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ABSTRACT
INTRODUCTION: Women with physical disabilities are often socially defined by their disabilities. This imposed social identity or “master status” may override other attempts to establish an identity apart from disability. Little is known about what role sport participation has in identity development in women with physical disabilities. The purpose of this study was to describe the experience of identity development through sport participation for women with physical disabilities. More specifically, the objectives of this study were (a) to understand the role sport plays in identity, (b) to understand the meaning of athletic identity for women with physical disabilities, and (c) to bring a female disability perspective to our understanding of identity within the context of sport.

METHODOLOGY: An inductive qualitative research approach that utilized phenomenological research methods was employed for this study. The experiences of four women between the ages of 19 and 31 who had physical disabilities and who had participated in competitive and recreational sport activities were captured using semi-structured face-to-face interviews, artefact descriptions, and field notes. Identity theory was used to facilitate the interpretation of the findings.

RESULTS: The experiences of the women indicated that participation in competitive and recreational sport provided a strong athletic identity that enhanced other identities. The thematic analysis revealed two themes: (a) challenging otherness and (b) putting on the athlete role. Challenging otherness included the subthemes: (a) symbols of role expectations and (b) athlete as supercrip. Putting on the athlete role included the subthemes: (a) focus on self and (b) training the body.

DISCUSSION: Identity development is a complex process that is further complicated for women with physical disabilities by the assumed symbols and meanings ascribed to their disabilities. The participants were active in mediating and moderating these meanings to create athletic identities. Sport contexts enabled the participants to focus on identity and body and develop positive symbols and meanings. Through sport they created identity definitions beyond the
“otherness” experienced within larger social structures. The participants challenged the otherness which they often experience within these structures.
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DEDICATION

I dedicate this work to my parents, who taught me that our experiences in life are not always easy, but always rewarding. Thank you for love, support and encouragement.
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1. INTRODUCTION

This research project is a culmination of a variety of areas of interest that have always been meaningful to me. I am often asked what program I am attending and what my thesis is about. When I mention Kinesiology and women with disabilities, my responses lead to more inquires about my background and how I became interested in this field. Once I mention that I received my undergrad in Anthropology, more questions are raised. My introduction into this field is often viewed as a non traditional path; however, I have always moved through education with purpose, creating unique opportunities to develop my knowledge in this area.

Looking back, the experiences of my mother and sister have driven many of my questions. In unique, yet important ways, physical activity was part of their lives. My mother has a fused hip, which can have a great impact on her mobility. As she is a farmer and spends long periods of time outside, often walking long distances every day, this can become an issue, causing pain that limits her mobility. Staying healthy and physically active has always been important to my mother. She is constantly in motion (it can get very tiring simply watching her). She cannot sit still. Whenever anyone tries to tell her to sit down and relax, her response back is “No. If I sit too long, my leg will start to ache and then it will just be worse tomorrow.” She is especially cognizant of the fact that allowing her mobility to be limited will negatively impact her health and other areas of life. She had a medical issue that easily could have become her “master status”\(^1\) and allowed her to opt out of much of the physical labour of farming. If she had though, she would not have been able to identify as being a farmer. As well, limiting mobility would have meant losing independence, productivity, and the feeling of being needed and successful in her roles as a farmer, mother, and wife.

Another influence on my interest in physically active lifestyles and impairment was my sister who was born with asthma. As a child she was in and out of the hospital a number of times and was such a tiny little thing, her growth impacted by the decreased levels of oxygen available in her system. During this time our lives were organised around the asthma. Changes were made so that the house was dust and mould free. We had inside and outside clothes. Smoking was not allowed in the house (much to the chagrin of family friends). Family camping trips and activities

\(^1\) Master status refers to the predominant characteristics that others assigned to people and for which they become identified (Anderson & Taylor, 2005; Lennard, 2006).
were organised around whether electricity was available and when she had to use her nebuliser\(^2\), invitations to friends’ houses were accepted based on whether triggers were present – did they have animals in the house, did anyone smoke? She was always the ‘sick one’. While in high school, a switch to a new, more effective medication greatly improved her health and my sister has rarely had an asthma attack since then. However, by this time her body had been permanently damaged. Her lung capacity has been seriously compromised. I’ll never forget when she told me, “Robin, you know how breathing is something we aren’t supposed to think about? I’ll never be able to forget about it. I’m always aware of my breathing.” She is always physically aware of the process of drawing air in and out of her lungs.

Because of this awareness, my sister took up running in university. She wanted to stem the impact asthma had on her body and to strengthen it so she would have an improved quality of life as she grew older. She has become an avid runner; bemoaning the days she cannot get in her 6 km, and has become one of the most physically fit people I know. Physical activity has led to changes in other areas of her life as well. After university, she decided to join a police force. Her improved physical condition allowed her to move through training successfully and enter into a field that can be very physically demanding.

While pursuing my undergraduate degree in Anthropology I discovered I had picked my chosen field without figuring out exactly what I wanted to do with it. Working to my benefit was the fact that Anthropology was designed to allowed students to explore different organisational and cultural systems. While taking a class on Medical Anthropology, I found my niche. I had never heard health discussed in such a holistic manner, a way that put the person first, that described health from a viewpoint other than the pathological perspective that pervades the medical profession. I also gained a better understanding of the unique perspective women and children have about their health.

I became interested in how women and children understand their own health. Health, while generally presented as illness, weakness, or dependency, can have a positive interpretation as well and is not always linked with perceived physical limitations. Women, in particular, are often seen to be underrepresented within this positive interpretation of health (Vidaver, Lafleur, Tong, Bradshaw, & Marts, 2000).

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\(^2\) A nebuliser changes medication from a liquid to a mist so that it can be more easily inhaled into the lungs.
While working as a research assistant within the College of Kinesiology, I developed a further interest in how women with physical disabilities view health, particularly within the scope of physical activity. In talking with these women, I heard their stories of how sport had created an impact in their lives and provided an opportunity to communicate with able-bodied individuals in a way that diminished what is often considered the “master status” identity of disability assigned to persons with disabilities (Anderson, & Taylor, 2005; Lennard, 2006).

The study of identity follows two traditions: identity formulation during the transition to adulthood and the process of identity self-maintenance (Côté & Levin, 2002). My interests are specific to identity maintenance of women with disabilities within mainstream contexts, and sport more specifically. Moreover, I am interested in understanding the experience of sport and identity of women with disabilities as it has been suggested from a symbolic interactionist perspective, that “they may be viewed as engaged in the process of ‘oppositional identity work’ as they attempt to transform a potentially discrediting identity (i.e., disability) into a crediting one (i.e., athleticism)” (Berger, 2008, p. 650).

Generally, the term identity refers to an individual’s mental representation of his or her personal and social characteristics, and is the result of a complex, lifelong process that involves the repeated synthesis, change, and re-synthesis of these mental representations (Groff & Kleiber, 2001). However, this definition does not address the impact larger social structures can have on an individual’s identity within a given situation. Howard (2000) illustrates this point, positing that identity, while carrying the weight of being the sense of who one is, is created within the context of quickly changing social situations that reflect changes within groups and networks, as well as larger social structures.

Commitment to a specific identity is dependent on the quality of social relationships associated with it. If the social network associated with an identity is highly valuable to an individual, he or she is more likely to maintain that identity (Hogg, Terry, & White, 1995). Actions of others within a specific environment or social context may reinforce or challenge one’s identity. The actions of those close to an individual can carry the most importance, particularly as people are constantly entering and leaving various social worlds. This means identity support can be unstable, so individuals constantly search to legitimize the identity to which they are committed (e.g., rejection notions of weakness and dependency while seeking affirmations of health and strength). Affirmation of identity is a healthy, ongoing process of
continual definition, validation, maintenance, and enhancement undertaken by virtually all individuals (Haggard & Williams, 1992).

Within the study of social development, there has been the notion that disability creates “otherness” that results in the labelling of people with disabilities because of their perceived differentness (Sullivan, 2005). The body is a powerful medium for building identity and a number of symbols can become attached to it (Overboe, 1999). The differentness is often perceived to be that of weaknesses, vulnerability, and dependency (Austin, Bergum, & Dossetor, 2003). These assigned characteristics further create a notion of passivity for the recipients of the devaluing label of disability (Overboe, 1999; Williams, 1994). People given the label of disability therefore need to be particularly active in creating their own identities to work against stereotypical beliefs about those with disabilities (Williams, 1994). This is particularly the case as the contemporary ideology of inclusive has resulted in more frequent contact with those who do not have disabilities than those who do (Allan, 2005; Gill, 1997). A documented response to developing an awareness of how they are viewed by others, and concomitant negative stereotypes may be an attempt to make themselves acceptable by attempting to pass by being as “normal” as possible (Reeves, 2002). The term ascribed to people who achieve a high level of success while participating in sport or ‘overdo’ it is supercrip (Shakespeare, 1996).

In general, participation in sport is presumed to build character, teach discipline, and prepare an individual for other areas of life by developing appropriate good moral values and beneficial personality and behavioural traits (Ruddell & Shinew, 2006). Sport can have negative outcomes as well, particularly for individuals with physical disabilities. In addition to potential overtraining of the body and subsequent injury, participation in sport can also lead to being labelled as a supercrip, an assigned identity that can usurp the hard work, training, and dedication people with physical disabilities can have to their sport.

The sport context contributes to identity development because within it individuals actively seek to understand themselves in relation to the world around them, and to maintain a sense of self-consistency and positive regard (Haggard & Williams, 1992). Within this context of socialization, individuals actively interpret what is seen, heard, and considered appropriate behaviour through acceptance, resistance, and revision of the aforementioned actions and messages (Ruddell & Shinew, 2006).
While the goals and values found in sport make it a potentially valuable context for identity exploration (Groff & Kleiber, 2001; Sherrill, Hinson, Gench, Kennedy, & Low, 1990), it has been a neglected context for research in this area (Shaw, Kleiber, & Caldwell, 1995). Particularly when sport, which is “of the body”, is used as a context for exploration of identity development among women with physical disabilities (Shaw, Kleiber & Caldwell, 1995). However, sport does provide a basis for an individual to develop a sense of competence within it as well as other social domains, such as work, family, and school (Blinde & McCallister, 1999; Blinde & McClung, 1997). Research into sport for self-expression and personal development within social contexts as it related to the self-protective identify experiences of persons with disabilities is warranted (Shaw, Kleiber, & Caldwell, 1995).

As an able-bodied woman I discovered my ableism, a perspective that I have never had to examine before. I began to think more about what role sport and identity for women with physical impairments, especially considering the disadvantaged identities that I and others often assigned to people with impairments. This research is part of my ongoing journey.

3 “Ableism is the oppressions of people with disabilities, placing them at the bottom of a hegemonically defined social hierarchy where a higher value is put on normal bodies that are part of the working majority” (Hardin & Hardin, 2004, p. 6)
2. REVIEW OF LITERATURE

2.1. What is Identity?

Identity is a confusing and complex construct to understand. Much research has been undertaken in the area to create a better understanding of what identity is and what it means for individuals, social organisations, and society in general. Numerous definitions of identity have since appeared in the psycho-social research literature. Stone (1962) defined the concept of identity in the following way:

Almost all writers using the term imply that identity establishes what and where the person is in social terms. It is not a substitute word for “self”. Instead, when one has identity, he is situated – that is, cast in the shape of a social object by the acknowledgement of his participation or membership in social relations. One’s identity is established when others place him as a social object by assigning him the same words of identity that he appropriates for himself or announces. It is in the coincidence of placements and announcements that identity becomes a meaning of the self. (p. 93)

Gilroy (1997) provided a more contemporary explanation of identity that also reinforced the social relatedness of identity:

Identity is always particular, as much about difference as about shared belonging....identity can help us to comprehend the formation of the fateful pronoun ‘we’ and to reckon with the patterns of inclusion and exclusion that it cannot help but to create. (p. 301)

Identity is often taken for granted. We generally know who we are, have a sense of others who are around us, and how we choose to relate to them. It is only when we find our sense of identity questioned that it comes to consciousness. Mercer (1994) stated, “Identity only becomes an issue when it is in crisis, when something assumed to be fixed, coherent and stable is displaced by the experience of doubt and uncertainty” (p. 4). Resultantly, identities can affect real human experience, mundane and extraordinary, in matters of everyday life (Jenkins, 2008). This experience, in turn, implies relationships with oneself, others and the object-world and it is
always dynamic and changing (Kunnen, Bosman, Van Halen, & Van der Meulen, 2001). For these reasons, I would suggest that identity is worthy of study and understanding.

Identity first emerged as a topic of interest to researchers in the 1940s, and today can be understood from a number of different perspectives. Erik Erikson is credited with being the most influential theorist in the study of identity formulation, introducing identity as a theoretical construct to the social sciences in the 1950s and 60s. He described identity as the feeling of self-sameness and the continuity of this feeling over time and place (Kroger, 2007). Erikson originally conceived the notion of identity crisis based on his clinical work treating war-trauma soldiers during the Second World War who he perceived were experiencing identity confusion and identity disassociation (Côté & Levine, 2002).

Others have also supported the dynamic processes involved in identity formation, highlighting the need for opportunities for self-expression, social feedback, and opportunities for revision (Kleiber & Kirshnit, 1991; Patterson, 2000). According to Waterman, (as cited in Kleiber & Kirshnit, 1991, pp. 194), identity is “comprised of goals, values, and beliefs that expresses who an individual is and to which he or she is unequivocally committed.” Moreover, identities are the internal expectations of the self that are attached to the roles played in networks of social relationships (Stryker & Vryan, 2003).

If an identity is challenged, the individual will take steps to maintain or to restore the prior identity (Siebert, Mutran, & Reitzes, 1999). Accordingly, an individual will set identity standards (e.g., wellness, toughness), form perceptions of identity-relevant meanings, and compare those to his or her identity standards (Webster & Whitmeyer, 2001). The individual is seen as the control system acting to maintain consistency of self-perceived identity-relevant meanings with identity standards, acting to restore consistency when identity is challenged. The process described above is known as the perceptual control process (Webster & Whitmeyer, 2001). Challenges to identity can be positive, negative, or neutral; however, the greater the discrepancy between individual feedback and others’ feedback, the more likely is the search for positive support to maintain an identity (Haggard & Williams, 1992; Siebert, Mutran, & Reitzes, 1999). These challenges to identity, particularly for women who identify as athletes, are of particular interest to me. When they are faced with a master status identity, such as ‘disabled’, how to they develop and maintain an athletic identity that is meaningful for themselves in their everyday lives?
Positive identity development is related to optimism about the future, decreased likelihood of using drugs and alcohol, increased sense of autonomy and responsibility, independence, community integration, and education (Phoenix, 2001). These outcomes further influence psychosocial health, growth and personal development, societal and health care system outcomes, and personal and life satisfaction (Phoenix, 2001). Moreover, positive development of identity confirms and validates an individual’s status as within a social environment (Hogg, Terry, & White, 1995).

