

Injured Distance Runners: A Case of Identity Work as Self-Help

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This article examines the importance of "identity work" for the maintenance of athletic identity in the face of prolonged injury, and the part that type of work played in successful athletic rehabilitation. It is based on collaborative autoethnographic research undertaken by two middle/long distance runners during a 2-year period of injury and rehabilitation. The narrative delineates the various kinds of identity work that were crucial to the process of rehabilitation, focusing in turn on routines and settings, appearance and embodiment, identity talk, and differential association. The article concludes by conceptualizing identity work as a strategy that can play a vital part in the recovery process of injured athletes.

Cet article porte sur l'importance du « travail identitaire » pour le maintien d'une identité sportive même pendant la longue récupération qu'exige une blessure. Il porte aussi sur le rôle joué par ce travail dans une réadaptation sportive réussie. L'étude est fondée sur une auto ethnographie de deux coureurs de fond et a duré deux ans (incluant le temps de la blessure et de la réadaptation). Les énoncés décrivent les différents types de travail identitaire qui ont été cruciaux pour le processus de réadaptation et se centrent tour à tour sur les routines et les milieux, l'apparence et l'incarnation, le langage identitaire et l'association différentielle. L'article se termine en conceptualisant le travail identitaire en tant que stratégie pouvant jouer un rôle vital dans le processus de guérison des athlètes blessés.

Introduction

The focus of this article is on the reflexive and interactional processes evident in a particular case of sport injury and subsequent recovery. Committed athletes, be they professionals or amateurs, form particular kinds of sporting identities via long-term immersion in their sport. Serious injury means they might no longer ever physically perform their sport or might not be able to do so for a considerable period of time; this can have negative consequences on their ability to maintain their sporting identities, with a resulting detrimental impact on their mental health (Brewer, Van Raalte, & Linder, 1993; Petrie, 1993; Sparkes, 1999). Hitherto, much sociological research on sporting injury has focused on how sportspeople learn to normalize the presence of injury/pain in their sporting activity (Curry, 1993; Curry & Strauss, 1994; Howe, 2004; Nixon, 1992; Pike & Maguire, 2003; Wiese-Bjornstal et al., 1998; Young, McTeer, & White, 1994; Young & White, 1995). Sociologists have also researched how athletes, when unable to attain their pre-injured sporting status, manage that loss (Brock & Kleiber, 1994; Smith &

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Sparkes, 2002; Sparkes, 1996, 1998a; Sparkes & Smith, 2002.). The psychological literature displays research that indicates the importance of social support for athletes when they are injured (e.g., Johnston & Carroll, 2000) and evaluates supportive intervention by sports psychologists (e.g., Evans, Hardy, & Fleming, 2000).

There is, however, scant research on how athletes themselves actively manage the transition from sporting injury to the eventual return of their athletic status via rehabilitation. What literature there is appears to be largely confined to the injured athletes seeking medical help, orthodox (Howe, 2004) and otherwise (Pike, 2002). Remedial "self-help" (Williams, 2003, p. 147; Weston, 1992) is then of considerable interest, particularly the ways and means athletes might use to maintain strong conceptions of their sporting selves during such difficult periods and, thus, avoid mental health problems.

In order to understand how this can be achieved, there follows an examination of the identity work that the author and his distance-running training partner/co-researcher undertook during a 2-year period of injury and recovery. Initially, how we constructed our athletic identities before injury is outlined in order to portray the degree of identity salience (Stryker, 1987) of the athletic role and its specific nature in relation to distance running. This is followed by a detailed depiction of the various kinds of identity work we practiced in order to maintain credible sporting selves individually, to each other, and to a wider audience of runners during this liminal period. Our athletic identities, however, also underwent a process of change during this time, and the most important of these changes is portrayed. The narrative concludes by emphasizing how identity work proved crucial for maintaining our rehabilitative momentum. In effect it constituted a dynamic strategic device and was equally as important to our athletic recovery as were the remedial physical activities we devised and undertook.

This realization points to the important implications for the formulation of sporting rehabilitative policy these sociological practices have. Our research indicates that sustained identity work should be seriously considered when remedial regimes for injured sportspeople are constructed by those professionals involved in their care and treatment. This might be especially true for amateur athletes who lack the institutional attention and support of professional (Howe, 2001) or collegiate (Walk, 1997) competitors, and whose responses to injury and sport in general are presently underresearched (Pike & Maguire, 2003).

Theorizing Identity Work

The theoretical underpinnings of this research lie in the symbolic interactionist conception of identity, the foundations of which can be found in the work of Mead (1934), Blumer (1969), and Goffman (1959). These writers conceptualized the individual self not as a passive vessel but as an active and self-reflective entity. Individuals thus have the capacity to perceive the self as an object from the standpoint of another. This involves viewing one's own self as other via an internal dialogue of thinking, as well as internalizing wider social attitudes that constitute the generalized other (Blumer, 1969; Mead, 1934).

From this perspective, individuals then possess a concomitant awareness of their selves in action. They possess both the capacity of knowing themselves as subjects and as objects as known by others. The self is constructed using these

resources; hence, identity is developed by interactional work between self and others, which constitutes an intersubjective, dynamic, and ongoing social process (Mead, 1934, p. 8). The self is not static but rather a dynamic entity. Whereas Mead pointed out the importance and centrality of this relationship as a generic social process, he also acknowledged variations of this process that are dependent on particular contexts and individuals being located in particular social groups (1934, p.269). Hence, the identity work here portrayed is particular to the social world of two injured distance runners. In addition, as a consequence of being immersed in that world for decades, the author and his training partner each possessed a “felt identity” as distance runners. This, as Goffman (1963, p.106) notes, “is first of all a subjective, reflexive matter that necessarily must be felt by the individual whose identity is at issue.” Felt identity, grounded in self-feelings (McCall & Simmons, 1978), is a largely taken-for-granted phenomenon until people experience a problem that makes maintaining it impossible or calls into question their routine activities and character (Goffman, 1963; Mead, 1964).

Suffering from knee injuries that stopped our distance running and racing, we needed to sustain both the felt and interactional dimensions of our athletic identities for a prolonged period. In portraying how we achieved this, direct use is made of another symbolic interactionist resource, Snow and Anderson’s (1995) classification of different kinds of interrelated features that people use to do identity work. These are: particular settings, physical appearance, verbal construction and assertion, and selective association with individuals and groups. In reality such conceptual categories often blur and overlap, but they are used here for analytical purposes so as to draw out how sporting identities were maintained in the face of prolonged injury. The aim is to contribute to an understanding of the strategies that injured sportspeople might themselves develop to manage the sociological dimension of the injury-recovery process. The data on which this article’s portrayal of identity work is based were gathered via collaborative autoethnography, which is described in the subsequent section.

