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The Lived Experience of Physical Awkwardness: A Retrospective View

by

David Arnold Fitzpatrick

A thesis submitted to the Faculty of Graduate Studies and Research in partial fulfillment of the requirements for the degree of Doctor of Philosophy

Department of Physical Education and Recreation

Edmonton, Alberta

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Abstract

This study was done to gain insight into the experiences of those who have lived physical awkwardness in their past participation in physical activity. Twelve adults were engaged in conversations from a retrospective view, relating personal accounts of childhood reminiscences of physical awkwardness.

A hermeneutic phenomenological approach of description and interpretation was employed to uncover feelings and meanings associated with physical awkwardness. Findings are discussed in the context of relevant literature to assess how awkwardness, as described in aggregate studies, resonates with individuals.

The nature of the experience of physical awkwardness is captured in four essential themes, namely, publicly "failing and falling" while performing a motor task, resulting in "hurt and humiliation," accompanied by "worrying and wondering," and subsequent attempts at "avoiding awkwardness" in situations where it might be further revealed. Interacting in active games settings is difficult for the physically awkward performer. The individual feels alone within the group, reluctant to display ineptness.

Wall's (1982) Syndrome of Physical Awkwardness provided a framework to discuss the themes of physical awkwardness. Participants gave an insiders' view of the Syndrome, not actually a test of it, but a subjective perspective to it. What emerged was not so much a syndrome, but a highly variable scenario of feelings and behaviours. The intensity of feelings associated with awkwardness and the inability to easily withdraw from physical activity are not predicted in the Syndrome, nor are social isolation or aggression, which are predicted, but are not apparent in the participants' accounts.

With respect to the Knowledge-Based Approach to Motor Development (Wall et

al., 1985), participants' experiences suggest they had limited access to knowledge about action. They either lacked declarative knowledge (what to do), procedural knowledge (how to do a skill), or both. Low affective knowledge contributed to motor difficulties. In turn, the difficulties had a reciprocal influence on affect.

Teachers and others may underestimate the magnitude of the impact of physical awkwardness. The awkward performer may be reticent to seek instruction. Thus teachers may not recognize awkwardness, so it may go unnoticed.

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CHAPTER ONE

Introducing a Study of the Experience of Physical Awkwardness

"How can you say, 'that's great!' when you know I'm the worst in the class?" (Sande, 1984, p. 7). These were the words of a 9 year-old child in grade 4, in reaction to a teacher's feedback during a physical education class. His self-appraisal, perhaps indicative of motor ineptitude, implies that he was physically awkward, or clumsy. These are terms that define an unexplainable marked impairment in the development of motor skill coordination.

While the 9 year-old's utterance likely reflected his assessment of his motor in-coordination, it does not provide reasons for his poor self-ranking. It is possible that the proclamation of being the worst may have been related to repeated failure in learning sport skills, unsuccessful competition with peers, or negative feedback from himself and others, including the teacher. Nor does the admission describe his feelings associated with the evaluation.

There is no indication that being the worst was perceived neutrally or as a negative experience. One may wonder how he would elaborate on and describe his position of being worst in the class, and how he felt about it. Would he validate current knowledge about physical awkwardness or provide new information about it? How would he have reflected upon his experience then, and how might he reflect on it today, as an adult?

Purpose of the Study

The purpose of this study is to gain insights into the experiences of persons who have felt physically awkward or clumsy in their past involvement in physical activity.

Specifically the central question is: What is the lived experience of individuals who have perceived themselves to be physically awkward, during past participation in active play, physical education, games, and sports? Related questions of interest include: What does it feel like to have experienced physical awkwardness? What is the significance or meaning of physical awkwardness from the physically awkward performer's point of view? How does one cope or not cope with physical awkwardness? Does one accept awkwardness as a facet of his or her personality, and get on with other activities? In brief, what does it mean to have had the lived experience of physical awkwardness?

In attempting to answer the above questions, my intent was: a) to examine physical awkwardness at the person level and to give a voice, and a forum to the person perspective, relative to the experience of physical awkwardness, something not often done in research in the area; b) to come to a better understanding of how individuals who considered themselves physically awkward felt about and dealt with their awkwardness during active play and game situations, within and outside physical education class; c) to determine, through thematic analysis, the essential and incidental nature of physical awkwardness; d) to draw the attention of teachers of physical education, coaches, researchers, and others to the perspective of those who are physically awkward, when teaching, coaching, and otherwise interacting with them; e) to identify actions that might be taken in order to meet the unmet and unstated needs of persons who are experiencing physical awkwardness; and f) to consider further research questions.