Difficulty with identity in social groups can relate to depression and distress. Researchers have shown that individuals with disadvantaged social status are more vulnerable to stress, have lower self-esteem and self-efficacy, less sense of control over events in their lives, and higher anxiety and depression (Cheek & Piercy, 2001; Phoenix, 2001). Since identity is the pivotal concept linking social structure with individual action and behaviour, the exploration of identity is relevant (Darling, 2003; Hogg, Terry, & White, 1995).

The study of identity has been addressed from a variety of research orientations (e.g., the individual, organizational, social structures) that are difficult to integrate into one theoretical perspective (Côté & Levine, 2002). Moreover, recent scientific debates about the relevance of the “identity” as a construct for understanding human behaviour have arisen. Jenkins (2008) professed that identity does not cause behaviour nor can it explain why people act in certain ways. Furthermore, he conveyed that it may be difficult to distinguish between identity and interests as our interests may define how we identify ourselves. Likewise, how other people identify our interests may influence how we define our interests. In summary, identities are constrained by the culturally defined meanings and labels found within the situation (e.g., employment, education, sport, customer), although there is a degree of choice in the identity assigned and assumed based on ongoing negotiated interactions with others within the specific situation (Herman-Kinney & Verschaeve, 2003).

Further to the difficulty of distinguishing between interests and identify outlined by Jenkins (2008), Brubaker and Cooper (2000) suggest that identity is something that people do for their own reasons and purposes, rather than something that people have. They purport that the process of identification more accurately reflects what people undergo. Although identity has been “pronounced a death sentence” (Jenkins, 2008, p. 14) as it is cannot predict behaviour and through its ambiguousness has been used to the point of being considered inconsequential by
some, I agree with Jenkins that although identity is open to debate, it matters as it is one of the cognitive mechanism people employ to “sort themselves out individually and collectively” (Jenkins, 2008, p. 19).

The concept of identity has also been contentiously viewed in the disability studies literature. Watson (2002) pointed out that identity does not exist outside of the power and regulatory regimes of others who construct identity. As such, the concept of identity is viewed as resulting from oppressive social relations. To illustrate, Oliver (1996, p. 5) views the identification of people as disabled through three elements that de-contextualized identity; (a) the presence of an impairment, (b) the experience of externally imposed restrictions and (c) self-identification as a disabled person. In other words, “Disability does not reside in a particular body or environment, but rather is an embodied relationship” (Marks, 1999, p. 611 as cited in Sparkes & Smith, 2002). Watson (2002) also acknowledged that disability identity has played a role in the political struggles of the disability movement and states, “Knowledge is socially anchored in experience and that multiple social standpoints produce plurality of knowledge, each of which is partial” (p. 513).

Throughout the previous discussion, it is of interest to note that the study of identity is a complex matter, with a number of different perspectives. As a researcher, I have to acknowledge these different perspectives while determining how I will define identity and move forward with this research. While there are those within the disability world who feel as though identity results from oppressive social relations (as described in the above paragraph), I feel identity⁴, as it applies to the experiences of persons with disabilities, is worthy of study because of its socially composite nature and the propensity toward the existence of multiple identities across social contexts, including sport (Cheek & Piercy, 2001). As individuals with physical disabilities often face preconceived or master status, identities based specifically on their bodies, it is important to create dialogues around the notion of identity in order to understand how to move beyond these

⁴ For purposes of this study, the term identity will be used to represent the individual representational processes that occur as the consequence of classification and the public discourses of others. Discourses are defined as “systems of meaningful practices that form the identities of subject and objects” (Howarth, Norval, & Stavrakakis, 2000, pp. 3-4).
identities so that new identity definitions can be established. Examination of identity also provides society, as a whole, with the opportunities to learn.

2.2 Identity Theory

For this research, I have chosen to use identity theory to frame the research question and interpret the findings. Identity theory is a good fit for this project, as it provides an opportunity for understanding identity at the individual level. As such, identity theory allows us as researchers to better understand identity development from the women’s perspectives, satisfying one of the main objectives of this research project. Identity theory developed out of symbolic interactionism. To provide the reader with a better understanding of this development, the following sections outline this development, providing an overview of symbolic interactionism, structural symbolic interactionism, and finally, identity theory.

2.2.1 Symbolic Interactionism

Society is based on communication and interaction among individuals in a complex web of groups, communities, organisations, and institutions (Stryker, 2007). These communications are considered symbolic, in that meanings are developed based on the interactions (Stryker & Vryan, 2003). The symbols are used to frame communication between two individuals and among many individuals within a larger social context. The dynamic process of creating symbolic meaning from communication and interactions assumes that society and its parts are not static; that is, through interaction with society, time, place, and culture, identity is constantly recreated and fluid. This process also recreates meanings for individuals themselves. Basically society creates persons as persons create society around them (Stryker & Vryan, 2003).

The primary principles of symbolic interaction, based on the early work of Herbert Blumer (1969) are: (a) human beings act because of the meanings that certain aspects of society hold for them, (b) these meanings arise through the process of interactions with others and (c) the exploit of these meanings occurs through process of interpretation guiding actions and interactions within situations. Stryker (1968, 2007) expanded the work of Blumer and described symbolic interactionism in the follow ways:
1. Human action is dependent on a classified world and the names and classifications have meaning for the actors. Learning about these classifications and appropriate behaviours takes place through interaction with others.

2. Symbols are used to designate social positions, also known as identity. Through this identity, individuals develop shared behavioural expectations.

3. Larger social structures are important in light of organised patterns of behaviour. This framework allows individuals to name each other as occupants of positions.

4. As occupants of positions in the larger social structure, these identities become internalized, with expectations of individual behaviour.

5. Through interaction with others, individuals define situations by applying names to them, and other participants. These definitions help organise behaviour.

6. Social behaviour is not determined, but constrained by these social meanings. People are active in identity development.

7. Some social structures can limit the creativity an individual has in identity development (for example, a patient in rehabilitation following an injury does not have the ability to change her or his identity within the rehabilitation hospital).

Active identity development allows for the possibility of social change (i.e., changes in definitions and possibilities for interaction). The cumulative effect of these changes can create changes in the larger social structure. Essentially, the symbolic interactionism framework posits that the individual has multiple identities that are manifested through behaviour, cognitive and emotional responses to patterns of symbols and language. These identities can be independent from one another, interdependent, mutually reinforcing, conflicting, or organised in a number of ways (Stryker, 2007).

2.2.2 Structural Symbolic Interactionism

It has been suggested that the most important aspects of identity are those that are socially anchored (Vryan, Adler, & Adler, 2003). The structural symbolic interactionist perspective enables researchers to examine the structural sources and features of identity. The structural approach was developed because researchers posited that social psychology processes cannot be understood without being located within a structural context (Stryker & Vryan, 2003).
Within the structural framework, social behaviour depends on a *classified social world* that provides opportunities for action and conditions affecting the success (or failure) of this action. The principles of the structural framework expands the traditional symbolic interactionism framework in the following ways (Stryker & Vryan, 2003): (a) human experience is socially structured and not random, (b) societies are composed of subparts, including identity relationships, groups, networks, communities, and institutions, (c) the above subparts are independent and interdependent, can be isolated or closely related, and cooperative or competing, (d) human experience is shaped by social situations and relationships which an individual is part of, and (e) social structure defines boundaries for interaction with others, affecting the likelihood for individuals to develop different identities. Goffman (1963), as a symbolic interactionist, used the concept of identity in his work that analyzed group alignments based on social norms. He described the *otherness*, or stigma created when people were classified because of perceived discrediting qualities of impairment.

Due to the complexity of modern society, identities are created in multiple reference groups and are therefore fractured into multiple structural components. Individuals live within small, highly specialized networks of social relationships. Within these relationships, identities are attached to each position within each network (Stryker & Vryan, 2003). The social world creates opportunities for actions and for labels to be attached to these actions. These actions and subsequent labels, become objects of the social world with meanings that are individually interpreted (Stryker & Vryan, 2003). Socialization occurs when each new generation learns cultural cues through interaction with the previous generation, social networks, and/or societal organisations.

Structural symbolic interactionism was the first sociological perspective used to study socialization in disability sport (Henderson, Bedini, & Hecht, 1994; Williams, 1994). It continues to provide a modus for exploring and giving voice to the experience of socialization (Williams, 1994).

### 2.2.3 Identity Theory

Identity theory provides a unique perspective from which to examine the identity formation linked with sport participation and the development of identities of women with physical disabilities. The self is not an autonomous psychological entity, but rather a
multifaceted social construct that emerges from various identities in society (Hogg, Terry, & White, 1995). Individuals have multiple identities within various social environments (Cheek & Piercy, 2001). These identities do not operate independent of each other, but rather as a comprehensive narrative (Groff & Kleiber, 2001). Identity theory focuses on the multifaceted and dynamic individual and the identities that individual holds that mediates the relationship between social structures and individual behaviours (Darling, 2003; Hogg, Terry, & White, 1995).

Identity theory grew out of structural symbolic interaction, which posits that society has a stability that is reflected in patterned behaviour within and between individuals (Stets, 2006). This patterned behaviour is based on role identities that further assume that individuals are actors, not simply reactors to particular social situations (Stryker, 2007).

There are five principles of identity theory (Stets & Burke, 2003):

1. Behaviour is dependent on a classified world. These classifications carry meanings as shared responses and behavioural expectations through social interactions.
2. Classifications include symbols that are used to designate positions in the larger social structure.
3. The individuals that act within social structure name one another so that they may recognise each other as occupants of positions and have expectations for these identities.
4. Individuals also name themselves within social structure and create internalized meanings and expectations of their own behaviour.
5. Expectations and meanings form the basis for social behaviour, along with exchanges with other actors, allowing the context of interaction to shape and reshape (changing categories, names, and meanings that are used). The sharing of expectations and meanings creates negotiated meanings that emerge from social interaction.

Identity theory is also concerned of defining situations, the notion that we identify and categorize people into social positions to organise our universe, examining the reciprocal relationships between self and society (Hogg, Terry, & White, 1995; Siebert, Mutran, & Reitzes, 1999; Webster & Whitmeyer, 2001). Therefore, the focus of the theory is on the social identities
that people embody and the linkages of these identities to emotional experiences for the self (Webster & Whitmeyer, 2001). Identity theory attempts to describe how, through interactions with others, individuals receive cues to socially acceptable identity (i.e., social feedback) and emotional experiences, and over time these develop meaning (Cheek & Piercy, 2001; Hogg, Terry, & White, 1995).

Stryker (2007) presented an approach to identity theory that fused identity with structural interactionism and the positions an individual holds within structured relationships (Stets & Burke, 2003; Vryan, Adler, & Adler, 2003). Stryker’s identity theory provided explanations as to the reasons for selecting a particular identity best associated with a particular situation (Stryker, 2007). Styker, as quoted in (Vryan, Adler, & Adler, 2003), posits that identity is a social, structural, and cognitive phenomenon whereby “parts of self composed of the meanings that persons attach to the multiple identities they typically play in highly differentiated contemporary societies” (p. 377). Identities can be created out of obligatory roles (such as mother, employee) and voluntary roles (such as friend, athlete). Obligatory roles are beneficial to mental health when relationship strains are low. Voluntary roles are seen as reducing psychological distress as they are considered less demanding and viewed as the easiest identities to abandon when costs of the behaviour start to exceed the rewards (Stets & Burke, 2003).

The overall social structure of identity theory can be addressed at different levels of analysis - individual, groups of similar individuals, or groups of different individuals. At the individual level, the self is comprised of many identities, each of which fits with a role occupied in the overall society structure (Stets, 2006). The different identities are called role identities, which are reflected in specific social behaviour (Stryker, 2007). As previously noted, the individual level was the focus of this study.

The term identity comprises the meanings attached to oneself while performing that identity. Meanings, unique to the individual, are derived from interactions and negotiations with others in culture and social structure (Stets, 2006). When selecting a particular identity, an individual determines which actions meet the expectations of the situation and the other actors (Stryker, 2007). Identity selection is further based on individual identity salience – or selected identity.

Identity salience is defined as the likelihood of a given identity being assumed during a particular social interaction (Herman-Kinney & Verschaeve, 2003; Stets, 2006). Identity salience
reflects a multi-faceted view of the self; a self composed of independent and interdependent identities that are organised system of identity relationships within hierarchy. The hierarchy is useful in determining which identity an individual is likely to select in a given situation. The more salient an identity (or commitment to the identity), the more likely an individual is to perceive the situation as an opportunity to use that identity (known as structural overlap), enact behaviour consistent with expectations of that identity, and seek out situations that increase this opportunity (Stets, 2006; Stryker, 1968). It is important to recall that selection of a particular identity is a reflection of the individual becoming a social object through interaction with others and acceptance by the individual of the particular identity. In summary, an individual is tied to the selected identity, and through the identity selection to positions in organised social relationships (Stryker, 2007).

Selection of a particular identity from the hierarchy of identity salience is based on commitment to that particular identity that impacts the meaning of social relationships (Stryker, 2007). Commitment refers to the degree our relationships within structural networks of relations with others depend on possessing that identity. Identity-related behaviour can be constrained by society and the outcome of a specific identity (Herman-Kinney & Verschaeve, 2003). Commitment can be qualitative and quantitative for an individual, highlighting the social relationships impacting identity choice (Stets & Burke, 2003). Qualitative aspects of commitment include the strength of relationships with others. Quantitative aspects include the number of others an individual is connected to through a particular identity (Stets, 2006). The higher the commitment, the higher an identity is on the salience hierarchy. This hierarchy can help predict long run behaviours (Stets, 2006).