Autoethnography and Sport

Autoethnography has been defined as an autobiographical genre of writing and research (Ellis & Bochner, 2000, p.739) that examines the dialectics of subjectivity and culture. Autoethnography, in general, entails the detailed analysis of oneself *qua* member of a social group or category, for example, as a distance runner (Denison, 2002) or an Olympic rower (Tsang, 2000). It is usually distinguished from autobiography by its particular forms of analysis and its emphasis on experiences within the writer’s life that aim to illuminate wider cultural or subcultural aspects. Thus, the central concerns of this article are on the self (auto) and culture (ethnos) rather than on the writing process (graphy; Ellis & Bochner, 2000). The distinctiveness of autoethnography as an investigative process lies in its efforts to combine detailed field notes analyzing the research “field” (for example, a tennis match) with “headnotes” (Sanjek, 1990), the researcher’s actual experience of engaging with the phenomenon at hand (for example, playing tennis). The self and the ethnographic field are then symbiotic, and in effect, this combination forms the pivot of analysis (Coffey, 1999). Some ethnographic researchers in sport have seized

on this challenging development and begun to use their own embodied sporting experiences to produce a range of detailed autoethnographies or “narratives of the self” (Sparkes, 2000) relating to various sporting and physical activities, as well as to health problems such as sports injuries (Duncan, 2000; Fernandez-Balboa, 1998; Rinehart, 1995; Sabo, 1994; Silvennoinen, 1999; Sparkes, 1996, 2003; Tiihonen, 1994; Tinning, 1998).

Autoethnography is best conceptualized as a continuum along which there are numerous ways of analyzing and depicting the relationship between the personal and the cultural, so exact definition and application are somewhat problematic (Ellis & Bochner, 2000). Simply put, there is no one standard kind of autoethnographic account. In addition, researchers who are more orthodox have charged autoethnographers with solipsism, self-indulgence (Coffey, 1999), and with failing to meet the traditional research tests of validity, reliability, and generalizability. In response, proponents of autoethnography have rejected these charges and put forward what they perceive to be more appropriate, alternative criteria for the evaluation of the genre. These include evocation, authenticity, fidelity, congruence, resonance, and aesthetic appeal, to name but a few (Sparkes, 2000).

The combination of a spectrum of ways of writing autoethnography and adherence to more flexible, open-ended ways of evaluating it means, “there can be no canonical approach to this form of inquiry, no recipes or rigid formulas” (Sparkes, 1998b, p. 380). Hence, judgments regarding the most appropriate criteria to employ will always be context dependent, and agreement will be reached only via rigorous debate. Reaching agreement and passing judgment then become practical and moral tasks rather than epistemological ones (Sparkes, 1998b, p. 381). In addition, those very criteria will themselves be open to interpretation and reinterpretation over time (Smith, 1993, p. 139). By adopting this position, autoethnographers employ *criteria* in a particular fashion, conceptualizing them as characterizing traits (Sparkes, 2000) rather than something foundational (Smith, 1984) and mandatory. The distinction here is that autoethnographers “are willing to describe what one *might* do, but they are not prepared to mandate what one *must* do across all contexts and on all occasions” (Sparkes, 2000, p. 37).

Whereas much recent autoethnographic writing on sport has emphasized the need to produce more experimental and evocative accounts (Denison & Rinehart, 2000), this account is not written in that particular innovative way, although the research has been documented in that fashion elsewhere (Allen Collinson & Hockey, 2001; Hockey, 2004). Rather, the form of representation used is more orthodox because its prime purpose is to portray, in some detail, the kinds of strategic work required to maintain athletic identity in the face of prolonged injury. This is not to say that emotions emanating from what Fiske (1990, p. 90) has termed “the realm of the interior and the personal” are not touched upon in the following account, but rather the main purpose of the account is to depict the actual practices of identity maintenance. Hence, the account was written “for all practical purposes” (Garfinkel, 1984, p. vii) with that principal objective in mind. So, although the autoethnographic narrative is not, perhaps, as evocative as other papers written from the same data, it is hoped that it meets the other criteria used to judge autoethnography.

Biography and Context

In order to situate more fully the events to be depicted, some knowledge of the sporting biographies of the author and his female training partner/co-researcher will be portrayed. We have been involved in distance running for 37 and 18 years respectively, during which time we have raced distances from 10 k to the marathon. This athletic endeavor has required us to train 6 or 7 days a week, sometimes twice a day, and we have been doing so together for the past 17 years. Moreover, for the same period we have also shared a household. We are amateur runners of nonelite status (Smith, 1998) having never won an open race; our best endeavors have resulted in us being placed, on very rare occasions, in the top ten. The author is male and his training partner/co-researcher is female, and the injuries occurred when we were 51 and 37 respectively.

We are by now “vets” (veteran runners) and our engagement in athletic activity fits Stebbins’ (2001) concept of “serious leisure,” involving extensive physiological and temporal commitment (Robbins & Joseph, 1980). Therefore, in terms of “identity salience” (Stryker, 1987), being a distance runner played a dominant role in our lives. Given the time we had been occupying that role, prolonged injury constituted a truly serious emotional and psychological threat to our identities.

At the time of the specific injuries central to this account, we were training 6 days a week for at least an hour a day in the evening after work. In the same windswept November week, on different days, we both suffered knee injuries, occasioned by having to train in the winter dark. It was apparent at the onset of these injuries that they did not constitute the usual small pains that plague the habitual runner. Consequently, we rapidly arrived at a collective decision to systematically document our response to these injuries, our principal motive being to achieve something positive out of a negative experience in terms of accumulating data for eventual exploitation in the form of sociological manuscripts (Lofland & Lofland, 1985, p. 11).

The Research Process

Runners habitually keep logs of their daily training performance so the discipline of daily recording of information was already *in situ*. Rather than training logs, we constructed logs on the process of injury rehabilitation so as to document our collective and individual endeavors to return to the status of fully functioning athletes. Each of us constructed a personal log (indicated at the end of the extracts from field notes as Log 1 and Log 2, respectively) that was individually and jointly interrogated for emerging themes using a form of the constant comparative method (Glaser & Strauss, 1967). Analytic concepts and themes were generated and similarities and differences were sought within the data, and the reasons for these were interrogated. Typical and atypical cases were identified and the relationship between the two, in terms of our responses to dealing with our injuries, was also explored. We then created a third collaborative log made up of these joint themes together with any personal adaptations to injury and rehabilitation that were not mutual. Micro-tape recorders constituted the daily means of recording our experiences, and recordings were transcribed and the collaborative log constructed within a day or two of events occurring. Individually, we have acted (and continue to do so) as the “primary recipient” (Ochs & Capps, 1996) of the other’s data, providing

regular feedback and critique. This article is a product of this particular method; the data collected over a 2-year period are extracted from our joint logs. Where quotations from logs are provided, these are verbatim.

Rehabilitation Processes

We managed to avoid mental health problems and maintain positive identities largely by devising and implementing our own program of rehabilitation, which consisted of intertwined sociological and physical processes. Initially, for a period of 3 months post-injury, we consulted osteopaths, general practitioners with an interest in sports medicine, massage therapists, and physiotherapists at a local sports-injury center. Various kinds of diagnoses followed for both of us, many of which were mutually inconsistent (medial ligament damage, plica, patellar femoral damage, and others). Little of the advice and treatment (support taping, muscle strengthening exercises, various physiotherapy modalities, etc.) helped, and some of it actually made our knees much worse. Eventually we visited a national center of excellence that specialized in knee injuries. There we were given a magnetic resonance imaging (MRI) scan and subsequently told by a consultant surgeon that if we wanted a diagnosis and effective treatment, exploratory operations were needed.