Popular Portrayals of Physical Awkwardness

Physical awkwardness has been portrayed frequently in the media, in poems (Corbin, 1969), in song, (Welch, 1986), in children's books (Welch & Simont, 1995), in

cartoons (Shultz, 1994), as well as in movies and in television programs. The motion picture movies "The Sandlot" (de la Torre, 1993) and "The Fisher King" (Hill, 1991) are but two examples that graphically depict awkwardness in sport and activities of daily living. Two salient features of these depictions have been humor at the expense of the person displaying awkwardness and embarrassment. For example, the dramatic actor Peter Ustinov, recognizing that he is not blessed with an athletic physique, compares his body to being forced to select a low-end rent-a-car, something you get stuck with (van Manen & Levering, 1996). Are others as casual or self-deprecating about it?

The Crane brothers, of the television comedy "Frasier" are the targets of many droll comments, often self-expressed, regarding their physical ineptness. For example, on their inability to catch a ball, Niles muses, "the only thing the Crane boys are good at catching are subtle nuances and the occasional virus" (Angell, 2000). Paul, of the television series, "The Wonder Years" is seen trying to survive his terror of physical education class and the frustration of driveway basketball games, as the boy who has launched a million air balls (Marlens & Black, 1988).

Michael Richards, who played Kramer, in the situation comedy, "Seinfeld" (Seinfeld, 1989), is a gangly, accident prone, character who is popular "in spite of a rather odd physicality, or perhaps because of it" (Minkoff, 1997, p. 158). His inept entrances, trips, and falls endear him to many, mainly for the "incredibly well choreographed physical comedy he does" (p. 172).

Physical or slapstick comedic displays of awkwardness are still a feature in some contemporary movies, and are seen on reruns featuring such physical comedians as Charlie Chaplin, Buster Keaton, Harpo Marx, and Red Skelton, among others. More

contemporary entertainers such as Woody Allen, Chevy Chase, and Rowan Atkinson, ("Mr. Bean"), have all portrayed physical awkwardness as part of their writing, directing, and acting. In fiction and in real life, movement competence is valued. Incompetence, on the other hand, is devalued, such that it is a focus of humour in popular culture.

Awkwardness is not only represented in movies and in television programs but also in comics and newspaper cartoons, such as Peanuts (Shultz, 1994), and Calvin and Hobbs (Watterson, 1988). Charlie Brown is the quintessential example of awkwardness, awkward in physical activity, in his relationships with his dog, with his friends, with the little red headed girl, and generally awkward in life. Shultz, through Charlie Brown, showed the experiences of an awkward child, who never quite succeeded in most endeavours, especially sports, but he continued to try nonetheless. Are real-life performers as persistent in physical activity and sport situations? Do they see humour in their predicaments? What else did they feel? How do they feel now, in reflection, about their physical awkwardness?

In the political realm, former American President Gerald Ford was ridiculed by the press and comedians alike, after he was photographed tripping down the stairs while departing a plane. During the 1996 United States presidential campaign, candidate Bob Dole's accidental fall from a podium became the topic of comedic skits for weeks. A television advertised video entitled "Presidential Bloopers" offers numerous examples of awkwardness among the most powerful people in the world.

In Canada, Robert Stanfield is remembered for his dropping of the football, during the 1974 federal election campaign, which he lost to Pierre Trudeau, who was shown performing a front somersault dive into a swimming pool. The implication is that

the awkwardness is generalizable, such that if these politicians are awkward in everyday life, even on one occasion, it may reflect on their ability to meet the demands of their political responsibilities.

Slipping and falling, more often than not, elicits a humorous reaction from audiences or witnesses, and perhaps a similar response, along with a measure of embarrassment, from the victim. The way that society portrays and reacts to the awkward, inept performer in common daily tasks reveals our complex cultural disaffection for physical awkwardness. How does it feel to be the person who falls, who drops the ball? What is the source of this purported humour and embarrassment?

Granted many of the portrayals of awkwardness in movies, television series, and in cartoons are fictional. The above media examples and anecdotes merely show exaggerated reactions to awkwardness. Most of the examples are written from others' points of view, reflecting society's values and attitudes toward awkwardness. They are not presented to suggest that these are the experiences of actual people who are physically awkward. How do everyday people in everyday situations experience their physical awkwardness? Would we gain a deeper understanding of the phenomenon if we were to know more about it?