Actions of others within a specific environment or social context may reinforce or challenge one’s identity. The actions of those close to an individual can carry the most importance, particularly as people are constantly entering and leaving various social worlds. This means identity support can be unstable, so individuals constantly search to legitimize the identity to which they are committed (e.g., rejecting notions of weakness and dependency while seeking affirmations of health and strength). Affirmation of identity is a healthy, ongoing process of continual self-definition, validation, maintenance, and enhancement undertaken by virtually all individuals (Haggard & Williams, 1992).
2.3 Disability, Identity, and Sport

Human experience has been considered unimportant in disease processes, as biomedical logic underpinned medical models of disease (Peters, 1995). Within what has been termed the “medical model”, persons with impairments have been objectified through medical interventions that treated the body to the exclusion of the person as a whole, creating a body and mind duality that dismissed the experience of the individual (Overboe, 1999). Medical models represent what have been considered to be “outsider perspectives,” viewing illness and impairment from outside the experience of the individual and minimising or ignoring the subjective reality of the person with a disability (Peters, 1995). By ignoring the perspective of individuals whose daily experiences are shaped by disablement (insiders) or the process of being assigned a disability identity, medical models failed to include the experiential and psychosocial elements of disability and disease in diagnosis and treatment (Hardin, 2005; Peters, 1996). Over-reliance on biomedical thinking has led to significantly different understandings of the same phenomenon by ‘outsiders’ and ‘insiders’ (Peters, 1995). By first placing the individual with the disability in the context of her or his experiences, and second within a medical context, knowledge of relationships between agents acting on the social conventions of the particular context and the person to which the conventions are aimed can be illuminated (Charmaz, 2003).

Disability has increasingly been recognised as a natural form of human diversity, rather than as a condition that needs to be changed or eliminated (Darling, 2003). Peters (1995) suggests that exploring disability from the perspective of the individual is needed as the imposed psychosocial consequences of disability are more problematic for an individual than the actual impairment itself. Peters’ (1996) framework of disablement was developed using three interrelated domains of experience, (a) society, (b) the whole person in activity, and (c) the person’s psychological, physiological and anatomical structure and function. By framing disablement in three interrelated domains, multiple perspective of the disablement process comes into view. The process of disablement involves moving from an situation of impairment (change in function or structure of the body) to the socially imposed identity of disabled through the interaction of the individual’s relationship to his or her body (body/mind), diminished ability in

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5 The term person with a disability is used throughout the literature. I will continue to use the term in the literature review but acknowledge that disabled person or person with an impairment more accurately represents the social and environmental barriers that disable people.
activity (person), and social limitations imposed by societal standards (society) (Peters, 1995).

Through my experiences while conducting research with women with disabilities in the past, I have come to understand the inherent usefulness and need for exploring this issue from the insider perspective. Without it, society has little chance of understanding, and therefore changing, the process of disablement these women can experience.

An insider perspective typically focuses on the subjective experience of living with a disability, exploring the interrelationship of body/mind, person, and society. Within an insider perspective, attention is shifted away from biomedically-dominated agendas to the interaction among impairment, environmental, and social contexts (Goodwin, Thurmeier, & Gustafson, 2004; Peters, 1996). Environmental and social contexts can be mediators (i.e., transforming activity restrictions into disadvantages) and modulators (i.e., eliminating physical barriers to increase personal independence) within this interaction. Disability evolves out of the interaction among impairment and the physical, psychological, and emotional abilities of the individual within these contexts (Peters, 1995). We, therefore, focus on “the inseparable and co-modulatory nature of individual characteristics and environmental factors in the expression of (dis)ablement” (Peters, 1996). I will be using this perspective while conducting this research in order to gain insights into the experiences of people with physical disabilities by exploring disability from the insider perspective, giving the researcher extraordinary insights (Peters, 1995).

Tanya Titchkosky (2003) contends that identity comes to persons with disabilities through their bodies within a culture that upholds ideal conceptions of the normal body and the self. Our culture tends to characterize people with disabilities as tragic, strong willed, with bad attitudes, and lacking in ability (Titchkosky, 2003). Stereotypes are perpetuated within our society when people with disabilities as depicted as “overly dependent, powerless, and tragic victims” (Ferri & Gregg, 1998; Goodwin, Thurmeier, & Gustafson, 2004).

Societal perceptions may create a master status construction of identity based on an aspect of self, such as the disability, that is assigned and often considered a devalued aspect by society. Master status refers to the predominant characteristics that others assigned to people and for which they become identified (Anderson & Taylor, 2005; Lennard, 2006). Master status so overwhelms the other traits that it becomes the basis by which people are known and evaluated. For people with disabilities, their perceived difference often defines them in the eyes of others.
and is associated with negative assumptions about their abilities, desires, and aspirations (Goodwin, 2008). Anderson and Taylor (2005) capture the meaning of master status well:

...people with stigmas are stereotyped and defined only in terms of their presumed deviance. Think of how disabled people are treated in society. Their disability can become a master status, a status that overrides all other features of the person’s identity. (p. 193)

Attempting to develop an identity excluding parts of the self, such as disability, will result “in a sense of self in conflict or a self-image riddles (sic) with significant gaps” (Gill, 1997, p. 43). The struggle for persons with disabilities is to interpret their identity within these “intersecting arenas of interactional expectations, knowledge claims, cultural representations, and environmental intentions” (Titchkosky, 2003, p. 39).

For persons with disabilities, participation in sport is generally presumed to build character, teach discipline, and prepare an individual for other areas of life by developing appropriate good moral values and beneficial personality and behavioural traits (Ruddell & Shinew, 2006). As I have had the chance to speak with young women and men with disabilities about their participation in sport, I agree that sport provides these individuals with many opportunities for positive physical, emotional, and mental growth (Goodwin, Thurmeier, & Gustafson, 2004). The opportunity to explore boundaries of physical abilities through sport builds a foundation on which physical and social growth occurs for an individual (Blind & McClung, 1997). Sport for persons with disabilities was historically advocated for the purposes of rehabilitation (Rimmer, 1999). Sport research has documented the impact of disability sport on the psychological well-being of individuals with disabilities (Valliant, Bezzubyk, Dalev, & Asu, 1985); however, the literature on identity development through disability sport has been sporadic. This is in strong contrast to the profusion of literature on identity development through able bodied sporting endeavours (e.g., athlete identity) (Valliant, Bezzubyk, Dalev, & Asu, 1985).

By exploring and pursing personal physical activity interests, identity alternatives can be discovered and revised (Patterson, 2000). Kleiber & Kirshnit (1991) suggest that disability sport creates opportunities for the demonstration of abilities, with opportunities for failure and success, provides experiences requiring the management of emotions in a public domain and the context of sport provides opportunities for action and identity development that can be more self-
affirming for individuals with physical disabilities than opportunities found in more socially constrained circumstances, such as work and school. They further report that sport is physically expressive, recognisable by others with explicit rules and standards of performance, and contributes practical information for the formation of identity within an individual. Finally, validation by peers, parents, and others in society through sport allows and confirms individual uniqueness and interrelatedness in varying degrees as a foundation for identity formation.

Exclusion from sport and health-related physical activity pursuits may occur because the body is a site that invites exclusionary classification or categorization (e.g., disabled, invalid) by those within larger social structures (Rimmer, 1999; 2002). Some would suggest that systematic socially produced exclusion can impact identity maintenance to the point of identity invalidation (Côté & Levine, 2002). And yet, in the face of perceptions of inability, persons with disabilities not only pursue, but excel at sport, suggesting that people resist and pursue interests that conflict with how they may be publically identified (Jenkins, 2008). By resisting the technologies of power, persons with disabilities may be reclaiming disability identity as a positive stance, as they relate to what they can be, rather than what they can do (Reeve, 2002).

Individuals with disabilities often encounter negative perceptions and stigma by others, making it difficult to develop positive self-perceptions of physical and social competencies (Blinde & McClung, 1997; Goodwin, Thurmeier, & Gustafson, 2004). Disability often assumes the position of “master status.” Through ongoing socialization, people with disabilities may become passive recipients of societal belief systems in the process of identity development (Sullivan, 2005). There is an assumption that when negative attitudes are internalized, behaviour may fall in line with society expectations at times leading to the development of negative constructions or perceptions of oneself (Blinde & McClung, 1997). Ashton-Schaeffer, Gibson, Autry and Hanson (2001) suggested that people with disabilities can choose among three strategies in response to social stigma. They can (a) invoke a sense of helplessness, (b) take part in activities that will create equality with able-bodied individuals, or (c) embrace the situation by acknowledging strengths while considering limitations.

The social nature of sport allows individuals to identify with a group with similar interests and experiences (Blinde & McClung, 1997; Groff & Kleiber, 2001; Valliant et al., 1985), providing interaction and positive identification with others with similar interests.

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6 Information on elite Canadian Paralympic athletes can be found at www.paralympic.ca
Ashton-Schaeffer, Gibson, Autry, & Hanson, 2001; Stainback, Stainback, East, & Sapon-Shevin, 1994). The social environment that is established in association with others, such as during sport participation, is individually interpreted in ways to contribute to a sense of identity (Shaw, Kleiber & Caldwell, 1995). Through sport contexts, individuals with physical disabilities may also discover peers (with similar interests and abilities) with whom they may identify. Incorporating the interests and abilities discovered through sport into a sense of self may facilitate identity formation and definition by reinforcing self-perceptions and may modify self-perceptions in other domains (Groff & Kleiber, 2001; Stainback et al., 1994).

Blinde and McClung (1997) found that participation in a recreation program impacted four areas of perceptions of physical self including (a) experiencing the body in new ways, (b) enhancing perception of physical attributes, (c) redefining physical capabilities, and (d) increasing perceived confidence to pursue new physical activities. The identity modification through sport occurred in two ways: 1. the expansion of social interactions and experiences, and 2. the initiation of social activities in other contexts. This process provided positive experiences interacting with other individuals with and without disabilities. Social experiences in sport appeared to have implications for perceptions of identity inside and outside of sport, increasing involvement and confidence in other social situations. Individuals developed an enhanced sense of control in both physical and social lives.

Groff and Kleiber (2001), in a study of youth with physical disabilities involved in disability sports, found that social interaction through sport camp participation appeared to be related to identity formation in two ways. First, the youth discovered expanded reference groups that they used as a source of information during the identity formation process. Second, sport created the opportunity to visualize oneself operating in an organisational context that positively influenced perceptions of identity. Groff and Klieber (2001) found that sport provided youth with disabilities the opportunity to explore alternative identities outside of the master status of disability.

Goodwin and Staples (2005) also found that a segregated camp experience for children with physical disabilities used the opportunity to develop relationships with children who had shared experiences. Second, there was a feeling of connectedness with others during sport that allowed the youth to feel as if they could truly be themselves. Goodwin, Krohn, and Kuhnle
further found that children participating in a wheelchair dance program had similar experiences of developing a deeper understanding of themselves and their abilities.

Satisfaction with sporting pursuits has been linked to life satisfaction and contributes to an increase in quality of life (Tasiemski, Kennedy, Gardner, & Blaikley, 2004), particularly amongst individuals with disabilities. Sport can provide a means of establishing friendships through shared experiences and support networks, and can reduce disablism by re-establishing contact and creating experiences for community integration (Tasiemski et al., 2004). Sport provides a context for identity formation as well as a form of resistance against prevailing definitions of disability (Groff & Zabriskie, 2006). There is some research evidence to suggest that the development of a specific athletic identity through sport participation can have positive outcomes for persons with disabilities. While examining athletic identity development in people with spinal cord injury, Tasiemski et al. (2004) found that the three main reasons for participating in sport for men and women was maintenance of good physical condition, improving upper body strength, and getting out and socialising with people. The definition of athletic identity used by the researchers was defined as “the degree to which an individual identifies with the role of an athlete” (Tasiemski et al., 2004, p. 366). There were both positive and negative effects of strong athletic identity. Positive effects included increased health and physical fitness, self-esteem, and social confidence. Negative effects included over-commitment to the athletic identity, restricting the rise of other identities on the salience hierarchy, increases in post-injury depression, and difficulties in adjusting to retirement from the sport (Tasiemski et al., 2004). Martin, Adams-Mushett, and Smith (1995) stated that “Documenting the existence and extent of athlete identity may assist individuals working with athletes with disabilities to understand the psychological impact of sport participation and cessation” (p. 115). In their study of 57 male and female adolescent swimmers, they found the swimmers identified themselves with their sport and considered themselves athletes. Disability sport and athletic identity is a very fluid concept, which can mean something different for every individual (Groff & Zabriskie, 2006).

2.4 Bringing Women into Focus

Bringing women into focus was of particular interest to me as a researcher, not only based on the experiences of my mother and sister mentioned in the introduction, but also because
of the under-representation of women in disability sport literature (Collinson, 2005). Women with disabilities are often viewed as passive recipients of societal beliefs regarding their disability, their bodies and their identity (Groff & Kleiber, 2001). These assigned characteristics are based on disability and may lead to segregation, devaluation, stigmatization and discrimination (Blinde & McClung, 1997; Groff & Kleiber, 2001). Moreover, the negative psychological impact of these stereotypes may lead women with disabilities to perceive themselves as sick, irrespective of their reality (Lawrence, 1991).

Disability sport seldom operates outside of the influence of gender nouns (Hardin, 2007). Sport is embedded with masculine hegemony, which can create difficulty for women when attempting to construct meaningful experiences in sport (Blinde & McCallister, 1999, Hardin, 2007). Furthermore, negative perceptions of the female disabled body as weak, passive and dependent (Peters, 1995, 1996) may further distance women from the sport domain. A woman participating in a male-dominated sport world and the stereotypes of weakness creates a “double whammy” (Blinde & McCallister, 1999; Henderson & Bedini, 1997). Blinde and McCallister (1999) found that women encountered resistance, marginalization, trivialization, and stigmatization from sporting communities when attempting to construct meaningful experiences in sport. Even within the research community itself, there has been a bias in interest toward the world of young professional male athletes with disabilities (Collinson, 2005).

However, participating in sport may create opportunities to resist assigned identity. Groff and Kleiber (2001) found that accomplishment in sport could help young women realise that the prevailing stereotypes surrounding disability were not accurate representations of their abilities or potential. Ashton-Shaeffer, Gibson, Holt and Willming (2001) also found that women with acquired physical disabilities, while reluctant to participate in sport initially, became empowered and regained ownership for their bodies following the medical interventions of their bodies following injury. Blinde and McCallister (1999) obtained similar findings with 16 women with physical disabilities who engaged in sport. They found that the sport domain allowed the women to distance themselves from the perceptions of weakness, passivity, and dependence. The female participants in their study participated in sport to maintain fitness levels, maintain function physically, socially and psychologically and develop a sense of a strong, independent body. Similarly, Hardin (2007) who interviewed female wheelchair basketball players to explore the intersection of gender and sport in their formulation of identity, found that sport provided
opportunities for the women to socialise, develop competitiveness, improve self-esteem and health, and move away from the stigma of disability while developing independence (Hardin, 2007). Aspects of sport that may influence identity formation include the values and goals found there, the physical action of the sport, performance feedback, social aspects of the sport, and opportunities to assume socially valued roles (Groff & Kleiber, 2001). Moreover, mastering the physical skills required of sport may help establish an identity based on the experiences of sport, resisting stereotypes of disability, which in turn, enables some individuals to gradually shift from trying to pass, or from trying to act non-disabled (supercrip), to identifying disability as part of their identities (Gilson, Tusler, & Gill, 1997).

