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6 Exploring Choking Experiences in Elite Sport:

7 The Role of Self-Presentation

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## 1 Abstract

2 Objectives: The aims of this study were twofold: first, to examine the role of self-presentation  
3 within the lived-experience of choking in sport; and second, to explore whether the 2 x 2  
4 framework of self-presentation (Howle, Jackson, Conroy, & Dimmock, 2015) holds the  
5 potential to further our understanding of acute sporting failure under pressurized conditions.  
6 Design and Method: An empirical phenomenological research design was adopted to address  
7 the research aims. Purposefully selected participants completed phenomenological interviews,  
8 which explored in detail their experiences of choking and clutch performance under pressure.  
9 The sample consisted of 9 elite athletes (6 male and 3 female) ( $M_{age} = 27.14$ ;  $SD = 5.27$ )  
10 from a range of sports (netball, rugby union, golf, tennis, and cricket). Results: Participants  
11 reported a tendency to hold protective-agentic self-presentation motives, low self-presentation  
12 efficacy, and self-presentational concerns prior to, and during the choke. Conversely,  
13 acquisitive-agentic self-presentation motives, and self-presentation efficacy were experienced  
14 before and during clutch performances. However, alongside self-presentation, other  
15 psychological constructs also preceded and accompanied the choking experience (e.g.,  
16 unfamiliarity and perceived control). Conclusion: This exploratory study is the first to  
17 identify the value of examining choking in sport through the lens of the 2 x 2 self-  
18 presentation framework, with self-presentation motives appearing to influence the choking  
19 experience. Yet, it is also evident that self-presentation may not explain all choking episodes.

20 *Keywords:* clutch, pressure, paradoxical performance, 2 x 2 framework.

## 1           **Exploring Choking Experiences in Elite Sport: The Role of Self Presentation**

2           When exposed to pressure, athletes strive to achieve optimal levels of performance.  
3           Though by doing so, some will paradoxically experience a performance decrement and fail to  
4           reach expected standards. When that decline in performance is dramatic and acute, the  
5           process is often labelled by athletes as ‘choking’ under pressure (Hill, Hanton, Matthews, &  
6           Fleming, 2010a; Mesagno & Hill, 2013). Hence, extensive research attention has been  
7           directed towards understanding why certain athletes maintain or even exceed pre-performance  
8           expectations under pressure, while others under-perform or choke.

9           There continues to be a debate regarding the operational definition of choking in sport  
10          (see Jackson, 2013; Mesagno & Hill, 2013), though the phenomenon is increasingly being  
11          described as a significant breakdown in skilled performance under pressure, caused by  
12          attentional disruption (Mesagno, Geukes, & Larkin, 2015). The two mechanisms proposed to  
13          explain such disrupted attention are distraction (e.g., processing efficiency theory, Eysenck &  
14          Calvo, 1992; attentional control theory, Eysenck, Derakshan, Santos, & Calvo, 2007) and  
15          self-focus (e.g., explicit monitoring hypothesis, Beilock & Carr, 2001; conscious processing  
16          hypothesis, Masters, 1992). With regards to distraction, the choke occurs when the athlete’s  
17          attention shifts away from task-relevant cues. Thus, if an athlete experiences anxiety when  
18          performing under pressure, it will be processed through their working memory, which  
19          reduces their capacity to focus on, and process task-relevant information (Eysenck & Calvo,  
20          1992). Moreover, if the athlete perceives there is a threat to the achievement of their current  
21          goal, attention is also directed towards the source of that threat. Consequently, the athlete’s  
22          ability to attend to the information required for the task is reduced (Eysenck et al., 2007) and  
23          they are likely to experience choking (see Mesagno et al., 2015 for a review).

24          In contrast, the self-focus theories indicate that the choke is the result of the performance  
25          pressure causing athletes to experience heightened self-consciousness and anxiety. This  
26          increases the likelihood of the athlete monitoring the step-by-step control of the skill

1 processes (Beilock & Carr, 2001), or controlling the explicit components of that skill  
2 (Masters, 1992). Both responses lead to a breakdown in performance as they disrupt the  
3 automated processes responsible for the execution of proceduralized skills (see Beilock &  
4 Gray, 2007).

5 A number of environmental and interpersonal factors are suggested to moderate the  
6 likelihood of an athlete experiencing choking in sport (e.g., skill type, Beilock & Carr, 2001;  
7 team cohesion, Hill & Shaw, 2013; perfectionism, Gucciardi, Longbottom, Jackson, &  
8 Dimmock, 2010; fear of negative evaluation, Mesagno, Harvey, & Janelle, 2012; coping  
9 approach, Hill & Hemmings, 2015). However, self-presentation has been identified as a  
10 particularly important moderator, and as a result, has informed the proposed self-presentation  
11 model of choking (Mesagno, 2009; Mesagno, Harvey, & Janelle, 2011).

12 Self-presentation is the process by which people monitor and control how they are  
13 perceived by others (Leary, 1992). Human beings are inherently motivated to present  
14 themselves to others in a way that achieves a desired impression, and/or avoids an undesired  
15 impression (Leary & Kowalski, 1990). Competitive sport provides an environment where  
16 self-presentation is pervasive, as athletes are motivated to portray an image of being mentally  
17 tough, driven, dedicated, and athletically competent, while wishing to avoid appearing  
18 unskilled, incompetent, unfit, unprepared, or unable to handle pressure (Prapavessis, Grove,  
19 & Eklund, 2004). Such self-presentational motives are understandable given that athletic  
20 outcomes such as team selection, playing time, or even sporting success are often dependent  
21 on the impression athletes offer to significant others (e.g., coaches, selectors, opponents, and  
22 media; Leary & Kowalski, 1990). However, the pursuit of self-presentational goals can exert  
23 considerable influence on an athlete's cognitions, emotions, and behaviors (Wilson & Eklund,  
24 1998), including raised anxiety levels. Specifically, if the athlete becomes uncertain of  
25 achieving the desired positive impression, or avoiding an undesired impression (i.e., possess

1 low self-presentation efficacy), they are likely to experience anxiety (Hudson & Williams,  
2 2001; Leary, 1992).

