D., and K. Douglas. 2009. “’We Haven’t got a Seat on the Bus for You” or

“All the Seats are Mine’: Narratives and Career Transition in Professional Golf.” *Qualitative Research in Sport and Exercise* 1 (1): 51-66. doi: 10.1080/19398440802567949

Cavallerio, F., R. Wadey, and C. Wagstaff. 2016. “Understanding Overuse Injuries in

Rhythmic Gymnastics: A 12 month Ethnographic Study.” *Psychology of Sport and Exercise* 25: 100-109. doi: 10.1016/j.psychsport.2016.05.002

Charmaz, C. 1995. “The Body, Identity, and Self: Adapting to Impairment”. *The*

*Sociological Quarterly,*36:4, 657-680, DOI: [10.1111/j.1533-8525.1995.tb00459.x](https://doi.org/10.1111/j.1533-8525.1995.tb00459.x)

Charmaz K. 2002. “Stories and Silences: Disclosures and Self in Chronic

Illness”. *Qualitative Inquiry* 8 (3):302-328. doi:[10.1177/107780040200800307](https://doi.org/10.1177/107780040200800307)

Clarke, V., N. Hayfield, N. Moller, and I. Tischner. 2017. “’Once Upon A Time. . ..’:

Story Completion Methods.” In: *Collecting Qualitative Data: A Practical Guide to Textual, Media and Virtual Techniques, edited by* V. Braun, V. Clarke, and D. Gray, 45-70. Cambridge: Cambridge University Press.

Day, M. 2017. “Documents of Life: From Diaries to Autobiographies to Biographical

Objects. In *Routledge Handbook of Qualitative Research in Sport and Exercise*, edited by B. Smith and A. C. Sparkes. Chap 16: 330-339. London: Routledge.

Day, M. and K. Humphrey. 2020. “But We’ve Always Done it this Way: The Future

of Qualitative Injury Research.” In *Sport Injury Psychology: Cultural, Relational, Methodological and Applied Considerations,* edited by R. Wadey, 142-154.Oxon: Routledge.

Day, M. and E. Hunt. 2019. “Narratives of Chronic Pain in Sport.” *Journal of Clinical*

*Sport Psychology*, 13 (1): 1-26. doi: [10.1123/jcsp.2017-0003](https://doi.org/10.1123/jcsp.2017-0003%22%20%5Ct%20%22_blank)

Day, M., and J. Thatcher. 2009. “’I’m Really Embarrassed that You’re Going to Read

This But…’: Reflections on using diaries in qualitative research.” *Qualitative Research in Psychology* 6(4): 249-259. doi: 10.1080/14780880802070583

Douglas, K., and D. Carless. 2009. “Abandoning The Performance Narrative: Two

Women's Stories of Transition from Professional Sport.” *Journal of Applied Sport Psychology* 21 (2): 213-230. doi: [10.1080/10413200902795109](https://doi.org/10.1080/10413200902795109)

Douglas, K., and D. Carless. 2015. “The Dark Side and Beyond: Narrative Inquiry in

Professional Golf.” In *The Psychology of Sub-Culture in Sport and Physical Activity*, edited by R. Schinke and K. McGannon, 64-77. London: Routledge.

# Everard, K., R. Wadey, and K. Howells. 2021. Storying Sports Injury Experiences of

# Elite Track Athletes: A Narrative Analysis. *Psychology of Sport and Exercise* 56 (20): page undefined. doi: [10.1016/j.psychsport.2021.102007](https://doi.org/10.1016/j.psychsport.2021.102007%22%20%5Ct%20%22_blank%22%20%5Co%20%22Persistent%20link%20using%20digital%20object%20identifier)

Frank, A. 1995. *The Wounded Storyteller.* London: University of Chicago Press.

Frank, A. 2007 “Through a Painted Window: On Narrative, Medicine, and Method”.

*International Journal of Qualitative Methods* 6 (3), 121-139.

Frank, A. 2010. *Letting Stories Breathe.* London: University of Chicago Press.