Real Life Stories of Physical Awkwardness

Evans and Roberts (1987), among others, cite real life reflections of students with lower ability and coordination, who have less sport competence, and who are not successful in physical activity situations. For those with poor motor skills,

> their life on the playground was beset with a number of social problems. They were frequently chosen last by their peers, or in some instances not at all. When

> they did play they were generally relegated to distant posts in the outfield or last place in the batting order, which generated a good deal of frustration (Evans & Roberts, 1987, p. 27).

Evans and Roberts continue by noting that those children deemed poor in motor coordination were assigned minor roles in games, with marginal involvement, such as receiving fewer turns at bat, fewer passes, or shots on goal. Although some accepted this diminished status, others chose to withdraw in frustration and disappointment, playing alone in solitary activities, increasing the social distance between themselves and others.

Students' brief comments reported by Evans and Roberts (1987) suggest dissatisfaction with the physical activity experience. They lamented that, "the good players usually get picked first, which sometimes makes other kids left out because they get picked last if they're not that good" (p. 26). When given a chance, they had fewer contacts with the play. "They pass it to the good players who can run fast" (p. 27). "They never throw me the ball. They think how you ain't there, like I'm an imagination or somethin'" (p. 28).

Losse, Henderson, Elliman, Hall, Knight, and Jongmans (1991), in a longitudinal study, re-examined teen-aged youth, previously identified as "clumsy" during childhood. The youth had not forgotten their childhood experiences, and their comments reflect their significance. For example:

> I've never been very good at PE and don't like it. I can't coordinate my arms and legs in swimming. I had no help from my teachers.... Teachers don't help people like me who are not very good.... I used to be picked last for team games, but you get used to it. You need to persevere, and then you'll get better and enjoy the

> sport.... I couldn't get on in the gym, and I avoided PE. You dislike something if you are not good at it.... I don't like athletics because I can't run (Losse et al., 1991, p. 61).

During her dreams at night, Lisa says she hears the voices of children teasing her while playing games. Alex often refuses to go to school when physical education is scheduled. He gets ill and barricades himself in his room (Health Canada, 1994). The real-life anecdotes described above suggest that there is more to learn from more thorough conversations with such physically awkward performers. These brief examples hint that there are potential potent emotional outcomes, as a consequence of motor incoordination.

Possible Consequences of Physical Awkwardness

A particularly important consequence of physical awkwardness, clumsiness, or what is more often referred to as Developmental Coordination Disorder (DCD) (Polatajko, Fox, & Missiuna, 1995) is that it leads to cognitions, feelings, and actions that interfere with various childhood activities of daily living such as recess play, playground activities, physical education, or sport participation (Watkinson, Causgrove Dunn, Cavaliere, Calzonetti, Wilhelm, & Dwyer, 2001).

Lack of success or failure in physical education and sport, due to pervasive physically awkwardness, might lead to negative feelings that may cause behaviours that are not in the child's best interests. This negative affect has been assumed to lead to lack of effort and withdrawal from activities of daily living, in which children normally engage and which are generally recognized as important for childhood development (Wall, 1982).

Empirical research and other accounts of physical awkwardness support this idea of a pattern of adverse feelings associated with physical awkwardness (Bunker, 1991; Schoemaker & Kalverboer, 1994; Taylor, 1984; Wall, 1982). However, Cantell, Smyth, and Ahonen (1994) have reported contrary findings. They conclude that while students, identified as clumsy, who were followed longitudinally, accepted that they were less physically and scholastically competent than others, "they did not have poor opinions of their social acceptance or self-worth" (p. 115).

Is it possible that the behavioural outcomes associated with awkwardness (avoidance or withdrawal from physical activity, for example) may arise without the negative emotional impact, as has been reported in some accounts? Is it possible, that the effects of withdrawal are minimal, if the child does not value or care to take part in physical activity? The extent to which the outcomes of awkwardness include negative feelings, or unhealthy activity choices is unclear. For this reason, the short and long term feelings and emotional consequences of the experience of awkwardness deserve attention.

Why Ask the Question? Why Attempt to Answer it?

What can we learn from someone who has experienced awkwardness, who has had difficulty learning and participating in a physical activity or games setting? According to Portman (1995), long term consequences of being low skilled are not known. Adult participants in this study may provide information from their retrospective reflections.