3 Through the self-presentation model of choking, Mesagno and colleagues (Mesagno,  
4 2009; Mesagno et al., 2011) suggested that choking-susceptible athletes are highly motivated  
5 to create a positive image, and are overly concerned about the negative judgments of others.  
6 Hence, when they have low self-presentation efficacy and doubt their ability to maintain a  
7 favorable impression during pressurized performance, they will experience high levels of  
8 anxiety, and may choke via distraction or self-focus. Namely, they become distracted by their  
9 self-presentational 'concerns', or will 'self-focus' in an ineffective attempt to manage their  
10 impression.

11 The tenets of the self-presentation model of choking have received tentative support. For  
12 example, Mesagno et al. (2011) found that pressure derived from an evaluative audience  
13 appears more likely to encourage choking, compared to situations where the pressure is  
14 created through the manipulation of motivational rewards. Furthermore, a fear of negative  
15 evaluation has been associated with choking through qualitative (Hill, Hanton, Matthews, &  
16 Fleming, 2010b) and quantitative research (Mesagno et al., 2012), while athletes often report  
17 self-presentation concerns prior to their choke event (e.g., Geukes, Mesagno, Hanrahan, &  
18 Kellman, 2012). Although similar concerns regarding the desire to manage their impression  
19 have been reported prior to excelling (clutch performance) under pressure (see Hill et al.,  
20 2010b), in this instance, the athletes adopted cognitively-focused coping strategies (e.g.,  
21 restructuring) which managed their anxiety, and reframed their self-presentational concerns to  
22 act as motivational triggers. Therefore, it may not be self-presentation motives *per se* which  
23 encourages choking in sport, but the athlete's management of the anxiety elicited from  
24 concerns they may not reach their self-presentation goal.

25 Recently, a more detailed understanding of self-presentation has been gained through a  
26 proposed 2 × 2 framework (Howle, et al., 2015) which aligns self-presentation motives to the

1 approach/avoidance and agency/communion theoretical paradigms. The approach/avoidance  
2 constructs are central motivational drives within achievement motivation (cf. Elliot &  
3 Church, 1997), with an approach-motive orientating individuals toward positive stimuli  
4 (acquisitive), and an avoidance-motive driving individuals away from negative stimuli  
5 (protective). Conversely, the agency/communion aspect of the framework has emerged from  
6 the interpersonal behavior literature (e.g., Paulhus & Trapnell, 2008), whereby agency is a  
7 concern with task-related achievement or mastery, while communion is a focus on  
8 interpersonal relationships. Thus, the  $2 \times 2$  self-presentation framework consists of: i)  
9 *acquisitive-agentic* (i.e., a desire to gain social approval from others in terms of physical and  
10 task ability); ii) *acquisitive-communal* (i.e., a desire to gain social approval from others in  
11 terms of interpersonal qualities); iii) *protective-agentic* (i.e., a desire to avoid social  
12 disapproval from others in terms of physical qualities and task ability), and *protective-*  
13 *communal* (i.e., a desire to avoid social disapproval from others in terms of their perceptions  
14 of one's interpersonal qualities) motives.

15 To date, few studies have adopted this framework to explore the impact of self-  
16 presentation motives on cognitions, emotions, and behaviors, and what does exist has focused  
17 on the physical activity and exercise setting. This research has found however, that  
18 acquisitive-agentic motives are often associated with task involvement, effort, persistence,  
19 task-efficacy and enhanced task performance, while protective-agency motives are more  
20 likely to lead to avoidance behaviors and a focus on failure (Howle, Dimmock, & Jackson,  
21 2016; Howle et al., 2015). In the one study that has applied this framework to the sporting  
22 context (i.e., basketball), Howle, Jackson and Dimmock (2016) found that acquisitive motives  
23 (i.e., agency and communal) led athletes to behave in a manner that was viewed positively by  
24 an audience. This ensured that the athlete's self-presentation motives (i.e., creating a positive  
25 impression) were achieved. Conversely, those athletes with protective-communal motives,  
26 demonstrated behaviors that were largely evaluated negatively by observers, and so were

1 evidently self-defeating. As the 2 x 2 framework appears to have theoretical appeal, it would  
2 be advantageous to build on this research and adopt the framework to examine the impact of  
3 self-presentation on athletic outcomes, including choking.

4 Hence, the current study aimed to examine the lived-experience of choking in sport,  
5 through which the perceived role of self-presentation could be considered. By doing so, the  
6 study also provided an initial exploration of whether the 2 x 2 framework of self-presentation  
7 (Howle, et al., 2015) could be used to further our understanding of acute sporting failure  
8 under pressurized conditions. As the study was exploratory in nature, and the choking  
9 phenomenon is complex and conceptually under-developed (see Mesagno et al., 2015), an  
10 empirical phenomenological methodology was adopted. This approach provided the  
11 opportunity to “uncover” athletes’ self-presentation motives during their choking episodes,  
12 while identifying any contextual influences on those motives.