At this point, despite our handing over a large amount of hard-earned money, which was also rapidly running out, medical professionals of various kinds still could not identify our knee problems and none of their treatments to-date had worked. Thus, at this juncture, infuriated by what we perceived to be inadequate and profiteering private medical treatment and our own misguided trust in medics, we rejected the surgeon's recommendation and decided to control our own rehabilitation in an act of empowerment (Seymour, 1998). We were in our own terms "broke, crocked, and stupid" and seizing control meant at least we were trying to be stupid no longer! In effect our anger drove us out of despondency, and it made us all the more determined not to lose the connection with the past decades of running. We had too much collective biographical investment in being distance runners to let this go.

So we devised our own gradual physical program of recovery, which involved a combination of trying to walk properly, then jog, and then run, together with certain remedial exercises. Interestingly, the exercises were mainly culled from women's health magazines, and we found that they were much more effective for our knee problems than those found in sports-injury self-help texts. The program was devised by trial and error, in terms of how our injured knees reacted to particular activities and their duration and intensity, and it took us a year to arrive at the point where we could run properly. The program was then sustained for another year until we were able to accomplish our normal 60-min runs once more.

Along with this physical recovery was a rehabilitative sociological process that was grounded in the interaction between us as we attempted to recover from our injuries. These two processes operated in tandem, mutually influencing each other. Thus, for example, when our knees refused to progress, our psychological and interactional patterns reflected this as we struggled to maintain rehabilitative momentum. The focus of this article is on these reflexive and interactional processes and, in particular, on the kinds of activities that were essential for the maintenance of positive athletic identities while injured.

Identity and Motives

In order to understand the process of coping interactionally with injury, some insight into how we constructed our athletic identities (Brewer et al., 1993; Brocke & Kleiber, 1994; Sparkes, 1998a) and the meaning of them is required. One way of doing this is to analyze the attributes we perceived as central to the role of distance runner. Interrogation of our field notes highlighted a number of different kinds of motive talk (Mills, 1940, p. 905), which attributed certain positive qualities and embodied states as crucial to being distance runners. In other words, we perceived ourselves as possessing these qualities and embodying these states as a consequence of practicing distance running; the combination of these formed our athletic selves.

The first of these qualities is physical endurance in terms of aerobic capacity, which determines the ability to run past the horizon, so to speak, and to keep running into the far distance for hours if necessary. Closely associated with this physical ability is the possession of a particular form of stoicism, a conditioning of the mind as it learns to endure the rigors of daily athletic training. As Crossley (1995, p. 47) has noted, the mind is inseparable from the body, they remain "reversible aspects of the same fabric." Our running minds had become accepting of a certain kind of physical suffering, and we had come to recognize that effective physical conditioning was dependent upon our being stoic, and we saw ourselves as such. Linked to stoicism were self-perceptions of ourselves as competitive individuals: against other runners, against one another to some extent, but also, crucially, as competing with our internal reflexive selves. Another dimension of our articulation of our running identities stressed our capacity to move across terrain, along roads and canals, on parks and hills, through mud and streams, over ploughed fields, in cold or heat. We conceptualized our ability to move in this fashion at will as "flying," sometimes ironically when we performed slowly and badly, sometimes elatedly when swiftly and well, but always leaving the ground momentarily in comparison to our walking lives. Strongly connected to this movement was an individual and collective perception of lightness, based on bodies that by contemporary western standards are very sparse or slight, having a very low fat-to-muscle ratio. In the mind's eye, moreover, we saw ourselves moving lightly over the ground, not pounding or hitting it, but touching it and moving on.

The construction and articulation of these collective attributes resulted in our viewing ourselves when running as being free. For running, in its essence, is a fairly basic activity requiring minimal equipment, one that allowed us to escape (Segrave, 2000) from the clutches of orthodox, consumer, chair-bound and car-dominated social behavior at least momentarily each day. Finally, this escape and the capacities and qualities that made it possible generated perceptions of difference, resulting in talk which contrasted ourselves with nonrunners; we could do things they could not or would not do. They were watching TV and we were out there; they were static and heavy while we were light and moving; they were out of condition and we were conditioned perpetually. These were the connected themes of the motive talk that we used to construct our running identities.

In Prus's (1996, p.152) terms, we engaged in "achieving identity" by attributing qualities to ourselves, using those to forge athletic selves, and then assigning contrasting identities to others (short-distance runners). All of a sudden, in 1 week, both of us were suddenly stripped of our ability to inhabit that role because our

injured knees refused to function in terms of walking, let alone running. It then took us 2 years to return to the point of training at the level we occupied before injury. This loss of role was compounded by the fact that our physical rehabilitation did not take a progressively linear form. Rather, it was characterized by a series of cycles, wherein the knees would progress but then fail under increasing load, and the rehabilitation had to take a backward step. During this period while the knees needed constant remedial attention, maintenance of our running identities also needed a sustained effort, as a field note indicates:

We are at rock bottom, we have run out of money, bled by inadequate medics, limping, stumbling along like poor arthritic pensioners. Down in an emotional pit full of rage at our knees for betraying our selves. We know this time we have real physical problems; we know we are on our own, and in for a really long haul towards hoped for recovery. We have to do some serious and sustained damage limitation work, not just to the knees but to our heads, we need to be smart, because without the latter the former will not get done, and the chances are that with all fitness drained away we will fall down that tube into the land of the couch potatoes, into Martinville, into perennially bickering territory, and into, we suspect, a dreaded terrain where we will be not who we were. We know quite simply we have to get a grip on things. (Log 1)

“Getting a grip on things” meant doing various kinds of identity work.

Routines and Settings

Our lives before the injuries had been structured by routines that combined distance-running training with full-time work. On the one hand they ensured domestic tasks were done as efficiently and speedily as possible so as to ensure that daily “training time” was secured against the constantly competing demands of post-work domesticity, nonrunning family, and friends. On the other hand, there were the routines of training itself, of running particular routes, particular distances, and particular times for those distances, on particular days of each training week. These domestic and athletic routines were inextricably linked, for without the former the latter could not be sustained.

Filled with concern about sliding into the nonathletic world, we decided to sustain our routines by securing time of at least an hour each evening. Instead of training time, it now became “rehab time.” Initially, this consisted of very small, slow walks on level ground, followed by lots of remedial exercises. Then we graduated to longer and faster walks and, eventually, to walk on local hills. Ten months later we started to trot, jog, and run our way back to knee health via the same gradual method; the whole process took 2 years.

We made a physical and temporal investment with the aim of repairing our damaged knees so we could become practicing distance runners again, and this involved continuing the commitment we had made to the distance-runner role. We rationalized that we would pour the same level of commitment into rehabilitation as we had into training. This decision had a number of implications, the most obvious being that we worked daily at physical recovery. Second, and centrally important in terms of identity maintenance, was that by doing rehabilitation as if we were training, we kept to and displayed to each other the disciplined effort

required for getting fit for athletics. We were still capable of that kind of effort, which in our injured state(s) demanded even more self- and collective discipline, particularly during the first year of recovery because nonrunning activity (such as walking together for our scheduled duration on dark, wet winter nights) provided little intrinsic satisfaction.