In parallel to the opportunities provided for imposed disability stereotypes, also arose “those individuals whose inspirational stories of courage, dedication and hard work prove that it can be done, that one can defy the odds and accomplish the impossible,” or the so-called supercrip (Berger, 2008, p. 648). The supercrip image has been criticised for fostering unreal expectations about what people with disabilities can achieve if they simply worked hard enough and live a regular life. Although the supercrip disability hero model may be emotionally moving for the able-bodied majority, it has been viewed as oppressive for those who do not or cannot meet this ideal (Hardin & Hardin, 2004). Equally alarming “is the manner in which it emphasized individual effort as a way to overcome society barriers for people with disabilities....In short, the supercrip model promotes ableism” (p. 6). People with disabilities find themselves sitting between the competing identities of disabled and supercrip.

As such, these current classification systems, which are based on unrealistic expectations of the disabled body and create a master status which is either passive and weak (disabled) or heroic (supercrip), must be challenged as the associated behavioural expectations and identities are defined and assigned with no input from those who are being defined. While I feel that the creation of labels for our identities within societal systems is an integral and unavoidable mechanism of society, those who are being labelled with a particular identity should be actors in this process. When women have ownership over their identities and are active in creating the names, symbols, behaviours, and meanings of these identities, they can become empowered through this process and provide us with an understanding of why assigned identities are not appropriate.
2.5 *Purpose of the Study*

The purpose of this proposed study was to describe the experiences of identity in sports for women with physical disabilities. More specifically, the objectives of the study were (a) to understand the meaning of athletic identity for women with physical disabilities, (b) to understand the role sport plays in identity and (c) to bring a female disability perspective to our understanding of identity within the context of sport.
3. METHOD

3.1. Research Design

Qualitative methodology was selected as this approach was best-suited to reflect and re/interpret identity representations of women with disabilities (Herman-Kinney & Verschaere, 2003; Merriam, 2002). With hours of interviews, pages of field notes, and the responsibility of representing the experiences of others, qualitative researchers have the opportunity to hear participants’ life experiences and a commitment to provide a sensitive interpretation of their stories (Kidder & Fine, 1998). I chose phenomenology as the theoretical construct I used to inform my understanding of the research questions, as the methods of phenomenology offer researchers a window into the experiences of identity of women with physical disabilities (Rolling, 2004). The emphasis of phenomenology is on experiential claims of the individual, and the aim is to understand the world through the eyes of the participants, letting them describe what a phenomenon is like for them (Larkin, Watts, & Clifton, 2006). Through story telling people can explore “identity (re)positioned” as they bring to consciousness lived experiences (Rolling, p. 871). Through “the very act of telling, people engage in creating and constructing certain kinds of self in specific social contexts” (Smith & Sparkes, 2005, p. 229).

Within the approach of phenomenology, there is the assumption that knowledge is grounded in the everyday world, or “life-world” (Herman-Kinney & Verschaere, 2003; Kvigne, Gjengedal, & Kirkevold, 2002; Rice & Ezzy, 1999). Phenomenology as a research approach can be viewed as a unique way to blend thoughts, emotions, and memories in relationship to objects and events so that others can learn from their inner meaning (Peters, 1995; Smith, 1996).

I used an interpretive phenomenological stance while analysing the data. While truly experience a specific phenomenon through the first-hand view of the participant cannot be genuinely achieved, the goal of phenomenology is to construct the experience through the interaction of the participant and the researcher so that “a coherent, third-person, and psychologically informed description” is compiled (Larkin, Watts, & Clifton, 2006). During the data collection phase, my interaction with the participants provided with the opportunity to share their first-hand accounts with me. Through my analysis of the individual interviews, narrative data was examined and turned into themes, which reveal patterns of experience essential to the phenomenon, without which there would be no phenomenon (van Manen, 1997). The description
of these experiences was then placed in relation to “wider social, cultural, and perhaps even theoretical context”, providing a third-person interpretive account of the phenomenon (Larkin, Watts, & Clifton, 2006). Ultimately, application of phenomenological methods enabled me, as a researcher, to create an interpretive account about what the participants’ have experienced that therefore can enable the reader to come away with an understanding of the essence of the experiences common to individuals who have dwelled within the phenomenon (Creswell, 2007; Larkin, Watts, & Clifton, 2006).

3.2. Sampling Strategy

Within qualitative methodology, research questions are answered through small, purposefully selected samples of individuals to provide a rich, contextual understanding of experiences (Patton, 2002). For phenomenologically informed studies, a smaller sample size of between 3 to 10 individuals is recommended (Creswell, 2007; Larkin, Watts, & Clifton, 2006). Purposeful sampling was used as it focuses on selecting information-rich cases, which can reveal a great deal about the research questions (Patton, 2002). In addition, maximum variation sampling was used. This strategy “aims to capture the central themes that cut across a great deal of variation” (p. 235) as is the case of the lived experiences of women of varying ages with acquired and congenital mobility impairments (Patton, 2002). In doing so, the essence of the experiences of the women may be attributed to the phenomenon of interest irrespective of specifics of their disability label. The criteria for participant selection included:

- Women
  The sport literature is inconclusive regarding the influence of participant sex on identity. The able bodied literature reports differences (e.g., Shaw, Kleiber, & Caldwell, 1995), while conversely Martin et al., (1995) did not find differences in athlete identity for elite disability swimmers. Given the uncertainty of the relationship of sex and identity, a single sex study was undertaken in acknowledgement that identity biographies may be distinct for men and women. In addition, women are underrepresented in the disability sport literature and their experiences are worthy of understanding (Blinde & McCallister, 1999; Henderson & Bedini, 1997).

- Mobility impairments that were acquired (e.g., spinal cord injury) or congenital (e.g., spina bifida)
People with acquired and congenital mobility impairments are subsumed within the larger classification of physical disability within sporting contexts. This is not to suggest that their life experiences do not diverge. Women, irrespective of the origin of their disability, tend to be perceived as being weak and dependent (Blind & McCallister, 1999).

- At least 18 years of age
  The age range allowed for individuals to comprehend the research question and reflect upon their experiences in a variety of physical activity contexts. van Manen (1997) states, “a person cannot reflect on lived experience with living through the experience” and that “reflection on lived experience is always recollective; it is reflective of experience that is already passed or lived through” (p. 10).

- Athletes who regularly participate in recreational or competitive sport
  As individuals engage in sport for a number of reasons, including maintaining health, increasing independence, and engaging in competition, a broad range of sport contexts were sought (Blinde & McCallister, 1999). Sport was defined using the Sport Canada definition of sport as “a regulated form of physical activity organized as a contest between two or more participants for the purpose of determining a winner by fair and ethical means (Sport Canada, 2010).

In developing criteria for this study, I found I was interested in participants who were competitive and recreational athletes. I wanted to interview all of these women to discover whether the role of exercise had similar outcomes within each of these women’s lives. As Larkin et al. (2006) state:

If the empathetic treatment of our subject-matter is central to our approach, and we are prepared to adjust our ideas and assumptions in response to the promptings of that subject-matter….our success as phenomenologists will not ultimately be dependent upon our revealing the ‘pure’ experience of a participant; it will be dependent upon our being prepared to do the most sensitive and responsive job we can, given our inherent epistemological and methodological limitations (p. 108).
Participants were not eligible to participate if they had secondary impairments that did not enable them to participate in the interviews (e.g., significant speech impairments), or could not commit time for interviews. Ethics approval was sought and successfully attained from the Behavioural Ethics Review Board at the University of Saskatchewan for the completion of the study (see Appendix B).

3.3. Recruitment Strategy

Multi-phased recruitment strategies were used. For the first strategy, I contacted local sport and community associations, including the Saskatchewan Wheelchair Sport Association (SWSA) and the Canadian Paraplegic Association (CPA) via email and telephone to request the opportunity to present my research interests. During the initial contact, I provided information about the study and requested permission to have the study announced to the program participants. None of the organisations felt the need to have a personal research presentation. Although the organizations agreed to forward the information on, it resulted in no inquiries. This may have been due to the fact that the research study was launched during the summer/early fall. This is a busy time for athletes, with a number of competitions taking place, intensified training for winter sports underway, and university/school beginning.

Given the poor response, the second strategy was to post a recruitment flyer posted using the University of Saskatchewan Personalized Access to Web Services (PAWS) Bulletin system, which allows research notice postings. The criteria for involvement and time commitment was clearly presented and appeared on the print material (see Appendix A). The PAWS website is utilised by all staff, faculty, and students on the University of Saskatchewan campus to access email, and academic and university information. A community-wide on-line bulletin board was also used in recruitment. These postings included my email and telephone contact information. Through this method, I was able to recruit the participants for this study.

I received a number of inquiries from the PAWS posting. The women who expressed interest in participating contacted me directly through telephone or email to ask any questions they had. With initial contact, I described the purpose and methods of the study in detail to each participant, and confirmed that they met the inclusion criteria. The participants were then asked if they were interested and had the time to take part in the study. If they were, a meeting time and place was established.
The participants were reminded that their participation was entirely voluntary and they had the right to withdraw their participation at any time. Their right to withdraw from the study without consequence was reinforced when the study was first introduced, at the time the consent forms were presented, when the interview appointments were made, prior to the initiation of the interviews, and at that time the transcript release form was distributed. The participants were informed of their rights via a written consent form (see Appendix C) and were asked to sign these forms to signify their understanding. All participants were given a pseudonym to ensure confidentiality.

3.4. Participants

Ultimately, a purposeful modified maximum variation sample of 4 women with physical disabilities volunteered to participate in the study (Patton, 2002). Maximum variation sampling was determined to be a useful strategy for this research, as this form of sampling is employed to better understand and experience from different people in a variety of settings (Patton, 2002). Maximum variation sampling is also useful when a small sample size is required. Considering this qualitative research was phenomenological in nature, a maximum variation sample seemed appropriate.

Each participant filled out a Participant Information Form (see Appendix D). The women were between the ages of 19 and 31. The mobility impairments represented were acquired, congenital and progressive in their nature and included spinal cord injury, cerebral palsy, spina bifida, and muscular dystrophy. All the participants were university students at the time of the study (2 graduate students, 2 undergraduate students). Three of the women participated in physical activity with the support of wheelchairs. One participant was ambulatory. The following names are pseudonyms, used to protect the participants' identities.

Kelly: At the time of the study, Kelly was a 30-year old woman with an acquired spinal cord injury (incomplete). She was injured when she was twelve and was ambulatory. She made use of crutches when walking. Prior to her injury, she reported that she was always involved in any sport available in her small community, including track, hockey, gymnastics, volleyball, and fastball. Post injury, Kelly did not participate in sport until she was introduced to able-bodied arm-wrestling by asking some questions about it at a booth in the local mall. She has competed

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7 This means that the damage to the spinal cord during injury is not absolute.
for the past twelve years and has become one of the top female competitors in her weight class in the province. As part of her training, she weight trained and power lifted. Kelly was interested in developing a research centre to support people with spinal cord injuries. When asked, Kelly self-identified as an arm-wrestler, student, daughter, and friend.

Lisa: At the time of the study, Lisa was a 21-year old woman with congenital cerebral palsy (ambulatory) and acquired scoliosis. Lisa would use of crutches, a scooter, or a wheelchair when moving around, with the choice being dependent on the length and endurance level of a particular activity. While in high school, she took part in yoga and was introduced to the sport of curling at an activity camp for youth with physical disabilities and participated until graduating. She is a recreational athlete who has started to curl during the winter. Upon entering university, she began to use a scooter more regularly than she had in the past to move between her classes. Lisa began working out at least three times each week on an exercise bicycle to increase her leg endurance and strength as she felt like using the scooter more frequently may weaken her legs and her ability to remain ambulatory. She is interested in returning to curling and developing her strength to participate in more sporting opportunities. The increased use of her scooter has made her more interested in working in an environment/organisation where she can challenge current societal perceptions of people with disabilities. Lisa self-identified as a student, daughter, friend, sister, curler, and woman.

Sarah: At the time of the study, Sarah was a 31-year old woman with muscular dystrophy. Although a congenital condition, she did not discover she had muscular dystrophy until after completing high school. During high school Sarah participated in able-bodied basketball. Once diagnosed, she maintained her interest in the sport through wheelchair basketball. Initially, she was not interested in participating as that would mean using a wheelchair while she was still ambulatory. Once she tried it, Sarah realised that she had been denying herself the opportunity to experience the sport she loved. She spent the last eleven years competing at a national level and is currently transitioning out of participation as it is becoming too physically demanding. Sarah made use of crutches, a scooter, or a wheelchair when moving around, with the choice being dependent on the length and endurance level of a particular activity. Sarah is currently determining what her life outside of wheelchair basketball will entail. Sarah enjoys speaking to others about her experiences with sport. When asked, Sarah identified as a basketball player, a teammate, a mentor, a lover, a student, a sister, and a woman.
Megan: At the time of the study, Megan was a 19-year old woman with spina bifida, a congenital impairment. She was a wheelchair user, and has taken part in athletics for most of her life, participating in a variety of activities such as swimming, tennis, baseball, track, cheerleading, rowing, volleyball and basketball. She was competing provincially in cross country sit-skiing and biathlon, taking part in training and competition at least three days each week for the past three years. She was trying to find a balance between her sport pursuits and university activities. She intends to finish her undergraduate degree and attain a graduate degree in psychology. Megan self-identified as a skier, a student, a sister, a cousin, a daughter, a friend, and a grand-daughter.

3.5. Data Collection

The data collection was triangulated through a number of means. A combination of several data sources, methods, and investigators was employed (Creswell, 1998). In-depth face-to-face interviews, visual artefact collection and field note documentation were undertaken. Background information was also gathered from the participants through the completion of a Participant Information Sheet (see Appendix E).