## 13 **Method**

### 14 **Participants**

15 Nine elite athletes (i.e., international and professional level) from both individual and  
16 team sports, were recruited for the study. With reference to the work of Swann, Moran and  
17 Piggott (2015), all participants were “successful-elite athletes” (pg. 11). That is, they had  
18 competed at the highest level of their sport and experienced some success (albeit infrequent)  
19 at that level. The sample consisted of three female athletes from: rugby union ( $n = 1$ ), golf ( $n$   
20  $= 1$ ) and netball ( $n = 1$ ). Alongside six male athletes from: golf ( $n = 1$ ), tennis ( $n = 1$ ), rugby  
21 union ( $n = 1$ ) and cricket ( $n = 3$ ). All were from within the South, and South West regions of  
22 the United Kingdom. The ages of the participants ranged from 19 to 36 ( $Mage = 27.14$ ;  $SD =$   
23  $5.27$ ), and they were purposefully selected for the study based on their admission they had  
24 experienced both choking and clutch performances under pressure (see procedure). Therefore,  
25 all participants were well-placed to identify the perceived cognitions, emotions, and behaviors

1 associated with their choke events, and reflect upon the role of self-presentation within that  
2 experience.

### 3 **Procedure**

4       Once institutional ethical approval had been gained, the research team contacted a  
5 number of elite level athletes (i.e., athletes performing at the highest level of their sport)  
6 through personal/professional networks. Additional elite athletes were then approached via  
7 snowball sampling (Vogt, 1999). The purpose of the study was explained to the athletes (via  
8 email), and they were invited to take part in the study if they had experienced (and were  
9 willing to discuss) instances where they believed they had “choked” under pressure, *and*  
10 occasions where they had experienced excellent (i.e., clutch) pressurized performance. Due to  
11 the opposing definitions of choking in the extant literature, and the phenomenological nature  
12 of this study, participants were recruited to the study if they had experienced events which  
13 *they* labelled as choking. At the start of the interview, participants were asked to consider  
14 whether those experiences did/did not align to the contemporary definition of choking (i.e., a  
15 significant decline in performance when exposed to pressure; Mesagno & Hill, 2013). In all  
16 cases, alignment was confirmed. As there is limited concern regarding the definition of clutch  
17 performances, they were defined (at the start of the recruitment process) as a superior  
18 performance under pressure (Otten, 2009).

19       It was stressed that to take part in the study, both the choking and clutch episodes must  
20 have occurred during the previous two years (choke: >2 times in 2 years; clutch: >4 times in 2  
21 years) to enhance recall. While understanding/exploring the clutch performance was not an  
22 aim of the study, it was deemed necessary to compare the choking experience with its  
23 opposite case (i.e., the clutch). This approach has been adopted within previous qualitative  
24 choking research (e.g., Hill et al., 2010b), for it isolates and contextualizes the factors  
25 perceived relevant to the choking experience (only). Furthermore, this comparative process



1 enabled the development of information that can be used by applied practitioners to alleviate  
2 the choke and encourage clutch performance.

3 Recruited participants were invited to complete a face-to-face interview, and sent a  
4 preparation booklet to complete beforehand. The booklet contained questions which  
5 encouraged reflection on their most recent and/or memorable experiences of the choke and  
6 clutch performance (e.g., when did the choke/clutch occur; what were you thinking/feeling  
7 before, during and after the choke/clutch). This process aimed to stimulate the recall of events  
8 which were then explored in further detail during the interview. The booklet is available on  
9 request from the first author.

### 10 **Data Collection**

11 The study adopted an empirical phenomenological methodology (see Allen-Collinson  
12 2016), which is concerned with generating a rich, analytical account of a lived experience  
13 (Nesti, 2004). The approach enables a detailed understanding of the phenomenon, for it  
14 requires researchers to suspend, and then challenge, “taken-for granted” assumptions about  
15 the experience (Husserl, 1989). Phenomenology aims to describe an experience as it appears  
16 to the individual, and elucidate a new and unanticipated understanding of that phenomenon.  
17 Hence, empirical phenomenological afforded the opportunity to bring further conceptual  
18 clarity to the construct of choking in sport.

19 Once written informed consent was gained, participants’ experiences of choking and  
20 clutch performance were explored through an individual phenomenological interview - a  
21 powerful technique for obtaining a comprehensive understanding of the participants’  
22 lifeworld (Nesti, 2004). While the interview schedule was designed to explore the  
23 participants’ perceived cognitions, emotions, and behaviors before, during and after their  
24 choke/clutch performances, the interview delivery was relatively unstructured to encourage a  
25 naturalistic flow of conversation, and thereby align with phenomenological principles. Probes  
26 were used intermittently (i.e., “Can you tell me a little more about that?” and “Can you offer

1 an example?” “How exactly did that affect your performance?”) to ensure that a deep  
2 understanding of the participants’ experiences was gained. Each interview was conducted in  
3 person by the lead or second author, digitally recorded, transcribed verbatim, and lasted  
4 between 60 and 80 minutes ( $M = 70.88$ ;  $SD = 6.75$ ). Due to the lack of availability/access, a  
5 follow up interview with the participants was not possible. However, through the adoption of  
6 phenomenological interviews, it was evident that code saturation was reached (i.e., no new  
7 codes/themes/key issues emerged from the last 2 interviews), and meaning saturation (i.e., a  
8 full understanding of the issues gained) was *sufficiently* achieved for a study of this  
9 exploratory nature (see Hennink, Kaiser, & Marconi, 2017).

## 10 **Data Analysis**

11 Following Schmicking’s (2010) guidelines, and in-keeping with a number of studies  
12 within the sport and exercise psychology literature which have utilized a phenomenological  
13 methodology (e.g., Crust, Swann, Allen-Collinson, Breckon, & Weinberg, 2014; Swann,  
14 Crust & Allen-Collinson, 2016), data were analyzed through a number of phases. Firstly,  
15 phenomenological reduction (epoché) was adopted, where commonplace explanations for the  
16 choking phenomenon, and any pre-conceptions of the experience were (as much as possible)  
17 suspended by the research team. Thereafter, an explorative phase was conducted that involved  
18 reading the transcripts a number of times in order to gain immersion in the data. Initial notes  
19 were added to the transcripts which included any key words and concepts that were  
20 considered to reflect the essence of the participants’ choking/clutch experience. Such notes  
21 were returned to throughout the analysis, in order to check the themes, meaning units, and  
22 dimensions constructed during the latter phases of analysis.