We also made the decision to walk over the same training routes (mainly parkland) we had used when running. We did this primarily for the reason that surfaces softer than road or tarmac were better for our damaged knees. The walking of our training routes also had an important latent function for, as we interrogated our field notes, we realized that it also maintained the particular vision we had learned as distance runners. For all of us, generally, landscape is evaluated using broad cultural codes (Rose, 1993, p. 89). More specifically, particular kinds of vision (Goodwin, 1994) are constructed via communities of practice (Lave & Wenger, 1991, p. 94), and distance runners are no exception. Just as police officers become sensitized to the flow of events on their beat (Bitner, 1967), we had become sensitized to the terrain we repeatedly ran over. This particular vision was informed by and, in turn, fed by two particular bodies of knowledge: first, the degree of hazard that existed on any part of the terrain (concealed holes, blind corners, muddy patches, vehicle traffic, cyclists, dogs, etc.) that could potentially injure us (Smith, 1997). Second, what the terrain was like (its “going”) at particular junctures and the kinds of running we could accomplish on it. So, for example, there were patches of rough parkland that we knew were not places where we could do speedwork, because ankle injuries would almost certainly result. As we walked the same routes we had run, discourses emerged reflexively and interactionally that articulated this kind of vision and the knowledge that underpinned it. These discourses focused both on past running on the terrain and aspirations for future running on it.

This practice of still seeing and talking our training routes worked to maintain our distance-runner identities, for as we sometimes joked, who else but distance runners would be interested in the particularities of a muddy patch of ground and the angle of the slope descending into it, or such like:

Tonight we were walking down the park between the line of trees and the road, the streetlights were not on for some reason, and it was very dark. It made J recall a similar barely lit night on the exact location when I got hit full tilt in the shoulder when training at a fair pace, by an errant branch, and ended up on my back! J recalls it to me, and we laugh and suggest making collective representation to the powers that control the district lighting on behalf of all distance runners who have to train in the winter dark after work. (Log 2)

Thus, the terrain we moved over in rehabilitation and the routine time we devoted to it were influential in helping us sustain our athletic identities when our damaged knees prevented us from “flying.” In contrast, other identity-maintaining work focused on the corporeal.

Appearance and Embodiment

During the 2-year period of rehabilitation, other identity-work practices were also in evidence, some of which focused on our bodily appearance. Distance running

is a particularly embodied activity in terms of the impact systematic training has on the body and the particular kinds of kit (equipment) used, both of which result in a particular kind of bodily appearance. Having occupied the distance-running role for considerable sections of our biographies, we had both developed particular self-conceptions of what we looked like as athletes (Markula, 1995; Smith & Sparkes, 2002; Sparkes & Smith, 2002). Our reflexive selves reflected back to us appearances through which we designated ourselves and others as distance runners.

Part of this designation was based on the kinds of equipment worn during running. We, for example, wore "serious" running shoes and could identify these from a considerable distance, in terms not only of make and model but also of their functional particularities (Howe, 2004, p.161). Similarly, when the weather was foul we donned Gortex jackets and similar kinds of waterproof tights; and when it was scorching, the lightest and briefest of shorts and vests, all of which resonated with distance-running associations both to us and, we knew, to other aficionados (see, e.g., Donnelly & Young, 1988; Midol & Broyer, 1995; Wheaton, 2000). During the 2 years of rehabilitative mode, we dressed during our remedial activities as distance runners, garbed in whatever athletic clothing was appropriate to the weather. Although there was an undoubted physical functionality to the daily choices made, wearing our familiar running kit also had other positive consequences. As Stone (1977) has perceptively noted: "In appearances, selves are established and mobilized. As the self is dressed, it is simultaneously addressed, for, whenever we clothe ourselves, we dress 'toward' or address some audience whose validating responses are essential to the establishment of our self" (pp. 101–102).

By continuing to dress in this particular fashion, in Goffman's (1959) parlance we kept using our regular running "props." This helped to sustain strong conceptions of our running selves both individually and collectively, our dress reflexively and interactionally working to substantiate those specific running self-images. We were working hard at getting back to running; we had not thrown our kit in the cupboard in desperation; here we were, still putting the disciplined effort in and still looking like runners.

A further dimension of our perception of appropriate distance-running appearance was that of our bodies. Prolonged distance running has a particular impact on bodies; they become, by the standards of contemporary western industrial society, slight, sparse, and honed down, with a low fat-to-muscle ratio. Ours were no exception, and general social comment over decades had made us acutely aware that those who had no knowledge of our sport usually designated us as "ill," haggard, or regular users of illegal narcotic substances. In contrast, we recognized the distance-running look and categorized particularly gaunt appearances in our selves and other runners as being "racing fit," an appearance also periodically attributed to us. Without distance running for a prolonged period, we were well aware that our bodies and, thus, our selves were very likely to change in what we perceived to be a negative way. Because we had previously valorized our athletic selves and often contrasted it with nonathletic folk, maintaining our embodied running selves became a pressing matter. Our injuries were painful but also generated emotion for, as indicated, rehabilitation did not proceed in a linear fashion but, rather, involved cyclical periods of progression and regression. Particularly during the latter periods, we individually and occasionally collectively would become "flooded out" (Goffman, 1972, p. 50ff) with negative emotions.

Feelings such as rage, disappointment, and frustration would consume us, and during these periods, there would be powerful and persistent cravings for comforting junk food and alcohol. Both of us experienced the temptation of rationales such as, "I'm not training so why should I bother watching what I eat?" Well aware of this propensity, we made a collective decision to continue the dietary regime that had been in place before our injuries. As various researchers have noted (Pike & Maguire, 2003, p. 240; Smith, 2000, p. 199), there is a salient link between committed athletes' diet and their embodied self-images. By sustaining our normal dietary regime during rehabilitation, we communicated to each other and ourselves our continued commitment to running and our continued stoicism in the face of negative emotions. The continuation of this routine nutritional practice played a fundamental part in the maintenance of our embodied running identities:

I noticed today that it's 4 months since we have run. What's interesting is that neither of us has put on any extra weight, so whilst at the moment we can't run or even jog, we still look like distance runners. That helps because I can still see myself in the mirror and not someone else. I feel that would be even more difficult if I couldn't see my proper self. I know I can't run at the moment, I know I'm totally unfit for running, but it looks as if I am still running. That's comforting because objectively I know when I start running again the experience will not be as hard as if I were carrying surplus poundage. More importantly, I feel I am still here. I can see my running self. So because I still look like I can run, the possibility is I will eventually. (Log 2)

In addition, there was another important reinforcing dimension of this embodied identity work, namely that of touch. As Leder (1990, pp. 15-18) has noted, touch and seeing are for all practical purposes united in much of what constitutes lived experience. So our running identities were sustained not only by what our bodies looked like but also by our daily touching of them: in the shower, when doing remedial exercises, when massaging the muscles around our own and the other's knees, etc. Touching our bodies invoked tactile sensations and a "stream of kinesthesias" (Leder, 1990, p.16) via our fingers. In effect, we felt to each other and ourselves like we perceived runners should feel. So, for example, as the fingers moved over hips they encountered no spare flesh, but taught skin over bone. Interactionally we would periodically utter positive comment on this combination of visual and tactile information about our running bodies in identity-affirming episodes:

We are both sitting on the floor in shorts doing straight leg raises (remedial exercises) in an attempt to strengthen our knees' stabilizing muscles. I am doing a set, and J leans over and grasps my left VMO (vastus medialis obliquus; a muscle in the quadriceps group) and says: 'Look at that, you've not run for 6 months and you've still got good VMOs!' I laugh and feel it myself, she's right, it's still got lots of bulk. I push on with my sets, pleased my runner's legs have not vanished. (Log 1)

In summary, we used time, terrain, appearance, and embodiment to do identity work. Another complementary identity-sustaining practice during our remedial struggle was that of talk.