3.5.1. Interviews

The women completed an audio-taped, a face-to-face semi-structured interview of approximately 60 minutes each at a location of their choosing (one participant chose her home, the other three chose quiet locations on campus. The interviews took place over a period of 10 months. While a predetermined set of questions were asked, semi-structured interviewing allowed me the freedom to probe beyond these questions, thereby customizing the interview to each woman’s responsiveness (Charmaz, 1995) (see Appendix E). This type of interviewing was a particularly appropriate form of data collection as it provided an opportunity for the participants to share personal experiences through stories and for the readers to gain a deeper insight into the meanings ascribed to the stories and shared experiences (Blumer, 1969). All interviews were transcribed verbatim.
3.5.2. Artefact Documentation

At the time of initial contact, the participants were invited to bring an artefact to their interview as a way to further express their thoughts, attitudes, or feelings toward physical activity and identity. The artefacts were to be used to stimulate discussion as well as provide an additional data as a secondary data source (Creswell, 2007). As a research assistant collecting data during previous research projects, I felt that artefact documentation was a very useful tool as it provided the participants with an opportunity to share stories and experiences (Goodwin, Thurmeier, & Gustafson, 2004). An artefact could be memorabilia (favourite t-shirt), documents (journals, letters) or photographs (personal photos) (Patton, 2002).

At the interview, the participants were asked to discuss the significance of the artefact to their experiences. Two of the participants had artefacts at the time of their interviews. However, this is attributed to one interview taking place in the participant’s home (the artefact was on hand), and the other participant used her body as her artefact. They all had actually forgotten about the artefact component of the interview. During the interview, when reminded about the request for an artefact each participant was able to identify what that artefact would have been. We discussed their artefact idea and the discussion became part of the audio taped record of the interview.

The artefact data did not contribute as much to the interview as anticipated. The focused discussion on the artefacts was useful as the participants reiterated some of the main points, thereby serving as a form of member check. However introducing the question at the end of the interview felt slightly out of place, stiff and formal compared to the conversational flow of information throughout the rest of the interview. Upon review of the field notes, I felt that perhaps introducing the artefact question at the beginning of the interview may have felt more natural and helped develop rapport.

3.5.3. Field Notes

During the interview process, the researcher took field notes. The field notes included a record of what was taking place, the researcher’s perceptions of the participants, and ideas about what themes were emerging (Bernard, 1995). The field notes also enabled me to return to the interview conceptually during data analysis. Finally, the field notes contributed to the audit trail.
The audit trail was kept to provide sufficient evidence to reconstruct the process by which the conclusions of the studies were reached (Creswell, 2007).

3.6. Data Analysis

Data analysis involved a thematic line-by-line analysis, locating within the personal stories the key statements that spoke to the objectives of the research question (van Manen, 1997). Themes provide insight into cultural belief and values and instil powerful interpretations of experiences of how individuals plan, make sense of, and respond to events (van Manen, 1997).

The analysis was undertaken in the following way (Creswell et al., 2007; Patton, 2002; van Manen, 1997; Wolcott, 1994, 2001):

- the transcripts including the descriptions of the artefacts and field notes were read several times,
- particularly revealing phrases were highlighted and coded with meaningful labels, for each sentence or cluster of sentences I asked “what does this reveal about the phenomenon or experience being described?” (van Manen, 1997, p .106),
- the phrases were constantly compared to determine whether they should be classified separately or placed in an existing code and the essential themes (those that give fundamental meaning to the phenomenon) were determined.
- a completed draft version of the themes was shared with my supervisor. Her feedback on the direction of the data analysis provided me with the opportunity to revise any coding and classifications that might have been questioned.
- once coding was completed, I developed titles that I felt represented each theme and the participants’ experiences. Through discussion with my supervisor during thesis revisions, these titles were discussed and refined.

3.7. Trustworthiness of Qualitative Research

Trustworthiness refers to the believability, accuracy, and truthfulness of the research (Cresswell, 1998; Patton, 2002). A variety of strategies were used to bring trustworthiness to the data collection and analysis processes (see Table 3.1).
### Table 3.1

*Trustworthiness Strategies*

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Techniques</th>
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<tbody>
<tr>
<td>Credibility (Verification)</td>
<td>• Sampling strategy</td>
</tr>
<tr>
<td></td>
<td>• Multiple data sources (interview transcripts and field notes)</td>
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<tr>
<td>Dependability (Consistency)</td>
<td>• Member checks</td>
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<tr>
<td></td>
<td>• Audit trail</td>
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<td></td>
<td>• Multiple methods</td>
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<td></td>
<td>• Multiple data analyzers</td>
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<tr>
<td>Confirmability (Neutrality)</td>
<td>• Investigator triangulation</td>
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<td></td>
<td>• Peer debriefing</td>
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<tr>
<td>Transferability (Applicability)</td>
<td>• Description of participants</td>
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<tr>
<td></td>
<td>• Rich, contextual description</td>
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*Credibility.* Credibility, or verification of the study, was supported during the research process by utilizing a purposeful and modified maximum variation sampling strategy and multiple data sources. While the artefact data was not as useful as anticipated, the field notes did provide an additional data source to lend to the credibility of the study. The purposeful and maximum variation provided patterns that emerged from participant variation thereby bringing to life the core experiences and shared dimensions of the phenomenon (Patton, 2002). The core experiences were replicated across the lived experiences of four women with a variety of mobility impairments and physical activity experiences.

*Dependability.* Dependability was sought through member checks, use of an audit trail, multiple coders (the researcher and her supervisor) and multiple methods (interviews, artefacts, and field notes). During member checking, the participants received via surface mail a copy of their interview transcripts and a transcript release form (see Appendix F) to ensure their ideas and views were properly recorded. Two of the participants filled in missing words on the transcripts due to inaudible voices, background noise, or tape changes. Overall, the participants
indicated that their transcripts were an accurate representation of their interviews. It is important to note that the participants were not afforded the opportunity to provide feedback on the results of the data analysis. The absence of a second level member check was a limitation of the study.

Creating an audit trail can provide information on any investigator bias that may be raised during the research process. The audit trail included a record of meetings, sampling and recruitment strategies, and the development of codes and interpretation of the stories told (Meadows & Morse, 2001). Using multiple methods (i.e., interviews, artefacts, and field notes) decreased reliance on one data method and provided additional data (Janesick, 1994; Meadows & Morse, 2001). For example, the artefacts and the description provided by the participants became part of the textual data and were thematically analysed to confirm the themes found in the interview data.

The first level of data analysis was completed myself (i.e., reading of all transcripts, coding, labelling). A second level of analysis was completed in collaboration with my supervisor. Discrepancies in clustering of labels under themes or the nature of the supporting data were discussed until mutual agreement was reached.

Confirmability. Confirmability, or neutrality, was sought through investigator triangulation and peer debriefing. Investigator triangulation, the use of several researchers or evaluators, was ensured as I and my supervisor planned the study, I conducted data analysis, and my supervisor and I discussed the data outcomes until mutual agreement was reached (Janesick, 1994). Peer debriefing also included providing a copy of the thesis document to my graduate committee for feedback prior to defence thesis.

Transferability. Transferability refers to how well the knowledge could be transferred or applied from one context to another and was dependent upon the degree of similarity between the research context and other contexts (Patton, 2002). The transferability results were supported by descriptions of the participants and the contexts surrounding their experiences.
4. RESULTS

The results of the analysis revealed two principle themes with accompanying subthemes. The principle theme of *challenging otherness* was portrayed by the subthemes of *symbols of role expectations* and *athlete as supercrip*. The second principle theme of *putting on the athlete role* was further exemplified by the subthemes of *focus on self* and *training the body*. The subthemes reflect social structures at three levels. The participants shared their experiences of sport and the social structures of identity through their relationships with themselves (the self), groups of similar individuals (those with impairments) and groups of different individuals (those without impairments). The themes and subthemes will be discussed in detail and supported by the words and experiences of the participants.

4.1. *Challenging Otherness*

The participants’ experiences of identity were brought to their consciousness when they were viewed as social objects by members of the public. They were clearly identified as *other* because of differences in their bodies – differences that were embedded in the symbolic and behavioural characteristics associated with the use of a wheelchair or scooter. The imposed identity of *disabled* was particularly evident to the participants through the reactions of the public when they challenged the stigma of bodily weakness and dependency associated with the use of mobility aids.

**4.1.1. Symbols of role expectations**

Social structures that contributed to the *otherness* experienced by the participants were based in part on the dependency that was associated with the use of a wheelchair or scooter. The wheelchair or scooter became synonymous with who the person was, or was not. Lisa shared a story of her experiences with friends out shopping and at a restaurant that highlighted the discrediting nature of disability in social interactions:

> I was at one of the malls with a group of friends of mine and...there was a guy that came up to us who supposedly went to school with one of my friends but he didn’t

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8 The term public is used broadly to represent social interactions with those without disabilities, including university classmate acquaintances, physicians, and people one may encounter in public places.
know if it was her, so he talked to me because at that time I was walking. I was not using a wheelchair or my scooter at the mall. And because I was walking he would talk to me. Not my friend [in a wheelchair]. We went to Boston Pizza one time and the waitress talked to me. I was there with 3 of my friends in wheelchairs, the waitress talked to me in order to communicate with the group.

Lisa’s experience with her friends highlighted how the wheelchair became the symbol that assigned the master status of disabled to the participants. Perceptions and expectations linked to this status minimized her friends as individuals with thoughts or voices of their own. Lisa went on to share her experiences of using her scooter at university and the assumptions others had of her mobility once she began to use her scooter and how she moved from a social equal as a walker to someone who was defined by what her scooter symbolized to others. At a time when she was transitioning into an environment associated with adulthood, Lisa recalled how her identity became linked to her scooter and changed expectation of who she was:

Just as I started at the university I started using my scooter a lot more because I can’t do as much walking as I used to in the time I need to do it. Um, I know that was a major misconception, that a lot of people I meet at the university they didn’t know I could walk. Like they saw me in my scooter and that was who I am basically to them.

Sarah also spoke about the social pressure involved with transitioning to wheelchair use. She recalled the reticence of her physician for her to manage her fatigue and active lifestyle with the support of a wheelchair, yet she needed to manage the pain and fatigue of “keeping up” with her peers. Although the wheelchair created the perception of disability identity permanency by others, it was a tool that supported her lifestyle as a student. She stated:

I’d given up [walking full time] because of pain or fatigue or stuff. It’s interesting; the doctors didn’t really want me to get into a chair yet. Because there’s the sense of once you’re in your chair, you’re going to stay in the chair. And then you’ll lose your ability to walk faster because I won’t be using the muscles and they won’t build. But it’s very social, like there’s a lot of pressure.
By using a wheelchair, the participants were labelled as non-walkers, immediately identifying these women as “other”. Beyond the expectation of being non-walkers however, the participants’ abilities or those of their friends with mobility impairments were further discredited by asking others to speak on their behalf or ignoring them in social situations. The public, as a reference group, created behavioural boundaries for the participants that set them apart. Behavioural characteristics were assigned to the participants depending upon the forms of mobility aides they utilized. The characteristics included cognitive impairment, invisible, injured, childlike, incompetent, or non disabled if no aides were used at all. Sarah experienced each of these behavioural characteristics depending upon whether she was viewed by others walking, using her crutches, or using her wheelchair:

I know if I go somewhere in a wheelchair I know I’m going to be treated like a complete idiot by half the people and ignored by the other half; guaranteed. If I go on crutches everyone is going to ask me what happened because they’re coding me as injured not disabled. They’ll normally ask what happened, what’s wrong with me, whatever, but I won’t get treated like I’m a child. And I’ll have less mobility in some circumstances, but more mobility obviously for stairs. And if I go walking I’ll be in the pain the whole time and totally fatigued but people will treat me totally normal. So it’s really interesting, kind of calculation about how you see yourself in those particular places, but also about how people reflect upon you and how they will perceive your identity.

In summary, the behavioural expectations the participants experienced were symbolized by the mobility aids utilized (e.g., none, crutches, wheelchair, scooter).

The participants spoke of their experiences managing the confusion of others when they stepped out of the assigned identity of non-walker. Failing to meet the behavioural expectations or designation position of dependency on their wheelchairs or scooter resulted in confusion on the part of the viewer. Sometimes these expectations were carefully managed by the participants to uphold the disability identity assigned to them as a way of reducing the social confusion associated with challenging the social beliefs and behavioural expectations of others. Sarah recalled:
Like I know in the beginning if I show up in the wheelchair once I can’t show up in the crutches, I have to keep track of where I went in a wheelchair because…that social pressure. Like people act very bizarrely to having seen you in a wheelchair and then you walk. Because from their perspective a wheelchair is what people use when there’s absolutely no way they can possibly walk.

At other times, the women challenged these behavioural expectations to highlight the commitment to their own identities as independent women. Lisa elaborated on this identity in a story about not using automatic door openers because of a newly developed skill. She enjoyed the incongruity that her door opening ability created in the minds of others. Lisa recalled:

Like this year I figured out how to open doors on campus that don’t have the wheelchair button… I’ve figured out how to pull them open while in my scooter. And people, like they just watch me. Like they, you know if they see me, if they don’t help me, they will stop what they’re doing and watch me. Watch me do it. And like I just grin afterwards because I’m thinking I bet their jaws dropped.

The participants acknowledged that the expectations that members of the public hold was influenced by the referent group. Older people who had less exposure to persons with disabilities in school or the work place hold to limited expectations of persons with impairments. The participants felt that their peer group thought more broadly about their abilities, in part because of their demonstrated ability in public settings. Megan summed this sentiment up very well when she said:

Like the young, like our generation is … realising that we can do more. But the older generation, there’s just like, they expect you to just stay at home and not be able to do anything... But we’re like a generation are changing how we’re seeing things.

4.1.2. Athlete as Supercrip.

The identity of supercrip was assigned to the participants. It was not one they identified with themselves. The participants’ experiences brought to light how social interactions with others resulted in identity work on various levels – work that involved discrediting disability
characteristics of passivity and dependence on one hand and overachievement to attain “normality” on the other. Although the identity of supercrip may have been perceived to be a compliment to the participants’ drive and ambition, it was not a meaningful identity as the participants felt it created unrealistic expectations. Perhaps more importantly, the supercrip identity was resisted for it decreased the importance of social structures in the elimination, or barriers to full inclusion, of all people in mainstream society.