23 The next phase involved identifying codes (e.g., concepts/points of note) in the data,  
24 followed by grouping common codes into themes. To ensure the themes contained relevant  
25 codes, they were constantly compared, re-visited throughout the analysis process, and  
26 evaluated alongside the initial notes made on the transcripts. Thereafter, themes were

1 transformed into meaning units, to provide a coherent description of the phenomenon. Those  
2 meaning units were read critically to establish how each unit differed, and confirm they  
3 provided a representation of the participants' choking/clutch experience. Finally, the  
4 descriptive meaning units were analyzed to construct their psychological meaning, and where  
5 appropriate, clustered further into dimensions to illustrate common/opposing features of the  
6 choking/clutch episodes across the sample. While predominantly inductive, this process of  
7 analysis included deductive aspects as data were also examined through the lens of the 2 x 2  
8 self-presentational framework. Moreover, rather than fixed and sequential, such phases of  
9 data analysis were completed iteratively (see Schmicking, 2010) and independently by the  
10 first and second author.

### 11 **Trustworthiness of the Data and Findings**

12 Through the adoption of a relativist approach, and the rejection of universal criteria (see  
13 Burke, 2016; Smith & McGannon, 2017), the research team sought to construct a robust and  
14 authentic account of choking in sport through criteria relevant for the context/aim of this  
15 study. Thus, 'rigor' was achieved through strategies which maintained allegiance to the  
16 phenomenon under study (Levitt, Morrow, Wertz, Motulsky, & Ponterotto, 2016). Firstly,  
17 phenomenological interviews were completed with information-rich participants, which  
18 offered detailed descriptions and meaningful insights into the choking experience. This  
19 process was supported by exploring the opposite case (clutch performance), and facilitating  
20 the identification of characteristics associated with choking (only). In addition, the third  
21 member of the research team (who was not involved in data collection/analysis) acted as a  
22 critical friend throughout the study. As this individual was aware of the research aims, though  
23 not directly involved in the data collection/analysis, they were able to act as a dispassionate  
24 "sounding board", where they were able to question and challenge the first and second  
25 author's analytical decisions and interpretation/explanation of the data (see Smith &  
26 McGannon, 2017). This process encouraged reflexivity, epoché, and transparency of research

1 decisions (Tufford & Newman, 2010), while also enabling the first and second authors to co-  
2 construct the themes, dimensions, and descriptive narrative. Moreover, through an evocative  
3 representation of the data, a coherent and meaningful reflection of the choking phenomenon  
4 has been offered, which contributes to the empirical literature, and offers resonance (see  
5 Tracy, 2010) for applied practitioners working with athletes vulnerable to choking.

## 6 **Results**

7 To present a holistic and authentic representation of the choking phenomenon, and  
8 address the research aims, the findings are presented in three sections: i) the psychological  
9 factors perceived to precede the choke (i.e., the process of choking); ii) the psychological  
10 factors associated with the choke (i.e., during the acute performance failure event); and iii)  
11 the perceived consequences of the choking experience (i.e., post-choke). The specific  
12 role/influence of self-presentation will be reported within each section. To highlight/reinforce  
13 factors specifically relevant to the choking process and the choke event, comparison with the  
14 clutch experience will occur where appropriate.

### 15 **Preceding the Choke**

16 Unsurprisingly, very high levels of *perceived pressure* were noted by all participants  
17 prior to the choke. It tended to be caused by their desire to perform well during an event of  
18 importance, including those where the rewards were considerable (i.e., financial, selection for  
19 teams, and high prestige), and/or when the performance expectations (from self and others)  
20 were extremely high. As an example, Sophie [rugby union] explained her choking episode  
21 occurred while competing in a prestigious tournament (i.e., World Cup) on home soil, “It was  
22 extra pressure [because] it was the biggest tournament...and at home. All the fans wanted to  
23 see us win...I wanted to play well for the fans, and we were expected to do well...It all  
24 became too much for me.” However, high levels of perceived pressure also preceded  
25 participants’ clutch performances, and so the nature/source of that pressure (i.e., stressor

1 properties) and the psychological response/appraisal of that pressure is likely to have  
2 determined the performance outcome.

3 Participants also revealed *low expectations* prior to the choke, as they doubted their  
4 ability to reach their achievement goals (i.e., winning/team selection). For the most part, this  
5 was attributed to a recent slump in form, poor preparation, injury, and in particular, low self-  
6 confidence. As explained by Richard [cricket]: “Because of this bad run of form I had been  
7 on, I felt terrible in myself. I knew I would fail, and so I did.” In contrast, all participants  
8 noted high expectations prior to excelling under pressure, which was the result of high-quality  
9 preparation and recent successful performances. When recalling a clutch performance, Stuart  
10 [cricket] explained, “I had come off a good run of scores and felt in good touch...I knew I  
11 would play well. So, I just went in and played positively.” All participants also reported that  
12 the uncertainty associated with managing the demands of an *unfamiliar* situation, often  
13 preceded a choke. Sophie [rugby union] described this finding further:

14 I remember waking up in the morning having no idea how to treat this game...I was  
15 thinking it is not just a World Cup game, it’s a final, which I had never experienced  
16 before...I had this internal battle with myself about how I was going to manage it all  
17 before I even got to the ground...It was this unknown that I couldn’t handle and it led to  
18 my worst performance ever, at the absolute wrong time.