Talking Identity

Interrogation of our field notes revealed the presence of another kind of identity work in our rehabilitative process, namely identity talk. As previously noted, a particular kind of stoicism formed part of our athletic self-images, and this stoicism is also evident in the wider subculture of distance running (Howe, 2004). So, for example, if one drops out of races in distance running, one becomes suspect both in relation to one's peers and, more importantly, to oneself. A scintilla of doubt begins to creep into the mind. There might well be a sound physiological rationale for abandoning a race, but in our experience of the distance-running subculture, such logic is anathema to runners' perceptions of the qualities that characterize real distance runners, the prime one being the capacity to endure. We viewed it as inevitable that we would have bad patches in rehabilitation and regarded these episodes as periods that we needed to surmount on the road back to athletic recovery. When racing becomes intense and one's pace threshold is approached, committed runners dig in, and we uttered this piece of argot to each other when things became painful and frustrating again, exhorting each other to "dig in," to keep working at our self-devised remedial program.

We also used a more elaborate interactional device, namely filling the emergent injured present (Mead, 1959) with stories from our running past. These were stories of fast times and competitive races: "dropped her off the back in the last mile"; stories of humor: "twenty miles done and I spent the last six desperately seeking a toilet"; and stories of angst: "three months solid training for it and I get flu in the week before the championship." Above all there was repeated recourse to stories that stressed endurance and perseverance in the face of running difficulties:

Last week on the way back home from giving conference papers, we got trapped on a very small, and very crowded train, which remained stationery for 7 hours due to technical problems. Our knees reacted really badly to being in such cramped conditions. The result is we have had to go back to fast walking from where we were (walking and trotting). We are VERY pissed off! Today over a cup of tea, I tell J. a runner's tale of when I ran the Three Peaks Race (22 miles over three fells, each around 2,000 feet). Coming down the second descent, I stumbled over and broke my glasses. I then ran down the last descent to the finish hardly being able to see the path. She tells me that was idiotic, a truly mad thing to do. I wink at her and say: "I finished didn't I!" Sociologically I know what this is really about, it's about us not giving up in the face of set backs to the knees. (Log 1)

These kinds of stories celebrated our past "gloried" athletic selves (Adler & Adler, 1989) and valorized, in particular, our capacity to endure, to keep going. They constituted examples of what we had done in the face of previous athletic adversity and reflected to us that we could still do such things in the different context of rehabilitation. The activity we were striving to return to was a particularly embodied one, and the stories we told were laden with descriptions of dealing with corporeal adversity; in Paterniti's (2000, p. 107) terms, they gave "voice" to our bodies. Such running stories, or narratives, were a central means by which we continued to construct our athletic identities, in that narrative is born out of experience and gives shape to experience (Ochs & Capps, 1996), and our prized running

selves continued to be supported by this kind of verbal interaction in the struggle towards recovery and fitness.

Differential Association

A further form of identity work involved interaction beyond ourselves and this was manifest in a number of ways. At the time of our injuries, we were entering races as nonaffiliated, that is, in an “unattached” status (paying an extra small fee). The various amateur clubs for which we had previously run were geographically distant from us, so we had no direct routine access to extensive support from individuals who understood the meaning of prolonged injury to athletes. What we did have was a continuing association with other running friends around different parts of the UK via letters, telephone calls, and e-mail. This constituted the core of our running “network” (Granskog, 1992; Nixon, 1992), and this set of social relations was imbued with a particular spectrum of meanings (Fine & Kleinman, 1983, p. 97). These were people who knew what it means to do intervals or hill sessions, who knew what hitting the wall (glycogen debt) or lactic overload involved not just technically but, more importantly, experientially. These were people with whom we had done a lot of mileage, from storm-blasted hill runs in the hard North to dangerous night runs in the inner-city South. A lot of their communication with us during rehabilitation focused on their expectations that we would eventually surmount our injuries and begin to run and compete again.

Whereas they offered sympathy, empathy, and practical advice ranging from remedial exercises to dietary supplements, the most valued part of their communication was to still perceive us as distance runners and to reflect that to us. These were peers of considerable significance to us; we had a long-term running relationship with them anchored in our mutual running pasts. They continued to validate our view of ourselves as distance runners via this supportive interchange. Occasionally, on trips, we would meet up and such positive reinforcement would be delivered face to face:

I have just met Mike who I have not seen for over a year, and his first comment was: “Well you still look like a wizened old Vet!” His usual cheeky self, but it’s nice to know, as it’s 8 months without a run. (Log 1)

A similar but more direct form of interactional reinforcement came from engaging with individuals whom we did not really know, people with whom we had a transitory and fleeting running relationship. If our running friends constituted the center of our running network, these acquaintanceships constituted the weaker ties (Fine & Kleinmann, 1983, p. 104; Smith, 1998, p. 185) within it, but this is not to say they were insignificant. We had identified these people over a number of years, encountering them on our daily training runs and designating them as real runners. This designation was accomplished by assessing their training speed, the kit they wore, their body shapes, and their facial appearance. Gradually over time, greetings were exchanged and became habitual, and brief conversations sometimes ensued about distance running if our mutual training routes coincided. We never learnt their names or anything of their biographies outside running. During our period of rehabilitation, these individuals would periodically

stop briefly and talk about our pursuit of recovery, always positively exhorting us to keep trying, as indicated by this field note:

We are on the primary (elementary) school field with its markings for kids' sports. We are trying to do very small trots of 20 seconds with recovery between them. A lad, whom we have nicknamed "Dave the Rave" because he resembles a friend of this name and because he always does lots of fast interval work on the park, runs over. He jokes we are turning ourselves into sprinters running such small intervals and leaves, saying it will be the Olympic 100 metre final for us next! (Log 2)

This network of considerable symbolic significance was then used as a resource by us to exchange insider knowledge on competitive athletics (either current or past), on training and dietary regimes, on the nuances of running equipment, and, most importantly, on our injury problems.

Another practice that helped sustain our athletic self-images was our continued close following of specialist magazines devoted to athletics and the discussions that emerged from it. Competitive runners are usually well aware of their rivals' times and race placing, not just at the front but also much further down the field (Smith, 1998). Once experienced, runners generally know against whom they are racing in terms of placing and times over particular distances within particular geographical areas. We used the published race results to locate ourselves competitively and to estimate how we would have fared had fortune allowed us to race. These publications also contain extensive training schedules for all kinds of distance running events (10 k, 10 mile, half-marathon, etc.). They outline the training frequency, distances, and speeds that need to be attained in order to achieve competitive race times for particular events. Perusing these schedules, we still read them with a veteran's mind, understanding, for example, what it requires in terms of effort and feelings to complete 10×400 meters in 75 s each, despite the fact we could not even jog to the corner of the street.

Through these various forms of association, we continued to engage with the distance-running body of knowledge, to use that knowledge, and thus, to identify with the role we had practiced for decades. Via these varied interchanges we still engaged with the particular social world of distance running while suffering physical incapacity.