Frank, A. 2012. “Practicing Dialogical Narrative Analysis.” In *Varieties of Narrative*

*Analysis,* edited byJ. Holstein and J. Gubrium, 33-52. Los Angeles: Sage

Freeman, M. 2010. *Hindsight: The Promise and Peril of Looking Backward*. New

York: Oxford University Press.

Flyvbjerb, B. 2006. Five misunderstandings about case study research. Qualitative Inquiry, 12 (2): 219-245. [doi: 10.1177/1077800405284363](https://doi.org/10.1177/1077800405284363)

Gigerenzer, G., and R. Garcia-Retamero. 2017. “Cassandra’s Regret: The Psychology

of Not Wanting to Know.” *Psychological Review* 124 (2): 179 –196. doi:

[10.1037/rev0000055](https://psycnet.apa.org/doi/10.1037/rev0000055%22%20%5Ct%20%22_blank)

Gumb, L. 2018. “Trauma and Recovery: Finding the Ordinary Hero in Fictional

Recovery Narratives.” *Journal of Humanistic Psychology* 58 (4): 460–474.

Heil, J. 2016. “Sport Advocacy: Challenge, Controversy, Ethics, and Action.” *Sport*

*Exercise and Performance Psychology*, 5 (4): 281-295. doi: [10.1037/spy0000078](http://dx.doi.org/10.1037/spy0000078%22%20%5Ct%20%22_blank)

Harris, J. 2002. “The Correspondence Method as a Data-Gathering Technique in

Qualitative Enquiry.” *International Journal of Qualitative Methods* 1(4): 1-9. doi: 10.1177/160940690200100401

Holley, K., and J. Colyar. 2012. “Under Construction: How Narrative Elements Shape

Qualitative Research.” *Theory Into Practice* 51 (2): 114-121.

Howe, P. D. 2004. *Sport, Professionalism and Pain: Ethnographies of Injury and Risk.* London: Routledge

Kress, V., R. Hoffman, and A. Thomas. 2008. “Letters From the Future: The Use of

Therapeutic Letter Writing in Counseling Sexual Abuse Survivors.” *Journal of Creativity in Mental Health* 3 (2): 105-11. doi: 1080/15401380802226497

Kralik, D., T. Kock, and B. Brady. 2000. “Pen pals: Correspondence as a Method for

Data Generation in Qualitative Research.” *Journal of Advanced Nursing* 31 (4): 909-917. doi: 10.1046/j.365-2648.20000.01358.x

Kvernbekk, T. 2013. “Narrative Configuration: Some Notes on the Workings of

Hindsight.” *Scandinavian Journal of Educational Research* 57 (6): 639-651. doi: [10.1080/00313831.2013.798834](https://doi.org/10.1080/00313831.2013.798834)

Lev, A. 2021 “Distance Runners in a Dys-appearance State – Reconceptualizing the

Perception of Pain and Suffering in Times of Bodily Distress.” *Qualitative Research in Sport, Exercise and Health*, 13 (3): 473-487. doi: [10.1080/2159676X.2020.1734647](https://doi.org/10.1080/2159676X.2020.1734647)

McEwen, K. and K. Young. 2011. “Ballet and Pain: Reflections on a Risk-Dance

Culture.” *Qualitative Research in Sport, Exercise and Health*, 3 (2):152-173. doi: [10.1080/2159676X.2011.572181](https://doi.org/10.1080/2159676X.2011.572181)

McGannon, K., B. Smith, K. Kendellen and C. Gonsalves. 2019. “Qualitative

Research in Six Sport and Exercise Psychology Journals Between 2010 and 2017: An Updated and Expanded Review of Trends and Interpretations.” *International Journal of Sport and Exercise Psychology* 19 (3):359-379. https://doi.org/10.1080/1612197X.2019.1655779

Nau, D. 1997. “Andy writes to his Amputated Leg: Utilising Letter Writing as an

Intervention Technique of Family Grief Therapy.” *Journal of Family Psychotherapy* 8: 1-12. doi: [10.1300/J085V08N01\_01](https://doi.org/10.1300/J085V08N01_01)

Reissman, C. 2008. *Narrative Methods for the Human Sciences*. London: Sage.