19 Of interest, when recalling clutch performances, participants indicated the use of ‘proactive’  
20 coping strategies, (e.g., researching the course/team/opponents), to minimize the likelihood of  
21 unfamiliar situations arising. As an example, Hannah [golf] offered the following summary:

22 I completed the practice round to familiarize myself with the layout of the course...and  
23 then created in my mind potential scenarios that may crop up during the [competitive]  
24 round...I had a clear game plan in my head of how I wanted to play the round, but I was  
25 also prepared if it went wrong. Nothing unexpected could then happen, and faze me.

1 With regards to *self-presentation*, the data revealed participants experienced acquisitive-  
2 agentic *and* protective-agentic self-presentation motives before each of their choke events.  
3 Thus, they appeared intent on demonstrating their competence/ability to others in order to  
4 receive praise, admiration, and/or selection for a team (i.e., acquisitive-agentic), though also  
5 wanted to avoid exhibiting athletic incompetence and thereby receive negative judgement  
6 (i.e., protective-agentic). Stuart [cricket] summarized this finding by recalling, “I mainly  
7 wanted to impress, but I also didn’t want to look shit and get stick [criticism].” Ben [rugby  
8 union] also offered a summary of his acquisitive- and protective agentic motives prior to  
9 taking a conversion (kick) that would win the game (if successful):

10 I was thinking, ‘if I get this kick I could win the game for the team. Then I’ll get all the  
11 glory and my coach, team mates and parents will be proud’...He’d [the coach] left me  
12 out [of the team] a few times during the season, and it made me really angry. He’d given  
13 me this run in the team through the quarters, semi’s and then final. So, I didn’t want to  
14 appear nervous or out of my depth. I didn’t want to give the coach reason to regret his  
15 decision.

16 Importantly, data revealed that regardless of whether an acquisitive- or protective-agentic  
17 motive was held, the participants began to experience lowered self-presentation efficacy as  
18 the “critical moment” approached. That is, they were unsure whether they would reach their  
19 self-presentation goal(s), and experienced self-presentation concerns and raised levels of  
20 anxiety as a result. For example, Rachel [netball] reported:

21 My head coach and selectors were watching, so I went into the game wanting to  
22 impress...I was desperate to get in the World Cup squad. But, once the game began, I  
23 began doubting myself. Worried I wouldn’t play well and they [selectors] wouldn’t think  
24 I was good enough to get in the team. My nerves went sky high.

25 Similarly, Richard [cricket] described how his concerns regarding a protective-agentic goal  
26 influenced his anxiety levels prior to a choke:

1 I was sick of being criticized because of my recent bad run of form...So I went into the  
2 game basically trying to show them I was not rubbish. But my confidence was shot [low]  
3 and when I got out there, I wasn't sure I could play well enough to prove them wrong. I  
4 then experienced this fear...

5 Of interest, participants identified they held acquisitive-agentic motives prior to their clutch  
6 performances, and were confident of achieving this self-presentation goal. Indeed, such  
7 motives/goals often acted as a motivational trigger. Stuart [cricket] suggested:

8 Prior to the [clutch] game, I knew I was being judged by fellow players and watched by  
9 people...I wanted to impress so they saw me as a good player - and I knew...I had a  
10 good chance. So, I was sharper during the warm-up to make sure I was in my best shape  
11 before the game.

12 Richard, [cricket] added, "I wanted to show I deserved to be playing...I believed that I  
13 deserved a new contract. This made me work hard in training to prove myself, and made me  
14 really focus before and during the game."

### 15 **During the Choke**

16 High levels of *debilitative anxiety* were experienced by all participants during the choke,  
17 which consisted of cognitive and somatic symptoms (e.g., self-doubt, fear of failure / re-  
18 injury, tension and shaking). Stuart [cricket] explained:

19 It was my first time playing for XXXX [international team], and I was very, very  
20 nervous. It was a big occasion and because of the nerves I was worrying about what shots  
21 to play. The doubt stayed with me and I kept playing terrible shots that soon got me out.

22 Moreover, Carl [tennis] provided a vivid account of how debilitating anxiety affected him and  
23 his performance during the choke:

24 This anxiety comes up to you, and hugs the shit out of you...It doesn't let you move,  
25 doesn't let you blink. It over-powers everything and destroys any confidence you've  
26 built...Because it's so strong and it's got you so deep, it is the only thing you are thinking.

1 My arm tightens, as though someone had shocked me...Like somebody has put my arm  
2 in a cast...and I'm glued to the ground....

3 While the participants suggested they also experienced anxiety during their clutch  
4 performance, they indicated it was less intense, and perceived as facilitative. This shift  
5 towards a positive appraisal of anxiety often appeared dependent on the participants' level of  
6 self-confidence. As explained by Sophie [rugby union]:

7 [During the choke] I was very nervous and edgy...I felt everything was forced, and I was  
8 making loads of mistakes. I just wanted to get away from the game as there was nothing I  
9 could do about it...During the [clutch rugby] game, I had nerves, but the difference was I  
10 was very confident, so I saw any nerves as positive energy. That made me focus on the  
11 task, and on beating XXXX [the opposition].

12 All participants acknowledged they had a lack of *perceived control* over their emotions  
13 and/or performance during a choke. Hannah [golf], explained:

14 I hit a bad shot on the 7<sup>th</sup> and it put me out of my comfort zone. I suddenly felt I was not  
15 in control of myself or game, and I began rushing. The shots went from bad to  
16 worse...and I choked and felt that I couldn't recover. Choking to me, is basically me  
17 escalating out of control.

18 Carl [tennis] offered a comparison of how his perceived sense of control differed between a  
19 choke and clutch performances:

20 [During the clutch] I'm am in so much control that everything is like water. I feel  
21 formless. I feel like I can mold myself around the ball however I want. I feel as though I  
22 can create any opportunity that I want from that position. But the choke...you  
23 feel...helpless. You don't have any control anymore because you have shut down.