The Modified Running Self

Having depicted the various kinds of work done to maintain our athletic identities while injured, it remains to portray what kind of running selves emerged from this period. We had successfully maintained the felt and interactional dimensions of being distance runners, but nevertheless, there had been changes, some of them quite significant. When we set out on our rehabilitative program, we had the objective of regaining what Charmaz (1987, p. 287) has termed the "restored self," which involves returning to physical selves similar to those before injury and, also, establishing continuity with those selves in the present. Although we did manage to return to running and racing, the selves that have done so are not wholly the same as those that were evident pre-injury. As Corbin and Strauss (1987, p. 264) note in relation to restoring the self after illness and injury,

The degree to which one's identity is affected depends upon the number and salience of aspects of self that are lost, the possibility of their recovery . . . and the ability to come to terms with the losses and build a new conception of self around the limitations.

Thanks to our sustained sociological and corporeal work, we lost none of the salient aspects of our running identities. Our somatic forms had remained visually the same and felt so, we had continued using our athletic knowledge of terrain, as well as the distance-running subculture, and our communication with each other and other runners reflected this. At the same time the self-images we held, which included the tried and tested capacity to endure, were sustained by our embodied commitment to our self-devised rehabilitative physical program. We looked like runners to ourselves as audience, and we acted like runners by persevering and sustaining momentum, despite regular setbacks on the road to recovery. Yet there were (and still are) changes to our athletic identities. As the 2 years came to a close, we were aware that the injuries had seriously threatened our capacity to run *in toto*. Consequently, it was no longer a question of racing well or badly, or a fast or slow training pace, it was a question of being able to run at all. A reconfiguration of the meaning of running had taken place for both of us:

Great! We have now run for an hour each day for a week, no speed in it, but we are back to where we were 2 years ago! All the effort and all the patience have been worth it. It's not quite the same, though; I can feel that, and J does also. We are less obsessed by the short-term perspective: times for races, times for training efforts, etc. I suppose the experience has given us a lesson in terms of what is really important, namely, just keeping the daily training going. So, in a way we are different kinds of runners now. We are back physically but in terms of our heads we have moved. (Log 2)

The result of this change of meaning at the level of identity is what Charmaz (1994) has termed a transcendence of self. This transcendence involved a renewal and re-evaluation of our athletic selves, which has led to particular choices and lines of action. The outcome is that we now perceive ourselves as more cautious and wiser athletes than we were pre-injury. The caution is evident in revised training practices aimed at avoiding injury in the future. Alternative training routines geared to minimizing road running in favor of softer surfaces are now followed. In general, anything which places undue stress on the knees is avoided as far practicable, including repeat hill runs and a whole gamut of strengthening exercises particularly squats. Previously, we would have trained (and sometimes raced) regardless of heavy colds and pain.

We had come to accept certain levels of discomfort and pain as part of distance running and racing. The pain of our knee injuries, however, produced no positive return for suffering; it had reduced us to the point of being unable to accomplish mundane physical activities such as walking down stairs or even sleeping (unless we had a cushion between our knees) and propelled us into a 2-year journey of rehabilitation and recovery. This shocked us into a collective realization that more injuries of this magnitude would call our continued involvement in distance running seriously into question. The result is that our dogmatic and inflexible stance toward our running bodies has given way to a more flexible approach. There is now a more acute listening to what our bodies are signaling,

particularly in relation to pain, for it was pain in all its guises (stabbing, crunching, nagging, sickening) that ultimately forced us to pay attention to the major lesson of our sporting injury experience.

In this sense we are wiser because we have adopted a more compassionate stance towards our embodied selves. Although we still race, there is now much less investment in achieving particular times or positions that previously had been emblematic of our athletic selves (Smith, 2002, p. 350). Such short-term objectives have now been replaced by the long-term objective of aspiring to run and race into future decades for as long as possible. In that particular sense, our knee injuries have brought about modified running selves, involving a partial change to our athletic identities. We have transformed ourselves from being primarily racers to runners who, on occasion, race. This was not an unproblematic transformation, but we were perhaps aided by being veterans who acknowledged that our best times and best races had been run decades ago. If we had been much younger elite athletes in the throes of a promising athletic career and had suffered major injury, such a transcendence involving a re-evaluation of the athletic self and the acceptance of a less “serious” athletic identity might well have been much more problematic if not impossible (Bale, 2004, p.102).

Conclusion

This article has portrayed the various kinds of identity work undertaken during a 2-year struggle to return to distance running and racing. It was this work that helped maintain our athletic identities during a bleak period in our running biographies. Neither of us suffered mental health problems because we actively labored reflexively and interactionally to maintain positive identities during the process of recovery.

Crow (1989) has defined *strategy* as actions that are conscious, coherent, and comprehensive; actions aimed at a particular goal (in this case, recovery from injury); and actions with some rational calculation. In a sense, our set of identity work practices can thus be seen as a strategy. The relationship between this labor and our running identities, however, was not always straightforward. For example, some of the activities, such as converting training to rehabilitation time and maintaining our previous diet, were initiated with a direct understanding that they would do identity work and help shore up credible athletic selves in the face of prolonged injury. That is, they were consciously developed and aimed at an objective. Other activities were engaged in with no such immediate understanding. For example, the positive outcome of walking our running routes and thus maintaining our running vision, or the positive corporeal sensation of still feeling that we had athletic bodies when massaging them. It was only as rehabilitative time passed and we interrogated our field notes that we realized that these activities also functioned as identity affirming. So there was an initial strategy and aim that was strengthened as we understood, via analysis, the benefit of other identity-maintaining activities. Over the 2 years, we needed all of these kinds of identity work because rehabilitative progress was periodically lost as the knees rebelled against an increased training load.

When these setbacks occurred, we would be thrown back down what we termed our “time-tube” (Allen Collinson, 2003) to experience individually, and on occasion collectively, a repeat of emotions experienced when initially injured:

anguish, anger, frustration, and despair. Doing identity work during such extremely negative junctures was particularly important because the work sustained our athletic selves, the possession of which provided the impetus to continue to practice our self-devised program of physical rehabilitation.

In the UK, the vast majority of distance runners are amateurs who either run for their local clubs or compete in an “unattached” status. This climate of amateurism, with its accompanying paucity of resources, means that nonelite injured individuals generally have no institutional sports-medicine resources available to them in terms of treatment or counseling, unlike, for example, the collegiate sporting system in the USA (Walk, 1997). Serious athletic injury then casts amateur runners into a traumatic limbo as they seek expensive medical help for their physical injury, grapple with the social-psychological consequences of a present without running, and face the ambiguity of a future where that state could also prevail

The presence of our training partner was of central importance to our capacity to maintain a positive perception of our running selves. The outcome of this prolonged work was a high degree of intersubjectivity (Mead, 1934, p. 8), resulting in a fully social voice for each of us, a voice that we both understood was being acknowledged in a highly empathetic way. Consequently, we did not suffer any significant degree of psychological isolation as injured athletes (Johnston & Carroll, 2000), serious loss of morale or motivation to rehabilitate our injuries, or any serious erosion of our athletic identities. Athletes usually sustain injuries on their own, and it is unusual for injured athletes actually to share a household. In contrast, we are convinced that in our case the presence of daily empathetic support proved crucial to our recovery from injury.

Our return to distance running was achieved by formulating our own program of physical measures to promote recovery of our injured knees after total disillusionment with professional medical treatment. Just as important, and closely linked with that physical program, was the amalgam of identity-work practices that helped sustain the momentum of the physical program. Without the regular practice of our identity work over 2 years, the physical program and, thus, our recovery would almost certainly have fallen by the wayside in the face of the periodic setbacks we experienced.