Salim, J., and R. Wadey. 2021. “Using Gratitude to Promote Sport Injury-Related

Growth.” *Journal of Applied Sport Psychology* 33 (2): 131-150. doi: 10.1080/10413200.2019.1626515

Salim, J., and R. Wadey. 2018. “Can Emotional Disclosure Promote Sport Injury-

Related Growth?” *Journal of Applied Sport Psychology* 30 (4): 367-387.. [doi: 10.1080/10413200.2017.1417338](https://doi.org/10.1080/10413200.2017.1417338)

Smith, B., and A. Sparkes. 2009. “Narrative Analysis and Sport and Exercise

Psychology: Understanding Lives in Diverse Ways.” *Psychology of Sport and Exercise* 10 (2): 279-288. doi: [0.1016/j.psychsport.2008.07.012](http://dx.doi.org/10.1016/j.psychsport.2008.07.012%22%20%5Ct%20%22_blank)

Smith, B., and A. Sparkes. 2014. *Qualitative Research Methods in Sport, Exercise,*

*and Health: From Process to Product.* London: Routledge.

Smith, B., and J. Monforte. 2020. “Stories, New Materialism and Pluralism:

Understanding, Practicing and Pushing the Boundaries of Narrative Analysis”. *Methods in Psychology*, 2: 1-8. [https://doi.org/10.1016/j.metip.2020.100016](https://doi.org/10.1016/j.metip.2020.100016%22%20%5Co%20%22Persistent%20link%20using%20digital%20object%20identifier%22%20%5Ct%20%22_blank)

Sparkes, A., and C. Stewart. 2015. “Taking Autobiographies Seriously as an

Analytical and Pedagogical Resource in Sport, Exercise and Health.” *Qualitative Research in Sport, Exercise and Health* 8 (2): 113-130. doi: [10.1080/2159676X.2015.1121915](https://www.researchgate.net/deref/http%3A//dx.doi.org/10.1080/2159676X.2015.1121915?_sg%5B0%5D=bvfNHOCMWbZ7kaN4RHA7OHNAjGiD0CB7tQB-mmko60ayz_IyHK0F08J3-7BD6DhWfX--zHlvaEnfCLBuZpZv5env3g.SYa5Pac140GvfE7aySbbGLR0ZKJ-jno-Ri6iMVuRwbmlxaO17QNeytfU8gjPqrC3WYQ0KcYNQlN5QPPI5kNgeg)

Strong, J., and T. Mathews, R. Sussex, F. New, S. Hoey, and G. Mitchell. 2009. “Pain

Language and Gender Differences when Describing a Past Pain Event. *Pain* 145 (1-2): 86-95. doi: 10.1016/j.pain.2009.05.018

Tynan, R., and N. McEvilly.  2017. “‘No Pain, No Gain’: Former Elite Female

Gymnasts’ Engagements with Pain and Injury Discourses.” *Qualitative Research in Sport, Exercise and Health,*9 (4): 469-484. doi: [10.1080/2159676X.2017.1323778](https://doi.org/10.1080/2159676X.2017.1323778)

Vigden, A., and R. Williams. 2001. “Letter Writing Practices in a Child and Family

Service.” *Journal of Family Therapy*, 2: 317-326. [doi:10.1111/1467-6427.00186](https://doi.org/10.1111/1467-6427.00186)

Widdershoven G. 1992 “The story of life: Hermeneutic perspectives on the

relationship between narrative and life history.” In The Narrative Study of Lives, edited by R. Josselson and A. Lieblich. Chap 1: 1-20. London: Sage.

Young, K. 2004. *Sporting Bodies, Damaged Selves: Sociological Studies of Sports-*

*Related Injury*. London: Elsevier