24 Furthermore, *distraction* was considered by all participants to act as a key factor during  
25 the choke. For the most part, they suggested their focus was directed towards their anxiety,  
26 the likely outcomes/consequence of the performance (i.e., winning or losing), self-



1 presentation motives, and the fear of re-injury. Ben [rugby union] described how he became  
2 distracted by thoughts of success and self-presentation motives when he choked during a  
3 highly-pressurized penalty kick:

4 I remember going through my usual [pre-performance] routine but I didn't have a clear  
5 thought process. I was almost doing it for show. I was aware and thinking about the fact  
6 that I was exaggerating everything to show to others that I was not nervous, even though  
7 I was bricking myself...I didn't focus on my kicking spot on the ball. I was thinking, 'get  
8 this kick over and I will be the hero'. I wanted to see that ball go over, so I looked up. It  
9 caused me to shank the ball along the ground. And that was that.

10 Similarly, Rachel [netball] emphasized how her fear of re-injury had interrupted her usual  
11 game-focus during a choke, "It [focus] was on my injury. I was thinking about how anxious I  
12 was and making sure I didn't re-injure myself. I couldn't think about the game...So I was  
13 missing catches and simple passes and not defending well." In contrast, during their clutch  
14 performances, participants identified they were able to remain focused on the task through the  
15 use of strategies including process goal setting, performance routines, and cue words/triggers.  
16 Sophie [rugby union] offered an example of this finding:

17 When I played really well I implemented a successful game plan, by setting three or four  
18 goals where I focused on certain technical and tactical information. This removed the  
19 emotional factor and made me stay more focused [on the task]...Took the pressure  
20 off...and I performed the best I ever had with a clear mind.

21 However, such strategies were less evident during the choke. As an example, Daniel [cricket]  
22 stated, "I didn't go out there with a game plan...my mind felt cluttered. I was so focused on  
23 the fact we were losing, that I forgot to focus on how we could win...It effected my decisions  
24 and I screwed up."

25 In terms of *self-presentation*, eight of the nine participants indicated they *normally* held  
26 protective-agentic motives during the choke. As an example, Daniel [cricket] recalled: "I

1 knew he [the coach] didn't think I was as good as the other players...and didn't think much of  
2 my ability. Throughout [the choke], I just focused on avoiding looking as bad as he thought I  
3 was." Similarly, Hannah [golf] stated, "I remember thinking over that shot [choke], 'don't  
4 shank' 'don't shank' [a very bad shot]... 'just don't embarrass yourself and look like an idiot  
5 in front of everyone.'" Ben [rugby union] also identified protective-agentic motives during a  
6 choke:

7 I was nervously fiddling with the [rugby] ball to set it up for the kick. I was taking so  
8 long to get it on the tee right. I stepped back, but it wasn't right. I should have gone back  
9 to correct it, but I didn't want to come across as nervous, and not in control of the  
10 situation. As I was taking so long, I was conscious that people would be thinking, 'what  
11 is he doing'. I was thinking 'god I am looking stupid here, just get it over.'"

12 Critically, the eight participants confirmed that because they were uncertain of achieving their  
13 self-presentational goal (i.e., protective-agentic) they experienced concern/anxiety, and then  
14 avoidance behaviors, which were both associated with the choke. Hannah [golf] explained:

15 [During the choke] I was spending so much energy worrying. I was worried about what  
16 they [crowd/selectors] were thinking. Worried I would embarrass myself. I rushed the  
17 shot as I wanted to get away from that situation because I was over the ball, knowing I  
18 wouldn't hit it well, and thinking they would think I was rubbish.

19 The data also revealed that during their clutch performances the (same) eight participants  
20 tended to hold acquisitive-agentic motives, that they were confident in achieving. For  
21 example, Joe [golf] recalled:

22 Normally, I want to, and quite enjoy, trying to impress people. On this occasion [clutch],  
23 I saw that more and more people were coming over to watch me play...I believed I could  
24 impress them, and so one of the reasons I exceeded my expectation on that occasion, was  
25 because I had the confidence to just carry on playing well and impress them all.

1 While Carl [tennis] indicated self-presentation motives during the choking process (before the  
2 acute performance failure), he reflected that each choke (and there were several) did not  
3 contain any cognitions, emotions and behavior related to self-presentation/impression  
4 management. After exploring this finding in depth with Carl, he concluded:

5 The choke itself is about me. At that point, I don't care about others, or what they are  
6 thinking about me. I care about what I'm thinking about me. What I am going through. It  
7 [the choke] is all about me. Focusing on me, and my expectations of myself. It's all in  
8 my head as I am just fighting myself.

### 9 **After the Choke**

10 The choke was perceived as a *significant drop* in performance, “absolutely rubbish” and  
11 “a complete disaster.” When describing their choking experiences, two of the participants  
12 identified that they perceived that the choke differed from other under-performances. When  
13 asked to explain this point further, Carl [tennis] identified:

14 There is an astronomical difference between my choke and an under-performance. For an  
15 under-performance, I feel uncomfortable from the start. I don't feel right. But I will go  
16 back to the basics...make the opponent play...try different things...focus on what I do  
17 best. I think of it as a problem-solving situation. Its poor tennis, but I try to find a way  
18 through, and may even win. A choke is when I feel this intense pressure...zooming down  
19 on me...on my weakness. And I have so much negative emotions that they cause  
20 everything to shut down. For that instant, every thought of anything positive cannot get  
21 through that barrier. My mind won't allow it. I can't handle that moment. It breaks me.

22 Similarly, Hannah [golf] explained that, “the choke is the most destructive shot I’ve ever  
23 played...it’s definitely a different feeling to a bad shot. I can park the bad shot and move on. I  
24 can’t do that after [a choke], as it’s so damaging to my confidence.”