Identity work as a dynamic, strategic, “self-help” (Weston, 1992; Williams, 2003, p. 147) device in athletic rehabilitation would thus seem to be a topic needing serious consideration by professionals involved in the care and treatment of injured athletes. Furthermore, Snow and Anderson’s (1995) symbolic interactionist classification of such work, embracing contextual, corporeal, interactional, and associational dimensions, would also appear to be a valuable resource on which to start to base the development of the sociological component of such athletic rehabilitation programs. The self-help component merits particular attention in relation to amateur sports participants who, in the UK at least, have inadequate access to either sports medicine or sports psychology (Howe, 2004; Joyce, 2001).

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References

- Adler, P., & Adler, P. (1989). The gloried self: The aggrandisement and the constriction of self. *Social Psychological Quarterly*, **52**, 299-310.
- Allen Collinson, J. (2003). Running into injury time: Distance running and temporality. *Sociology of Sport Journal*, **20**, 331-350.
- Allen Collinson, J., & Hockey, J. (2001). Runners' tales: Autoethnography, injury and narrative. *Auto/Biography*, **IX**, 95-106.
- Bale, J. (2004). *Running cultures: Racing in time and space*. London: Routledge.
- Bitner, E. (1967). The police on skid row. *American Sociological Review*, **32**, 699-715.
- Blumer, H. (1969). *Symbolic interactionism: Perspective and method*. Englewood Cliffs, NJ: Prentice Hall.
- Brewer, B., Van Raalte, J., & Linder, D.E. (1993). Athletic identity: Hercules' muscles or Achilles' heel? *International Journal of Sport Psychology*, **24**, 237-254.
- Brock, S.C., & Kleiber, D.A. (1994). Narrative in medicine: The stories of elite college athletes' career-ending injuries. *Qualitative Health Research*, **4**, 411-430.
- Charmaz, K. (1987). Struggling for a self: Identity levels of the chronically ill. In J. Roth & P. Conrad (Eds.), *Research in the sociology of health care: A research manual* (pp. 283-321). Greenwich, CT: JAI.
- Charmaz, K. (1994). Discoveries of self in illness. In M.L. Dietz, R. Prus, & W. Shaffir (Eds.), *Doing everyday life: Ethnography as human lived experience* (pp. 226-242). Mississauga, Canada: Copp Clark Longman Ltd.
- Coffey, A. (1999). *The ethnographic self: Fieldwork and the representation of identity*. London: Sage.
- Corbin, J., & Strauss, A. (1987). Accompaniments of chronic illness: Changes in body, self and biography, and biographical time. In J. Roth & P. Conrad (Eds.), *Research in the sociology of health care. A research manual* (pp. 249-281). Greenwich, CT: JAI.
- Crossley, N. (1995). Merleau-Ponty, the Elusive Body and Carnal Sociology. *Body and Society*, **1**, 43-63.
- Crow, G. (1989). The use of the concept of 'strategy' in recent sociological literature. *Sociology*, **23**, 1-24.
- Curry, T.J. (1993). A little pain never hurt anyone: Athletic career socialization and the normalization of sports injury. *Symbolic Interaction*, **16**, 273-290.
- Curry, T.J., & Strauss, R.H. (1994). A little pain never hurt anybody: A photo-essay on the normalization of sports injuries. *Sociology of Sport Journal*, **11**, 195-208.
- Denison, J. (2002). Writing a 'true' sports story. *Auto/Biography*, **X**, 131-137.
- Denison, J., & Rinehart, R. (2000). Introduction: Imagining sociological narratives. *Sociology of Sport Journal*, **17**, 1-4.
- Donnelly, P., & Young, K. (1988). The construction and confirmation of identity in sport subcultures. *Sociology of Sport Journal*, **5**, 197-211.
- Duncan, M.C. (2000). Reflex: Body as memory. *Sociology of Sport Journal*, **17**, 60-68.
- Ellis, C., & Bochner, A. (2000). Autoethnography, personal narrative, reflexivity: Researcher as subject. In N.K. Denzin & Y.S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 733-768). London: Sage.
- Evans, L., Hardy, L., & Fleming, S. (2000). Intervention strategies with injured athletes: An action research study. *The Sport Psychologist*, **14**, 188-206.
- Fernandez-Balboa, J.-M. (1998). Transcending masculinities. In C. Hickey, L. Fitzclarence, & R. Mathews (Eds.), *Where the boys are* (pp. 121-139). Geelong, Australia: Deakin University Press.

- Fine, G.A., & Kleinman, S. (1983). Network and meaning: An interactionist approach to structure. *Symbolic Interaction*, **6**, 97-110.
- Fiske, J. (1990). Ethnosemiotics: Some personal and theoretical reflections. *Cultural Studies*, **4**, 85-99.
- Garfinkel, H. (1984). *Studies in ethnomethodology*. Cambridge: Polity.
- Glaser, B., & Strauss, A. (1967). *The discovery of grounded theory*. Chicago: Aldine.
- Goffman, E. (1959). *The presentation of self in everyday life*. New York: Doubleday Anchor.
- Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Englewood Cliffs, NJ: Prentice Hall.
- Goffman, E. (1972). *Encounters*. Harmondsworth, UK: Penguin.
- Goodwin, C. (1994). Professional vision. *American Anthropologist*, **96**, 606-663.
- Granskog, J. (1992). Tri-ing together: An exploratory analysis of the social networks of female and male triathletes. *Play and Culture*, **5**, 76-91.
- Hockey, J. (2004). Knowing the route: Distance runners' mundane knowledge. *Sociology of Sport Online*, **7**, 1-10. Retrieved June 21, 2004, from http://physed.otago.ac.nz/sosol/v7i1/v7i1_3.html
- Howe, P.D. (2001). An ethnography of pain and injury in professional rugby union. *International Review for the Sociology of Sport*, **36**, 289-303.
- Howe, P.D. (2004). *Sport, professionalism and pain: Ethnographies of injury and risk*. London: Routledge.
- Johnston, L.H., & Carrol, D. (2000). Coping, social support and injury: Changes over time and the effects of level of sports involvement. *Journal of Sports Rehabilitation*, **9**, 290-303.
- Joyce, P. (2001). Governmentality and risk: setting priorities in the new NHS. *Sociology of Health & Illness*, **23**, 594-614.
- Lave, J., & Wenger, E. (1991). *Situated learning: Legitimate peripheral participation*. Cambridge: Cambridge University Press.
- Leder, D. (1990). *The absent body*. Chicago: University of Chicago Press.
- Lofland, J., & Lofland, L.H. (1985). *Analysing social settings: A guide to qualitative observation and analysis* (3rd Edition). Belmont, CA: Wadsworth.
- Markula, P. (1995). Firm but shapely, fit but sexy, strong but thin: The postmodern aerobicizing female bodies. *Sociology of Sport Journal*, **12**, 424-453.
- McCall, G.J., & Simmons, J.L. (1978). *Identities and interactions*. New York: Free Press.
- Mead, G.H. (1934). *Mind, self and society*. Chicago: University of Chicago Press.
- Mead, G.H. (1959). *The philosophy of the present* (first published in 1932). A.E. Murphy (Ed.). Preface by J. Dewey. La Salle, IL: Open Court.
- Mead, G.H. (1964). The social self. In A. Reck (Ed.) *Selected writings: George Herbert Mead* (pp. 142-149). Chicago: University of Chicago Press.
- Midol, N., & Broyer, G. (1995). Towards an anthropological analysis of new sport cultures: The case of whiz sports in France. *Sociology of Sport Journal*, **12**, 204-212.
- Mills, C.W. (1940). Situated actions and vocabularies of motive. *American Sociological Review*, **5**, 904-913.
- Nixon, H.L. (1992). A social network analysis of influences on athletes to play with pain and injuries. *Journal of Sport and Social Issues*, **16**, 127-135.
- Ochs, E., & Capps, L. (1996). Narrating the self. *Annual Review of Anthropology*, **25**, 19-43.
- Paterniti, D.A. (2000). The micropolitics of identity in adverse circumstance. *Journal of Contemporary Ethnography*, **29**, 93-119.