Sarah articulated how the identity of supercrip can limit social responsibility for creating inclusive communities by the creation of shared behavioural expectations for persons with impairments. Terms such as overcoming, heroic, inspirational, and productive described the actions by which the “pitiful” situation of disability can be escaped. The characteristics associated with athlete prowess (extreme commitment, personal sacrifice, strength) can further reinforce otherness and increase the gulf between those with and without impairments as well as among those with impairments. The interdependence and overlapping of the multiple identities of supercrip and athlete caused Sarah to reflect on the damage that the identity of supercrip may cause to her community while challenging her identity as an athlete. She also acknowledged how the identity of supercrip can be perpetuated through sports media messaging. Sarah described her conflicted experiences of athlete and supercrip identities in this rather long quotation:

Isn’t it amazing that this person has overcome, individually overcome, this horrible disease for which you should pity them and sort have heroically overcome it to be a useful, productive citizen in society... it reaffirms that disability is this horrible place to be in, that the majority of people don’t do this – that’s what makes them heroic... that sport is some useful thing for society, that this is sort of one of the great things that you can do as opposed to being part of the community...it stresses the individual overcoming of their own body or their sort of being in caught in despair...it’s not the stairs, it’s not people’s attitudes about disability that they’re overcoming or combating – it’s getting past their own body to be able to do this. So it kind of completely erases any sort of idea that there are social forces that disable. I believe that any time you hold someone up on a pedestal you’re actually holding them down, that you’re not actually looking them in the eye... not having to actually treat someone as an equal in any kind of way so… the supercrip is actually a really, really, really dangerous symbol as far
as disability rights are concerned. So I think that may be part of my...I don’t like to identify as an athlete – particularly because I think it is so easy to sort of assume all these things about me that I don’t see as true, but also people would think that together with disability it is really easy to put me into the supercrip which is very dangerous... Like if they [people] can feel pity about you then you’re inspirational... And how do you combat that without sort of having to do it in a way which is negative. Having to do it in a way that makes people less scared of people with disability as opposed to being really reactive and you have to be really careful of people with disabilities and that doesn’t help. It isolates. And sport was the way that I had access to all this media, right? So it’s allowed me to be activist in a lot of ways, which is really cool. You’re not going to win every battle when you’re trying to be an activist about something. Certainly media can be an opportunity. I’ve learned how to pick and choose which media I’ll do. If what I’m doing is perpetuating those ideas of social inequality, well the thing that I believe that we create social inequality, then I’m doing a violence to people with disabilities.

4.2. Putting on the Athlete Role

The identity experience of putting on the athlete role captured the context specific nature of identity and how the sport context provided an opportunity for specialized social interactions with fellow athletes who also identified with the values and behavioural expectations of disability sport. Megan spoke of the athlete identity this way:

I feel like I’m a whole different person. Just like I feel like just I put that athlete role on, I know....It’s just a brand new perspective and I feel really good when I’m doing my sport, playing my sport.

The participants spoke of identifying with the athlete identity as one of multiple identities they put on - not a master status identity, but one that was integral to the mental representations they held of themselves. Lisa stated, “It [sport] doesn’t define you, you define it. It’s not who you are. It’s a part of you, yes, but it’s not who you are.” Kelly also described herself in multiple roles:
I’m independent and determined….competitive, depending on the situation…pretty fair-minded but competitive…. [in] every aspect of my life….They carry over everywhere….Part of having balance is when you can have that in every aspect, so…I like being an athlete just as much as I like relaxing, just as much as I learning and stuff like that…they all carry over.

The participants also discussed their explorations of identity through sport-related social relationships with others with impairments. The quality of these social relationships were valued as they decreased social isolation, brought them in contact with others with similar experiential backgrounds and values and congruent expectations. Kelly stated that in sport, “there was no expectation different from anyone else. I felt really accepted.” Sport in essence validated the participants’ perceptions of their identity and the meaningfulness of the identity. For example, Kelly described how other competitors’ perceptions of her changed through sport. She recalled:

I think socialising with other people – they look at you differently. Like I’ve had people come up to me and they see me as someone different than who I am when they first met me. And now they’re seeing that she’s at the top for a reason, you know. I’ve worked my butt off to get to the top too, just like everyone else.

Putting on the athlete identity involved the experiences of disciplining the body and focusing on their personal representation of who they were. The experiences these women felt while assuming an athletic identity, in some ways counteracted the sense of otherness that was often attributed to them because of their impairments. However, the swing in master status from “disabled” to “supercrip” could also have undesired consequences. These women learned how to challenge the master status of disabled by balancing their identities as athletes with other identities outside of sport.

4.2.1 Focus on self

Sport was a context in which the participants had positive regard for who they were as they explored their identity representations. As sport is fundamentally “of the body”, sport provided a sense of inclusion to its participants by its very definition of membership. Kelly
describes how arm wrestling provided her an opportunity to reconstruct her own athlete identity following her spinal cord injury. She recalled:

I felt anxiety and stuff when I was younger and tried to do other sports. Like when I was trying to be included in school sports and stuff like that. It gave me anxiety because then I felt like they all knew who I was before – that competitive athlete I was before – and I wasn’t at that level anymore.... And sometimes they probably were, but I felt like they would have been because I was doing that to myself. I was comparing my ability now, as opposed to then. That gave me a lot of anxiety. And a lot of times pushed me a little, like I pushed myself away from socialising in sports. I guess this [sport] has allowed me to open up a lot more and become who I am in that way.... was something that I could get back involved in that was for myself, that was something that I could learn to do again...and I wanted to get back into doing sports because I really identified with doing that when I was younger – I loved doing it....It’s helped, like I said, for me to identify after having the car accident with who I am. And not having the anxiety about competing in an able-bodied sport.

The experiences of sport also involved the participants’ independent clarification of the goals, values, and beliefs to which they were committed. Included in these experiences were opportunities for personal growth, self-reflection, value checking, and positive self-evaluation. Their experiences were placed in the social and structural backdrop of the sport domain. The participants also connected with the self-sacrifice and self-development qualities inherent in the athlete identity including a strong work ethic, the testing of physical and emotional limits, accepting failure and self-discipline. Megan described the identity-related behaviours of sport participation and the complexity of the athlete identity:

It [sport] gives me that confidence in the ability that I can do that, like I won’t hold myself back…It gives me a better work ethic, I think. Like for races you have to prepare, visualise your race and do all the mental steps and then for a test, you know you have to put that preparation in and it gives me the confidence to know that can be achieved as long as I put the effort in....[I] focus on myself... I have the focus of making certain standards for certain meets and stuff, but at the
same time if I know going into it that there’s no way I’ll be able to get the time, it’s kind of do your personal best and just finish the race and just keep going. Just kind of the self…. I reach goals and it’s all about staying healthy. Like with having spina bifida…activities keep me in shape and it gives me something to focus on…

Although identifying with sport was self-affirming, limitations in how that identity could be experienced were also expressed. The voluntary identity of athlete, although creating the potential for decreasing psychological distress involved in identity work in the presence of those without disabilities, created its own demands. Sarah spoke of these stresses and hinted at the desire to abandon the athlete identity should the costs exceeded the rewards. Sarah shared the sacrifices and constraints on her autonomy within her athlete identity as a wheelchair basketball player.

So sports for instance has been an area where I’ve often felt very constrained as far as the kinds of identities or actions that would be appropriate at any given time….Like you don’t make any choices for yourself. You’re told to eat what’s in front of you, you sleep when you have time to sleep, you – every minute of every day is booked, you’re never alone because you’re sharing a room with people…I think that transition to go home – what you want to eat – to be able to make that sort of decision – to tap into so many parts of your identity and to think critically again about things…it’s a very big shift for sure….There’s always sort of the argument that sport empowers you in all these sorts of ways but I think in a lot of ways – especially team sport I think – really take away a lot of your autonomy.

4.2.2. Training the body

Although the participants did not describe themselves as athletes directly, they spoke of the love of learning and the love of training the body. The sports context created an environment that motivated them to be mentally and physical tough. Through training and skill development, the participants experienced the ability to “naturally react” to the demands of the setting.

Sarah, who took part in a team sport, expressed joy in training for wheelchair basketball and credited this with increasing her success in the sport. She experienced her sporting life as follows:
I loved training and I loved learning, I loved the part of really connecting with the team. So I think what has allowed me to be really successful is you get in a game, I’m not really thinking about winning the gold medal, I’m trying to play my best game.

Kelly described how sport enabled her to explore her limits. She also recognized that the identity of athlete subsumed the performance expectations of her sport. In occupying the position of athlete, she experienced the externally imposed behavioural expectations of excellence which although somewhat stressful, also motivated her to do her best. Doing her best involved focused on learning and training so that she could perform without having to consciously make decisions about her actions. She went on to discuss her commitment to ongoing learning even given her acknowledged success. Kelly relayed her experiences of being an athlete this way:

Nervous, very much before...I guess it’s living up to the standard that people think you should be at. And achieving that definitely motivates me. And also keeping focused on training and stuff before. And then at the time, still nervous, but trying to stay mentally focused as well because, like I said, people can try and psyche you out. So if you’re not on your game they’ll easily be able to do that...Being able to compete with a clear mind so I can be able to react without having to think because you don’t always have time to think when you’re doing the sport. So you have to teach your body to naturally react to it....I’ve won lots of titles and stuff like that, but I still like to help a to keep my mind open to that because if I stopped learning I wouldn’t enjoy it anymore. So I think that’s part of…describing myself. Keeping an open mind and staying positive.

Lisa provided a broader perspective on her athlete experiences, elaborating on the benefits of her training beyond sport, highlighting how maintaining and developing her body had perceived benefits beyond her university program. Lisa’s goal was to have the stamina to address various physical demands that may arise in the work world. Lisa relayed:

A lot of the jobs...you have to walk lots or just stand, don’t even move, just stand there...So hopefully when it comes to finding a job that will help me out, that I’ll be actually able to do it longer...It’s like use it or lose it, you know. If I don’t walk now, if I don’t bike right now...I’m not going to be able to in 15 years.
5. DISCUSSION

The participants’ stories of identity exposed experiences within their everyday lives, filtered through relationships with similar others, different others, and themselves (Jenkins, 2008; Kleiber & Kirshnit, 1991; Patterson, 2000; Stets, 2006). Not only did the participants’ stories reveal multiple identities (Cheek & Piercy, 2001; Stryker & Vryan, 2003), they spoke about what they did to maintain their preferred identities within specific contexts.

Positive outcomes of their identities as athletes and sport participation were improved health, self-esteem and confidence (Tasiemski et al., 2004). Because sport has accepted social meanings, symbols, and expectations, this context provided these women with an avenue for exploring and legitimizing an athletic identity within these accepted social meanings (Ruddell & Shinew, 2006; Stets & Burke, 2003).

5.1. Challenging Otherness

As symbolic interactionism describes identity is a complex construct that is formulated within a larger social context, it was intriguing to explore how women with physical disabilities experienced their identities within sport while facing the preconceived societal interpretations of their disability identity.

5.1.1. Symbols of expectations

The extent to which the participants’ identity was questioned, or brought to consciousness, reflected the extent of their identity work as they interacted with people in the public (e.g., fellow university students) in their daily activities (Mercer, 1994). The participants’ identity work could be further described as oppositional identity work as they strove to counter the master status identity of disability to one that was affirming and positively reflected who they perceived themselves to be (Berger, 2008; Williams, 1994). When constructing and assuming a particular identity, commitment to the socially created characteristic of that identity is important. As commitment is based on the quality of social relationships associated with it (Hogg, Terry, & White, 1995), the women in this study faced a unique challenge as the value they placed on their athletic identity differed from the value of society as a whole (e.g., supercrip)
The power of others in regulating the identities constructed and assigned to the participants was clearly apparent (Watson, 2002). Those without disabilities used the symbols of the participants’ bodies and mobility aides (e.g., wheelchairs) to inform communication and designate the participants’ to the position of disabled and assigned stereotypic expectations for them based on this role (Stets & Burke, 2003). The otherness created was based on classification (Horwath, Norval, & Stavrakakis, 2000) of discrediting qualities associated with impairments by members of the public (Goffman, 1963; Overboe, 1999; Williams, 1994). Stereotyped characteristics assigned to the female body with an impairment included passivity, weakness, and dependence. These discrediting characteristics created the discrediting master status of disability above other identity features they may have possessed. The assignment of a master status of disability was experienced through interactions with the public, creating negative or incomplete actions based on this meaning (Anderson & Taylor, 2005; Lennard, 2006).

Perceptions of differences attached to the bodies of the participants created the classifications of two groups - self and other (Woodward, 1997). The participants’ experiences of identity were reflective of the intersection of their personal sense of self and social reactions and relationships with people without disabilities (Hogg, Terry & White, 1995; Darling, 2003). The social structure and commensurate behaviour expectations and meanings created within the public domain left the participants feeling susceptible to the behavioural expectations of their assigned identities. The mainstream social structure and symbols imposed characteristics of a non-walker (i.e., disabled) to the participants, for example (Stets & Burke, 2003; Stryker & Vryan, 2003). To waver from these imposed behavioural expectations required management of social interactions to prevent confusion and tensions from occurring.

The dynamic and multiple natures of identities were apparent as the participants selected the identities that met the expectations of the situation and the others involved (Stets, 2006). The deviation from the classification had the consequence of unrecognized identities and expectations for the participants that were so disruptive to their social responses that the participants acquiesced to the conflicting identity of non-walker. The sense of otherness in these situations was reinforced for all involved, creating two distinct social worlds that reinforced ableism and submission to undesirable classification. The emotional cost of the mainstream public could not resolve multiple identities beyond the master status identity of non-walker (i.e., disabled). Central to the master status of disability was the symbol of the wheelchair (or scooter).
There was a personal cost of the negotiated meaning of disability in the public domain given the response of others when expectations were not met (Stets & Burke, 2003). Managing the social context by staying within the behavioural expectations of others was also reported by Goodwin, Thurmeier, & Gustafson (2004).

The participants’ experiences highlighted the social construction of disability, in that it is the embodied relationship between impairment and the social and physical environment that leads to its creation (Oliver, 1996). Impairment is a change in structure or function of the body. It is not until there is an interaction with the outer world that that disability becomes identified and gains a social meaning. Social meanings were transferred to symbols that, in turn, communicated expectations associated with the identity of disability or disabled.

5.1.2. Athlete as supercrip

The identity of supercrip for the participants of this study were ascribed but not assumed. The identity of supercrip was ascribed based in able-bodied people’s discrediting assumptions of weakness, dependency, and passivity imposed by their impairments (Shakespeare, 1996). People who exceed these discrediting behavioural expectations are considered to be exceptional and heroic. The ascribed identity of supercrip was experienced by the participants was overwhelming and summarily rejected (Berger, 2008). The participants felt their experiences were ones typical of athletes and to have higher expectations of athletes with disabilities was damaging to the profile of others in the disability community and relinquished responsibility for society to address barriers imposed by the social and build environments (Shakespeare, 1996).