25 All participants experienced *negative affect* after the choke, including “disappointment,”  
26 “devastation,” and “anger.” For some participants, such emotions dissipated over a short

1 period, and informed a positive learning experience. As describe by Richard [cricket], “I was  
2 devastated [after the choke] but I use it for motivation and training...If I ever get into that  
3 [pressure] situation again, I know that’s not how to deal with it. I can make sure it won’t  
4 happen again.” However, for five participants, the negative affect influenced their behavior in  
5 the longer term. For example, it caused Stuart, Hannah, Joe, Ben and Carl to experience a  
6 temporary loss of motivation towards their sport, a decline in their career standings, and in  
7 one case [Stuart] a withdrawal from the game (NB. he returned to play cricket at a lower  
8 level). Stuart explained:

9 It [the choke] was a complete disaster to be honest...they kept playing me but that didn’t  
10 give me time to mentally recover, so my career fell off a cliff...I hated cricket...I just  
11 gave up in the end. I wallowed in my own self-pity for about a year.

12 Finally, all participants identified they experienced *self-presentational concerns* after a  
13 choke, for they became highly anxious about receiving negative evaluation from significant  
14 others. Hannah [golf], recalled:

15 When I choked, I was worried about what certain people thought and didn’t want to be  
16 judged negatively especially by my sponsors...I was so embarrassed by what happened  
17 and worried what my coach would say...I actually called my coach to explain...and  
18 wrote a blog to help others understand why what happened, happened.

19 Such self-presentational concerns also detrimentally affected Hannah’s attitude towards her  
20 golf “Because it was so embarrassing, I did not want to go near my [golf] clubs...I needed  
21 repair time. I needed to be away from that environment where I thought people were  
22 negatively judging me.”

23 Interestingly, by choking under pressure and failing to provide a desired impression, a  
24 number of participants noted their future self-presentation motives were affected. Richard  
25 [cricket], elaborated this point:



1 participants' reported avoidance behaviors (e.g., rushing; Lochbaum & Gottardy, 2015),  
2 which in turn was likely to have increased their vulnerability to choke under pressure (Hill &  
3 Hemmings, 2015; Jordet & Hartman, 2008; Jordet, 2009). Therefore, this exploratory study  
4 builds on the work of Howle and colleagues (Howle, Dimmock et al., 2016; Howle, Jackson  
5 et al., 2016; Howle et al., 2015) who also found that within the physical activity/exercise  
6 setting, protective-agentic self-presentation motives can lead to negative behaviors and  
7 adverse performance outcomes.

8 Another important finding regarding self-presentation motives, was the low self-  
9 presentation efficacy experienced by the participants prior to, and during the choke. Thus, the  
10 uncertainty of achieving their motive to avoid negative judgment/evaluation from others  
11 contributed to the participants' raised anxiety levels (Leary, & Kowalski, 1990) and elicited  
12 their choking episodes (Mesagno et al., 2011). Therefore, the current study indicates that the  
13 2 x 2 self-presentation framework can provide a useful lens to examine the choking  
14 experience, for protective-agentic self-presentation motives were frequently associated with  
15 choking in sport, with acquisitive-agentic self-presentation motives normally accompanying  
16 clutch performances. Furthermore, a lack of self-presentation efficacy (regarding protective-  
17 agentic motives) provided a meaningful contribution to the high levels of anxiety that  
18 encouraged choking under pressure.

19 Of course, it is necessary to note that firstly, one participant failed to identify any self-  
20 presentation motives/concerns during his choking events. Secondly, there were other reported  
21 factors that would have contributed to the high level of anxiety experienced (i.e.,  
22 unfamiliarity/low achievement expectations; Cerin, Szabo, Hunt, & Williams, 2000) and  
23 promote the debilitating appraisal of that anxiety (i.e., low self-confidence). Thirdly, very low  
24 levels of perceived control were revealed as a key aspect of the choking process/event, which  
25 was unrelated to self-presentation. Indeed, the psychological construct of perceived control  
26 continues to be identified in choking research as an important and discrete component of the

1 experience (Mesagno et al., 2015). Finally, while agentic self-presentation motives were  
2 evident throughout the participants' narrative, communal motives were not apparent.  
3 Although this finding differs to that of Howle, Jackson et al. (2016), it should be noted that  
4 within their quantitative study, participants were undergraduate students who had yet to form  
5 social bonds (they had only met as a class twice), and were novice/intermediate performers of  
6 the chosen task (basketball). In this context, it unsurprising that the communal motives  
7 measured in their study (i.e., being seen as likeable, supportive and empathetic) were  
8 important to the participants, though this is less likely to be the case for the elite athletes  
9 interviewed within the current study. Thus, it remains necessary to examine further, the role  
10 of communal self-presentation motives within the elite sport setting. Accordingly, although it  
11 evidently holds promise, further research is required to establish the extent to which the 2 x 2  
12 self-presentation framework could provide a comprehensive account of all choking episodes.

13 While not the main aim of the study, it was also ascertained that in accordance with  
14 previous qualitative research (Hill et al., 2010a; Hill & Shaw, 2013), participants indicated  
15 their choking episodes occurred through distraction, rather than self-focus – with the  
16 dominant source of distraction being self-doubts/concerns regarding whether self-presentation  
17 motives and achievement goals would be attained. Therefore, it remains uncertain whether  
18 individuals are unable to identify and recall the complex attentional disruptions associated  
19 with self-focus (Beilock, Wierenga, & Carr, 2003), or whether athletes vulnerable to choking  
20 are more likely to become distracted when exposed to “real-world” levels of pressure (see  
21 Oudejans, Kuijpers, Kooijman, & Bakker, 2011). After all, much of the empirical support for  
22 the self-focus theories has emerged from experimental research which manipulated the self-  
23 focus condition and/or failed to expose athletes to very high levels of pressure (see Hill et al.,  
24 2010a for a review).