- Petrie, G. (1993). Injury from the athlete's point of view. In J. Heil (Ed.), *Psychology of Sport Injury* (pp. 17-23). Champaign, IL: Human Kinetics.
- Pike, E.C.J. (2002, November). *Doctors just say, 'Rest and take ibuprofen': The case of non-orthodox health care*. Paper presented at the annual meeting of the North American Society for the Sociology of Sport. Indianapolis.
- Pike, E.C.J., & Maguire, J.A. (2003). Injury in women's sport: Classifying key elements of "risk encounters." *Sociology of Sport Journal*, **20**, 232-251.
- Prus, R. (1996). *Symbolic interaction and ethnographic research*. Albany: State University of New York Press.
- Rinehart, R. (1995). Pentecostal aquatics. *Studies in Symbolic Interaction*, **19**, 109-121.
- Robbins, J.M., & Joseph, P. (1980). Commitment to running: Implications for family and work. *Sociological Symposium*, **30**, 87-108.
- Rose, G. (1993). *Feminism and geography: The limits of geographical knowledge*. Cambridge: Polity Press.
- Sabo, D. (1994). Pigskin, patriarchy and pain. In M.A. Messner & D.F. Sabo (Eds.), *Sex, violence and power in sports: Rethinking masculinity* (pp. 82-88). Freedom, CA: The Crossing.
- Sanjek, R. (1990). *Fieldnotes: The makings of anthropology*. Ithaca, NY: Cornell University Press.
- Segrave, J.O. (2000). Sport as escape. *Journal of Sport and Social Issues*, **24**, 61-77.
- Seymour, W. (1998). *Remaking the body: Rehabilitation and change*. London: Routledge.
- Silvennoinen, M. (1999). Anguish of the body. In A. Sparkes & M. Silvennoinen (Eds.), *Talking bodies* (pp. 93-98). Jyväskylä, Finland: SoPhi.
- Smith, G. (1997). Incivil attention and everyday intolerance: Vicissitudes of exercising in public places. *Perspectives on Social Problems*, **9**, 59-79.
- Smith, G. (2002). Racing against time? Aspects of the temporal organization of the runner's world. *Symbolic Interaction*, **25**, 343-362.
- Smith, J. (1984). The problem of criteria for judging interpretive inquiry. *Educational Evaluation and Policy Analysis*, **6**, 379-391.
- Smith, J. (1993). *After the demise of empiricism: The problem of judging social and educational inquiry*. Norwood, NJ: Ablex.
- Smith, S.L. (1998). Athletes, runners, and joggers: Participant-group dynamics in a sport of individuals. *Sociology of Sport Journal*, **15**, 174-192.
- Smith, S.L. (2000). British nonelite road running and masculinity. *Men and Masculinities*, **3**, 187-208.
- Smith, B., & Sparkes, A.C. (2002). Men, sport, spinal cord injury and the construction of coherence: Narrative practice in action. *Qualitative Research*, **2**, 143-171.
- Snow, D.A., & Anderson, L. (1995). The problem of identity construction among the homeless. In N.J. Herman & L.T. Reynolds (Eds.), *Symbolic interaction: An introduction to social psychology* (pp. 239-258). New York: General Hall.
- Sparkes, A.C. (1996). The fatal flaw: A narrative of the fragile body-self. *Qualitative Inquiry*, **2**, 463-494.
- Sparkes, A.C. (1998a). Athletic identity: An Achilles' heel to the survival of the self. *Qualitative Health Research*, **8**, 644-664.
- Sparkes, A.C. (1998b). Validity in qualitative inquiry and the problem of criteria: Implications for sport psychology. *The Sport Psychologist*, **12**, 363-386.
- Sparkes, A.C. (1999). Exploring body narratives. *Sport, Education and Society*, **4**, 17-30.
- Sparkes, A.C. (2000). Autoethnography and narratives of self: Reflections on criteria in action. *Sociology of Sport Journal*, **17**, 21-43.

- Sparkes, A.C. (2003). Bodies, identities, selves: Autoethnographic fragments and reflections. In J. Denison & P. Markula (Eds.), *Moving writing: Crafting movement in sport and research* (pp. 51-76). New York: Peter Lang.
- Sparkes, A.C., & Smith, B. (2002). Sport, spinal cord injury, embodied masculinities, and the dilemmas of narrative identity. *Men and Masculinities*, **4**, 258-285.
- Stebbins, R.A. (2001). *New directions in the theory and research of serious leisure*. Lewiston: Edwin Mellen.
- Stone, G.P. (1977). Appearance and the self. In A.M. Rose (Ed.), *Human behaviour and social processes. An interactionist approach* (pp. 86-118). London: Routledge and Kegan Paul.
- Stryker, S. (1987). Identity theory: Developments and extensions. In K. Yardley & T. Honess (Eds.), *Self and identity: Psychosocial perspectives* (pp. 89-103). New York: John Wiley.
- Tiihonen, A. (1994). Asthma. *International Review for the Sociology of Sport*, **29**, 51-62.
- Tinning, R. (1998). 'What position do you play?' In C. Hickey, L. Fitzclarence, & R. Matthews (Eds.), *Where the boys are* (pp. 109-120). Geelong, Australia: Deakin University Press.
- Tsang, T. (2000). Let me tell you a story: A narrative exploration of identity in high performance sport. *Sociology of Sport Journal*, **17**, 44-59.
- Walk, S. (1997). Peers in pain: The experiences of student athletic trainers. *Sociology of Sport Journal*, **14**, 22-56.
- Weston, A. (1992). On the body in medical self-care and holistic medicine. In D. Leder (Ed.), *The body in medical thought and practice* (pp. 69-84). Dordrecht, The Netherlands: Kluwer.
- Wheaton, B. (2000). "Just do it": Consumption, commitment, and identity in the windsurfing subculture. *Sociology of Sport Journal*, **17**, 254-274.
- Williams, S.J. (2003). *Medicine and the body*. London: Sage.
- Wiese-Bjornstal, D.M., Smith, A.M., Shaffer, S.M., & Morrey, M.M. (1998). An integrated model of response to sport injury: Psychological and sociological dynamics. *Journal of Applied Sport Psychology*, **10**, 46-69.
- Young, K., McTeer, W., & White, P. (1994). Body talk: Male athletes reflect on sport, injury, and pain. *Sociology of Sport Journal*, **11**, 175-194.
- Young, K., & White, P. (1995). Sport, physical danger and injury: The experience of elite women athletes. *Journal of Sport and Social Issues*, **19**, 45-61.

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