The discourse surrounding the notion of supercrip highlighted the meaningfulness of participation in physical activity in the participants’ identities as women with physical disabilities (Blinde & McCallister, 1999). Through their participation, the participants were able to displace the assigned characteristics typically experienced through societal belief systems regarding disability as weak, passive, and dependent (Groff & Klieber, 2001; Peters, 1995, 1996), while also rejecting the notion that disability was to be overcome. The participants resisted the assertion that individual effort was a means for overcoming societal barriers for people with impairments (Hardin & Hardin, 2004). Responsibility for creating an inclusive society in the view of the participants was a shared responsibility. By resisting the identity of supercrip, the participants worked to create new personal expectations and meanings for their
social behaviour that could be incorporated into the symbols of disability to create opportunities for new forms of communication (Blumer, 1969). Through sport, these women met groups of individuals with similar interests and experiences (Groff & Kleiber, 2001; Valliant et al, 1985; Blinde & McClung, 1997). Sharing these expectations with fellow athletes created negotiated social meanings for the designation of disabled that was shaped, reshaped, and internalized as they interacted with and recognized others who also resisted the supercrip identity (Shakespeare, 1996).

Physical activity provided the participants with a means of strengthening and using their bodies in positive ways. The women were proud of the effort and skill required to develop their bodies through physical activity, a finding that supports the work of Ashton-Schaeffer, Gibson, Holt and Willming (2001).

5.2. Putting on the Athlete Role

The experiences of sport and identity shared by the participants were an interplay of identity invalidation, classification and assigned identity, oppositional identity work (identity) and affirmation through multiple identities. The participants presented their worlds as the self in conflict, particularly during discussions of the supercrip. Social interactional expectations collided with knowledge claims of ability, cultural representations of disability and environmental constraints (Gill, 1997; Titchkosky, 2003). There was an inherent tension between the societal notion of supercrip and the participants’ love of their sports and putting on the athlete identity. The prevailing stereotypes of disability relayed by the participants were not accurate representations of their own perceived abilities or potential (Groff & Kleiber, 2001). Sport provided an opportunity to focus on a positive identity that was self-actualized both inside and outside of sport, increasing their confidence and involvement in other social situations while decreasing the linkages to the notion of supercrip (Blind & McClung, 1997).

Sport was therefore a valuable context for the participants to explore their identities (Haggard & Williams, 1992). Through sport they could analyze their social relationships with others, the meanings (developed from the symbols of their disability and participation in sport) assigned to those relationships, and explore and recalibrate personal identities beyond those assigned by able-bodied social structures (such as supercrip) (Stets & Burke, 2003). The characteristics associated with the identity of sports person took priority over the discrediting
qualities associated with the identity of disabled. Sport created an environment to identify with a group of people with similar interests and experiences that lead to positive identification with their sport and others engaged in the sport (Ashton-Schaeffer et al., 2001; Blinde & McClung, 1995). Sport also provided a context for resisting the assigned identities of others and the compulsion to pass as normal (Blinde & McCallister, 1999; Guthrie & Castelnuovov, 2001). Sport reflected a relatively small and specialized set of social relationships (e.g., athlete, coach, manager, spectators) within which identities are selected (Stryker & Vryan, 2003). This is not to suggest that participants did not experience the identity of disabled by coaches, managers, or spectators. However, the commitment they had to the identity of sports person impacted the meaning of the social relationships inherent in sport (Stets, 2006; Stryker, 1968).

5.2.1. Focus on self

As women with disabilities often engage in oppositional identity work in many social contexts, having an avenue through sport for focusing on and exploring parts of the self was essential for maintaining the psychological strength needed to do so. The exploration of self in these situations provided the participants with the opportunity to analyze this relationship and develop meanings that can be associated with a positive identity, such as an athletic identity (Hogg, Terry, & White, 1995; Darling, 2003).

Sport was a context that the participants highly valued as they could resist their assigned master status identity as disabled and become committed to an identity specific to sport (Groff & Klieber, 2001; Groff & Zabriski, 2006). As Peters posits (1995, 1996), the experience of disability is a linkage of the participants’ relationships to their bodies and the social role limitations imposed by societal standards. For example, when Kelly spoke of the anxiety she felt when attempting to be included in school sports, she was aware of the image others had of her pre-injury and how they were interpreting her body and ability post-injury. The master status assigned to her based on disability led her to develop negative assumptions of her abilities (Goodwin, 2008). Her experience of her body while participating in sports post-injury was not initially positive and linked to the disability status assigned to her by others. She felt as though she had lost an avenue for socializing with her peers. While sport is associated with building character and preparing a person for other areas of life (Ruddell & Shinew, 2006), the lack of sport created a vacuum in Kelly’s life. As she moved into arm-wrestling, she was able to resist
this assigned status, creating a more positive focus on the body. By exploring her physical boundaries post-injury, Kelly was able to reject disability as an assigned master status and develop and explore alternative identities (Patterson, 2000).

Within sport contexts, the participants explored identity alternative to the assigned master status experienced in other contexts through self expressions and social feedback from others who also had impairments. For women with disabilities in particular, social feedback from peers provided these women with opportunities to move beyond the masculine hegemony that exists in the sporting world (Blinde & McCallister, 1999; Hardin 2007). For example, Kelly’s participation in a traditionally male sport, arm-wrestling, provided her with an opportunity to use the social feedback she received to move beyond the anxiety that she felt post-injury. Kelly felt anxiety about herself and her role as an athlete post-injury, as her identity as an athlete had been challenged through her injury and social reactions to it (Stets, 2006). Her identity as an athlete had lost its salience in that it was unlikely Kelly would be likely to pick this identity to enact as she felt anxiety about how she would be perceived. While she was negatively comparing her current identity as a women with a physical disability immediately post-injury to whom she was pre-injury, reintegrating into sport provided her with the opportunity to restore her identity as an athlete. By creating new meanings to create a new identity as an athlete, Kelly was able to reclaim connections to who she was pre-injury. Her commitment to this identity re-established the salience and returned it to the hierarchy (Stets, 2006; Stryker, 1968, 2007). Maintenance of an identity was also dependent on the transferability of identity values to other identities on each participant’s identity hierarchy. By exploring how she felt during training and competition, Kelly was able to redefine and focus on herself as an athlete and provide a connection to who she was pre-injury.

Social feedback through sport also enabled these women to move beyond the “double whammy” associated with the perceptions of their bodies as weak and dependent and persons with disabilities (Peters, 1995, 1996), which can minimize the legitimacy of their identities in sport contexts (Blinde & McAllister, 1999). The participants, while cognizant of the identities they were assigned and internalized (i.e., disabled), were not constrained by the social meaning of the designated identity or social position. The fluidity of identity is one of the principle tenets of symbolic interactionism. Through the labels and meanings that these women choose to link to their actions and roles, their social selves become complex structures of identities that they
themselves selected, developed, and accepted as legitimate (Stryker & Vryan, 2003; Goffman, 1963). By resisting assigned characteristics of weakness and passivity, the participants directly challenged the assigned master status identity as disabled, and were able to reshape societal expectations about their bodies. As posited by identity theory, these women were actors rather than reactors to identities borne out of specific social situations (Stryker, 2007). Each participant shared stories of how they experienced an assigned identity within social situations. Sarah, for example, who walked, but used crutches or a wheelchair interchangeably described how the public ascribed perceptions of her independence depending upon the mobility aide she was using.

Identity relevant meanings were formed and used to compare, maintain, or restore their personal identity. While identity is often taken for granted, women with physical disabilities have to be active agents in resisting the assigned identity that can be thrust upon them (Patterson, 2000). Megan, for example, spoke about how the values and skills she learned through sport were of use in other areas of her life, such as, as a student. Through social feedback from others indicating the focus and skills she learned through sport were useful in other identities, Megan developed an increased commitment to her athletic identity, cementing its inclusion in her identity hierarchy (Vryan, Adler, & Adler, 2003; Stryker, 2007). Megan used the context of sport to demonstrate and fine-tune her physical skills and abilities (Kleiber & Kirshnit, 1991). Sport also provided her with the opportunity to learn how to manage her emotions, in a public domain, in a way that allowed for more action and self-development in the same way as described by Kleiber & Kirshnit (1991). Through sport, others could validate her actions and skill development in meaningful ways that are essential to cementing an athletic identity that could provide relevancy within her identity hierarchy (Stets, 2006; Stryker, 1968, 2007).

5.2.2. Training the body

Researchers in symbolic interactionism have demonstrated that identity is often interpreted through commonly agreed upon symbols and meaning between an individual and others in society. One of the most commonly used symbols is the body, particularly during identity creation for individuals with physical disabilities (Overboe, 1999; Peters, 1995; Titchkosky, 2003). The body can be used to develop classification or categorization by mainstream society (Cote & Levine, 2002).
Identity theory posits that our behavior is dependent on a classified world, and that the classified world includes symbols and meanings that designate the position of an identity within the larger social structure (Stets & Burke, 2003; Stryker, 2007). However, keeping in mind the discussion of the disabled body in the previous paragraph, current behavior is linked to a symbol (e.g., the disabled body, wheelchair), which is currently associated with negative meanings and an assigned ‘master identity’. For the participants, attempts to exist outside of assigned identities can create difficulty. Identity theory states that identity becomes defined out of the shared expectations and meanings that have been created by both the individual and the larger social structure (Stets & Burke, 2003; Stryker, 2007). The participants shared stories about trying to manage the difference, or distance, between their chosen identities with their bodies and those assigned to them by others in society. Sarah highlighted this action when she shared stories about how she chooses her method of mobility when encountering others. Lisa also spoke about how social interactions could be awkward and confusing if she chose to use her scooter and walk around within the same setting. She enjoyed the discomfort this caused others as it caused them to reassess how they interpreted her body and identity as a woman with a disability.

The disabled body is often interpreted as weak and passive and has often been focused on, to the exclusion of the rest of the person, as a whole (Overboe, 1999). This established a ‘master status’ that was ultimately negative and fraught with difficulty when attempting to change this notion. In trying to create an identity that replaces this ascribed status, Titchkosky (2003) argued that creating an alternate identity without acknowledging, or while excluding the disabled parts, will still lead to conflict, as an individual will still be left with significant gaps in identity. By focusing on developing the body and an appropriate understanding of it, its strengths, and its role in identity development the participants can create an athletic identity that is whole, functional, and accepted as legitimate through commonly held identity practices in society. As Reeve (2002) found, the participants could be rather than do.

Sport provided an avenue for developing the body enabling the participants to explore the boundaries of their physical abilities by pursuing excellence, developing skill, enhancing their health and achieving goals (Blinde & McClung, 1997; Ruddell & Shinew, 2006). Lisa’s participation in sport, for example, provided her with an increased understanding of how sport can be used to create strength beyond perceived limitations. When she was first introduced to sport in a camp for youth with disabilities while in high school, she expressed amazement at how
those with more challenging disabilities were testing their physical boundaries. Being around others that are part of a common reference group because of disability allowed Lisa the opportunity to use this experience as a source of information in the same way as the youth Groff and Kleiber (2001) observed in their research. The connection she developed with the other camp participants provided her with a better understanding of her physical abilities and provided a sense of satisfaction with herself (Goodwin, Krohn, & Kuhnle, 2004; Tasiemski, Kennedy, Gardner, & Blaikley, 2004). Camp provided Lisa with strategies to visualize her body working through physical activity in a way that positively influenced identity development, building confidence to engage in sport outside of the camp setting. The benefits of sport allowed her the opportunity for self-development through her body in a way she would not have experienced in a more socially constrained public environment (Kleiber & Kirshnit, 1991). An athletic identity, which is considered a voluntary identity, was given more legitimacy and salience than her assigned identity and moved higher in her identity hierarchy (Herman-Kinney & Verschaeve, 2003; Stets, 2006). Positive feedback from fellow athletes and her sport achievements developed through a positive focus on her body increased her acceptance of an athletic identity and commitment to sport.

The participants aligned athletic identity with positive regard for their bodies as they met the performance expectations of their chosen sport activities, including adherence to rules, high standard of training and the expectations of success (Kleiber & Kirshnit, 1991). As Tamiemski et al. (2004) found in their research, these participants participated in sport to maintain health and build strength. For example, Sarah’s commitment to wheelchair basketball was linked to the how she physically felt while training and learning about the game. The increasing success she had in wheelchair basketball under the direction of her coach increased her commitment to the athlete identity.

The participants did acknowledge having negative, as well as positive, experiences associated with their identity as athletes. While participation in sport provided the participants with many physical benefits, training the body had a social cost. Sarah’s shared her frustrations about the expectations of commitment that seemed to supersede other identities outside of her sport of wheelchair basketball. When she spoke about the regimented aspects of training and competing and the lack of privacy while travelling, her descriptions resonated with the
description of disability as a “master status” as the barriers created by the built and social environments brought her classification as “disabled” to consciousness (Stets & Berke, 2003).

5.3. Summary

Watching my mother and sister experience the positive impact of exercise on the multiple identities they undertake in their everyday lives was the initial catalyst for my interest into women’s health and the impact of physical activity in other areas of an individual’s life has always been a specific point of interest for me, as a researcher. Exploring the athletic identity of women with physical disabilities provided me with an opportunity to really begin to understand how the participants felt that the experienced athletic identity supplemented other areas of their lives. The participants were gracious in allowing me into their experiences as athletes, providing me with the chance to understand how useful this identity was. For example, they shared how skills that they felt were developed over the course of sport participation, such as focus and intensity, crossed over into other social situations.

The participants’ reasons for commitment to an athletic identity was very similar to the commitment my mother and my sister were committed to their identities and provided me with more understanding of their situations as well. From my conversations with these women, I learned that this commitment to athlete identity was very strong and readily apparent, yet misunderstandings with others in society could happen when this commitment was misconstrued in a way that created the supercrip identity. This was a point of tension for these women. Preconceived behavioural expectations about how these women should act and behave were apparent (e.g., non-walkers, overachievers). While sport participation was the source of this assigned identity, it was also the saviour, in a sense, as it provided the women with an avenue to challenge these societal assigned identities and assume self-affirming athlete identities.

This study provides the research community and me, more directly as a researcher, with a better understanding of the benefits of sport participation for women with physical disabilities. Through exploration of sport participation and identity development, it became apparent that taking part in sport does impact identity development in meaningful ways. This is a phenomenon I had already began to observe through my previous experiences as a research assistant, and this study has provided me with a better understanding of how it is experienced by the participants. The social misconceptions and assigned identities these women typically face are tempered by
the fact that sport provides another avenue to redefine their identities within and outside of their participation. Using physical activity to train their bodies and minds, these women were able to redefine their athletic identity based on their experiences within this context. Sport was also a useful context for reintegrating the new meanings and symbols back into societal perceptions of disability, as it is a relevant and generally well-understood and popular context for social interaction within society in general.