25 In addition, this study offers tentative support for the claim by Mesagno and Hill (2013),  
26 that choking *may* differ from an under-performance in terms of underpinning cognitions,

1 emotions and outcomes. While such differences were identified through interpretative  
2 research methods (in this, and previous studies), researchers should acknowledge the  
3 phenomenon labelled by athletes as ‘choking’ is often *experienced* and described as distinct  
4 from other performance failures.

5 Finally, it also important to reflect on the short and long-term effects of choking on the  
6 participants within this study. For some, the choking experience was used to inform and  
7 improve future performances (Gucciardi et al., 2010). However, for most, the impact was  
8 detrimental and led to lowered motivation and even withdrawal from the sport. In addition,  
9 self-presentation motives became increasingly protective (i.e., protective-agentic) following  
10 the choke, which paradoxically could increase the likelihood of future performance failures.  
11 Consequently, the athletes’ response to choking deserves further research attention, in order  
12 to establish how athletes can use the event as a constructive, rather than destructive  
13 experience.

#### 14 **Conclusion, Applied Implications and Future Research Directions**

15 Overall, the 2 x 2 framework of self-presentation (Howle et al., 2015) appears to provide  
16 an appropriate lens to examine the choking phenomenon, for self-presentational motives and  
17 self-presentation efficacy are evidently involved in eliciting anxiety, distraction, and choking.  
18 Thus, the study is the first to indicate that athletes should avoid protective-agentic self-  
19 presentation motives and adopt acquisitive-agentic motives during pressurized sporting  
20 performance. This will in turn, alleviate choking and increase the opportunity for clutch  
21 performance. It has been established that low levels of expectancy can trigger  
22 avoidance/protective goal involvement (Elliot, 1999), especially if the individual is concerned  
23 their behavior may elicit negative evaluation from others that would affect detrimentally their  
24 self-worth (Morris & Kavussanu, 2008). Therefore, practitioners should aim to increase  
25 athletes’ goal expectancies through the construction of a motivational climate that promotes  
26 approach-mastery goals (i.e., process/self-development goals; Morris & Kavussanu, 2009),



1 and through the use of strategies such as rational emotional behavior therapy (REBT; Turner  
2 & Barker, 2014), which contest the underlying beliefs that have led to the low expectations  
3 and protective-agentic motives.

4       However, by exploring choking and clutch experiences holistically, this study has  
5 revealed that self-presentation may not provide a complete explanation for the phenomenon,  
6 and other determining factors must be considered alongside the construct. Of importance is  
7 self-confidence and perceived control, which were both ubiquitous characteristics of the  
8 participants' choking narrative. Low self-confidence was related to the raised levels of  
9 debilitating anxiety associated with the choking process, whereby a lack of perceived control  
10 over themselves, their performance and anxiety, was a prominent feature of the choke itself.  
11 Therefore, strategies which address self-confidence and perceived control (e.g., pre-  
12 performance routine, process/holistic goals, cognitive restructuring, reflection; see Hill,  
13 Hanton, Matthews, & Fleming, 2011) should be utilized by athletes who are vulnerable to  
14 choking when they perform under pressure.

15       In terms of future research, it would be beneficial to build on the current exploratory  
16 study and establish in more detail, the interactive effects of self-presentation motives, self-  
17 presentation efficacy, anxiety and distraction during episodes of choking. However, such  
18 work should consider the limitations present within the current study, with the most pertinent  
19 being the reliance on participant recall of choking/clutch events. It is accepted that the  
20 participants were vulnerable to recall bias, and may not have been able to recognize or  
21 articulate complex cognitions and emotions (see Beilock et al., 2003). Though, it should also  
22 be recognized that the memory of important events remains largely intact (Gould, Eklund, &  
23 Jackson, 1993) and this information-rich sample did provide a persuasive pattern of  
24 cognitions/behaviors that occurred before, during, and after their choking episodes.  
25 Nevertheless, it would be of benefit for researchers to collect data much closer to the time of  
26 the event (e.g., think aloud, Eccles & Aarsal, 2017; electronic diaries, Jamison, et al., 2001) or

1 at the very least, utilize simulated recall (e.g., Neil, Wilson, Mellalieu, Hanton, & Taylor,  
2 2012).

3 It is also likely to be of value for future research to examine the role of self-presentation  
4 motives within the choking in sport process, alongside the athlete's achievement goals.  
5 Vansteenkiste, Lens, Elliot, Soenens and Mouratidis (2014) have recently provided a  
6 compelling argument that in order to explain fully an individuals' functioning in an  
7 achievement environment, it is necessary to consider their achievement/competence-based  
8 goal (i.e., the what/direction of behavior) alongside the motive for that goal (i.e., the  
9 why/reason for that behavior). This is due to the mounting evidence that behavioral and  
10 performance outcomes can be predicted with greater accuracy if both the achievement goals  
11 and motives underlying those goals are examined concurrently. Thus, researchers should  
12 consider whether the athlete's self-presentation motives can determine their likelihood of  
13 choking in sport, when analyzed alongside their achievement/competency based goals.

14 Thus, through the holistic examination of the choking experience, the results of this  
15 exploratory study have provided further support for the important role of self-presentation  
16 within acute performance failure. The study is also the first to identify the potential of  
17 utilizing the 2 x 2 self-presentation framework to examine choking in sport further. Finally,  
18 through the findings of the study, we have endeavored to identify the necessary and  
19 appropriate direction of travel for future researchers wishing to develop conceptually the  
20 choking in sport phenomenon.

21

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