This research also provided a voice for the female participants and has been able to bring women into focus. As I shared in the introduction, my mother and sister are constantly aware of their physical limitations and work hard to mediate them. In general, medical professionals are the only others who are aware of these limitations. It is useful for my mother and sister to share their stories with me because they can feel empowered, bringing an insider perspective to the experiences that are most often only viewed through the medical model. The same holds true for these participants. Through this research, these women were able to share their stories and provide those who are considered ‘outsiders’ (including me), with a better understanding of the lived experience of being female, having a physical disability and participating in a sport. Through listening to the stories and experiences these women shared, we are able to better understand the “double whammy” phenomenon that is not experienced by men within sport contexts.
6. LIMITATIONS AND FUTURE RESEARCH

6.1. Limitations

There were several limitations to the research study that I would like to acknowledge. By recognizing the limitations, I am hoping that future researchers will be able to learn from my work. The limitations to this study are as follows:

1. *Community buy-in for recruitment.* I approached community organisations through email and by telephone to schedule presentations about this project in order to build rapport and ultimately recruit participants. I was unsuccessful in reaching participants in this manner thereby limiting the pool of participants who may have potentially been interested in participating in the study. Perhaps developing a consultation stage with community organisations in order to develop research questions reflecting community needs would lead to more successful buy-in from community partners.

2. *Small sample size.* While there are benefits to having small sample sizes when conducting phenomenological research, there are also limitations. For example, only one participant had an acquired physical disability. Increasing the sample size could provide more experiential information to strengthen the transferability of these outcomes for women with acquired disabilities.

3. *Artefact collection.* The artefact collection was not as powerful or meaningful as I had intended as a stimulus for discussion. While each woman ultimately selected an item that represented their experiences, they each seemed more emotionally attached to the stories they had shared with me.

4. *Willingness to share life experiences.* Each of these women chose to share their experiences and stories with me. As a group they appeared very outgoing, engaged, and involved. A subpopulation this research cannot account for is women who may be too shy to come forward and chose not to volunteer for a research study.

5. *Lack of second level member checking.* Due to the amount of time between initial participant interviews and data analysis, I made the decision to forgo the second level member checks with the participants. Second level member checks would have
strengthened the dependability of the results. Future research endeavours will include these member checks.

6.2. Future Research

This exploration of how sport impacts identity development in women outside of sport itself is also useful and can be expanded on through the following recommendations:

1. *Further examination of the role of sport participation on identity development in school-age females.* Adolescence is an important period of identity development. Research focusing on the role of sport participation on identity development amongst young women would provide a better understanding of this process at a very influential time in young women’s’ lives.

2. *Inclusion of more women who have acquired physical disabilities.* This research involved one woman with an acquired disability. Exploring in more detail the impact injury has on identity development of women who have established identity roles that may change would be of interest.

3. *Further qualitative studies with women as the population of study.* Current literature on disability and sport is lacking female perspectives. Having a better understanding of the experiences women with disabilities have with regard to sport is essential in removing the double standard that currently applies to this population. The experience of athleticism may, in fact, be moderated or mediated by gender and incorporating additional female perspectives could be informative in this regard.

4. *Further research with ‘others’ to better understand the current perceptions of women with physical disabilities.* Each of the women in this research shared stories of the misconceptions of others about their identities, especially in relation to sport participation. Research that could reveal more about how these misconceptions are created, perpetuated, and ultimately lessened would be beneficial.

5. *Further examination of the impact of social connections within the sport environment.* These women spoke of the relationships they had with team mates, coaches, mentors, and other involved in their sport. Further research into the impact of these relationships would provide a better understanding of the commitment to developed identities. The theory of
psychological sense of community may be a suitable framework for additional study (Goodwin et al., 2009)

6. **Further examination of embodiment and identity development for women with physical disabilities.**

This research focused primarily on the role of sport participation in identity development for women with physical disabilities. While the results indicated that training the body is an important part of putting on the athletic identity, little mention was made of the body as it pertains to identity. Further research incorporating embodiment literature would be of interest as the body is central to much disability research.


Watson, N. (2002). Well, I know this is going to sound very strange to you, but I don’t see myself as a disabled person: Identity and disability. *Disability and Society, 17,* 509-527.


8. APPENDICES
APPENDIX A: Recruitment Flyer

What’s Sport Got to Do With It?
Identity development of women with physical disabilities in sport

Are you a woman …

18 years of age or older,
with a physical disability (acquired or congenital),
who regularly participates in recreational or competitive sport,
no longer in an active rehabilitation program, and
does not participate in sport for rehabilitation purposes

What is the purpose of this study?

The purpose of this study will be to explore identity development for women with physical disabilities who participate in sport. I will explore:
1. the impact the environment (i.e. sport) has on the development of one’s mental representation of her personal and social characteristics,
2. what meaning this process holds for an individual, and
3. the perspective women with physical disabilities can bring to this process

What would your participation in this study include?

Participation in this study would include:
1. Two one-on-one interviews (approximately 1 hour each)
2. Completion of consent and demographic forms (approximately 30 min)
3. Reading the interview manuscript to ensure your ideas and experiences were correctly recorded (approximately 1 hour)

Total time commitment: 3 hours, 30 minutes

Interested in participating?

If you are interested in participating or have any questions, contact:
Robin Thurmeier, M Sc Candidate
College of Kinesiology, U of S
87 Campus Drive
Saskatoon SK S7N 5B2

Phone: (306) 270-1785
(306) 966-1123
Email: robin.thurmeier@usask.ca
APPENDIX B: Ethics Approval

Certificate of Approval

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CERTIFICATION

The University of Saskatchewan Behavioural Research Ethics Board has reviewed the above-named research project. The proposal was found to be acceptable on ethical grounds. The principal investigator has the responsibility for any other administrative or regulatory approvals that may pertain to this research project, and for ensuring that the authorized research is carried out according to the conditions outlined in the original protocol submitted for ethics review. This Certificate of Approval is valid for the above time period provided there is no change in experimental protocol or consent process or documents.

Any significant changes to your proposed method, or your consent and recruitment procedures should be reported to the Chair for Research Ethics Board consideration in advance of its implementation.

ONGOING REVIEW REQUIREMENTS

In order to receive annual renewal, a status report must be submitted to the REB Chair for Board consideration within one month of the current expiry date each year the study remains open, and upon study completion. Please refer to the following website for further instructions: [http://www.usask.ca/research/ethical.shtml](http://www.usask.ca/research/ethical.shtml)

Please send all correspondence to:

Ethics Office
University of Saskatchewan
Room 305 Kirk Hall, 117 Science Place
Saskatoon SK, S7N 5C8
Telephone: (306) 966-2084 Fax: (306) 966-2089
Informed Consent Form

You are invited to participate in a study entitled: *What’s Sport Got to Do With It? Women with Disabilities and Identity Development.* Please read this form carefully and feel free to ask questions you might have.

Researcher: Robin Thurmeier, MSc Candidate, College of Kinesiology, U of S, 270-1785

Committee: Dr. Donna Goodwin (Supervisor), Steadward Centre, U of A, (780) 492-4397
Dr. Louise Humbert, College of Kinesiology, U of S, 966-
Dr. Kevin Spink, College of Kinesiology, U of S, 966-

Purpose and Procedure: The purpose of this proposed study will be to explore the development and meaning of self-identity in sports for women with physical disabilities. The objectives of this proposed study are: a) to understand the meaning of self-identity for women with physical disabilities, b) to understand the role sport plays in identity development and c) to bring a female disability perspective to our understanding of identity development within the context of disability sport. The study will require you to participate in two one-on-one interviews of approximately 1 hour each. The interviews will be audio taped. The audiotape recordings will be transcribed (written out) word for word. You will also be asked to provide feedback on the accuracy of interview transcripts and will be asked to review the themes that emerge from the data analysis.

You will also be asked to bring an artefact to the second interview. An artefact will help the researcher better understand your experiences within sport and identity development. An artefact could be memorabilia, documents, photographs, or even their own body. As these items are your property, they will be photographed at the time of the second interview.

Potential Risks: Your participation in this study is voluntary. You can refuse to answer any question posed to you during the interview. Should you like to discuss issues raised in the interview with others, you will be encouraged to contact the counselling services recommended by your local Canadian Paraplegic Association (CPA).

Potential Benefits: The voice of female athletes with a physical disability will be heard in this study and although the impact of these messages cannot be guaranteed, your participation in this study will contribute to a better understanding of how sport participation can impact identity development. In addition, you will be conveying your perspectives as athletes to the research community, and through the distribution of the findings, highlighting the benefits of sport participation to current and prospective players.

Confidentiality: The following steps will be taken to protect your anonymity and the confidentiality of the verbatim interview transcripts, (a) names or other identifying particulars will not be discussed or made public outside of the research team (researchers, professional transcriber), (b) pseudonyms will be substituted for all names that appear on the data transcripts.
and material for publication, and (c) the audio tapes will be identified by code number only, and
(d) the gathered information will not be viewed beyond the research team. The audiotapes and
transcripts will be stored separately from the master sheet identifying names, pseudonyms, and
code numbers. The computer files of the emailed stories will be labelled and stored by code and
saved onto a confidential research disc created by the principle investigator.

The information gathered may be presented as themes that emerge from the transcripts
and other gathered information (photographs). Quotes will be used to illustrate the themes,
however, confidentiality of the participants will be held paramount at all times. Every effort will
be made to protect the identity of the athletes. All names, locations, team identifiers, coach
affiliations, or team standing information will be removed from the quotes.

Because the participants for this study have been selected from a small group of people,
all of whom are known to each other, it is possible that you may be identifiable to other people
on the basis of what you have said. After your interview, and prior to the data being included in
the final report, you will be given the opportunity to review the transcript of your interview, and
to add, alter, or delete information from the transcripts as you see fit.

Right to Withdraw: You will be reminded at the beginning of the interviews that you have the
right to refuse to answer any of the questions and may switch off the tape recorder at any time
during the interview. You may withdraw from the study for any reason, at any time, without
penalty of any sort, including current or future participation in sports programs. If you withdraw
from the study at any time, any data that you have contributed will be destroyed.

Questions: If you have any questions concerning the study, please feel free to ask at any point;
you are also free to contact the researchers at the number provided above if you have questions at
a later time. This study was approved on ethical ground by the University of Saskatchewan
Behavioural Sciences Research Ethics Board on ______________. Any questions regarding
your rights as a participant may be addressed to that committee through the Office of Research
Services (966-4053). Out of town participants may call collect.

At the time you receive the interview transcript to review you will be provided with the
opportunity to request a copy of the results of the study. A copy of the published manuscript can
also be requested at that time.

Consent to Participate: I have read and understood the description provided above; I have been
provided with an opportunity to ask questions and my questions have been answered
satisfactorily. I consent to participate in the study described above, understanding that I may
withdraw this consent at any time. A copy of this consent form has been given to me for my
records.

I give permission for the photographs to be used under the following conditions only:

_____ as raw data, not to be viewed outside of the research team (researchers and professional
transcriber),
_____ only those photographs that do not reveal my identity may be used for educational
purposes (professional and research presentations) and research publications,
_____ all photographs can be used for educational purposes (professional and research
presentations) and research publications.
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APPENDIX D: Participant Information Form

What’s Sport Got to Do With It?
Participant Information Form

1. Date of Interview: ____________________________________________

2. Name: ______________________________________________________

3. Birth date: _________________________________________________

4. Email address: _____________________________________________

5. Mailing address: ____________________________________________

6. Type of disability: __________________________________________

7. Acquired or congenital: ______________________________________

8. If Acquired, date of injury: _________________________________

9. In what type(s) of sport(s) do you currently participate?
   ____________________________________________________________
   ____________________________________________________________

10. How many times/week do you participate in the above sport(s)?
    ___________________________________________________________
    ___________________________________________________________

11. How many years have you participated in the above sport(s)?
    ___________________________________________________________
    ___________________________________________________________

12. What type(s) of sport(s) have you participated in the past?
    ___________________________________________________________
    ___________________________________________________________
APPENDIX E: Interview Guide

1. How would you define your own self-identity?
   a. How would you describe yourself to others?
   b. What characteristics would you consider yourself to have?
      i. How do you act/conduct yourself to show others your identity?
   c. What roles do you see yourself filling in life?
      i. Examples – work, family, school
      ii. What do these roles mean to you?

2. What is the motivation for your sport participation?
   a. What are your goals in your participation?
   b. What values are associated with these goals?
   c. How important is this participation to you?
   d. What impact does it have on other parts of your life?
      i. Examples – work, school, family

3. How do you see yourself when you are participating in your sport?
   a. What does this mean to you?
   b. How do your teammates/coaches see your involvement in the sport?
      i. How about others not involved in your sport?

4. How do you feel about yourself when participating in your sport?
   a. Do you feel like this in any other areas of your life?
   b. How does this feeling impact other areas of your life?

5. What are the expectations of you from your teammates/coach/trainer in your sport participation?
   a. What roles do they expect you to fill?
   b. How do these expectations affect how you think about yourself?

6. What do you think the societal expectations are of someone with your type of disability are?
   a. Negative/positive?
   b. Men vs. women?
   c. How do you challenge these?
   d. How does your sport help in this process?
   e. What do you think people need to know about who you are?

7. Tell me about the artefact you have chosen.
   a. How does it symbolize your role/identity in sport?
   b. What does it show other people about you?
   c. How would you describe it to someone who does not know you?
APPENDIX F: Transcript Approval Form

THE UNIVERSITY OF SASKATCHEWAN

Data/Transcript Release Form

Title of the study: What’s Sport Got to Do With It? Women with Disabilities and Identity Development

Researcher: Robin Thurmeier, MSc Candidate
College of Kinesiology
University of Saskatchewan
Saskatoon, SK S7N 5C2
(306) 270-1785

I, __________________________________, have reviewed the complete transcript of my personal interviews in this study, and have been provided with the opportunity to add, alter, and delete information from the transcript as appropriate. I have also reviewed the artefact I have chosen and I acknowledge that the transcript and artefact accurately reflect what I said in my personal interview with Robin Thurmeier and that the artefact portrays what I intended it to represent. I hereby authorize the release of this transcript and artefact to Robin Thurmeier to be used in the manner described in the consent form. I have received a copy of this Data/Transcript Release Form for my own records.

__________________________________________  ____________________________
Participant  Date

__________________________________________  ____________________________
Researcher  Date