As Erickson and Shultz (1992) argue, we need to consider the quality of the experience, as subjectively defined by the individual. The experience of awkwardness, as

understood and examined by teachers and researchers, may differ from that understood and experienced by students and, most pertinent to this study, the reflective perspective of adults may differ from that of children.

The subjective experience and individual perspective of the person have received limited attention in generic educational research, and even less within physical education studies. Smith's insightful question asking, "where is the child in physical education research?" (1991, p. 37), calls for a more person-oriented focus on such inquiry. This is no less important in the area of adapted physical education. Indeed it may be more so. Since research employing group analysis may mask the "truth" about individuals who are different (Bouffard, 1993), it can be argued that teachers need a deeper comprehension of the person perspective in physical education (Graham, 1995; Langley, 1997).

Others also have called for the increased use of interpretative research methods in order to gain insight into student learning in physical education (Bain, 1995; Lee, 1991; Rovegno, 1995; Silverman, 1983). In fact, Bain (1995) writes that research on the subjective knowledge of participants has historically held a marginal position in the field of kinesiology. Areas of specialization, such as adapted physical activity, sport and physical education pedagogy, and sport psychology have begun to lead the way in accepting subjective inquiry as a viable method of inquiry. As Geertz (1973) writes, there can be no ascent to truth without a concurrent descent to individual cases.

Several studies, both descriptive and correlational, have looked at the self-perceptions, activity patterns, and socialization, among other variables, in children who are physically awkward. This has led to postulations of a Syndrome of Physical Awkwardness (Wall, 1982) and the clumsy child syndrome (Walton, Ellis, & Court,

1963), among others (Meek & Sugden, 1997). However, most of the research has involved traditional group level designs, using the aggregate to make generalizations about an individual phenomenon. Bouffard (1993, 1997) speaks of the perils of aggregating data across people and appeals for recognition of the person, as a basic unit of analysis. He cites the problems of using traditional group designs with heterogeneous groups of subjects and questions the validity of generalizations from aggregates to individuals. Interpretative methodology will enable me to assess how the Syndrome of Physical Awkwardness, as described in studies of aggregates, resonates with individuals.

From a Personal Perspective

As physical awkwardness has been a longstanding interest of mine, the opportunity to learn more from the phenomenological perspective, while making a contribution to the literature is appealing. I was employed in a large urban school division for 17 years. For much of that time I was responsible for assessing and identifying children who were physically awkward, and subsequently designing intervention and remedial programs for such children. During that time, I regret to admit, I never seriously wondered how a child felt about not being able to catch a ball, or skip, or maintain balance. For me, it was a simple matter of identifying a movement difficulty and applying systematic remedial instruction.

I recall only one occasion, when I wondered about how a child felt about his physical awkwardness. Allan, (a pseudonym), age 4, was a bright, precocious boy, who was identified as awkward in nursery school. He was reluctant to come along for a motor skills assessment. This struck me as odd, since children were usually most eager to come to the gym and play catch with "the man with the ball."

Allan enjoyed carrying around a gadget comprised of wires, batteries, switches, and lights that buzzed or flashed, depending on how he connected it. He was content to play with the device, while unenthusiastically taking part in the brief motor skills observation I had conducted with thousands of other children. With prompting, he initially agreed to attend the motor skills program. However, his level of engagement showed he did not really care to join, nor was he giving his best effort in the activities others enjoyed. At the start of the next school year, Allan loudly announced, "I am not going with you this year." At the time, I casually wondered why, but never dwelt on how he felt about it all. I wish I had spent time with him to ask about it, or could speak with him today so he could reflect on his experiences in the motor skills program, and in physical education classes during his subsequent school years.

Physical awkwardness, clumsiness, DCD among other names, are related terms, defined and described in similar ways, and are often used interchangeably (Piek & Edwards, 1997). Physically awkward children are portrayed by Wall (1982) as those "without known neuromuscular problems who fail to perform culturally normative motor skills with acceptable proficiency" (p. 254). Clumsiness describes those who have difficulties performing skilled purposeful movements, although normal both mentally and physically (Knuckey & Gubbay, 1983). The most recent terminology, Developmental Coordination Disorder, recognizes a marked impairment in the development of motor coordination that interferes with academic achievement or activities of daily living, which is not due to a general medical condition (American Psychiatric Association, 1994).

Two common features are found in the definitions of physical awkwardness, clumsiness, DCD, and related terms. Firstly, each designation essentially describes

difficulties in performing motor and sport skills, often seen in recess, playground, physical education, and sport participation; and secondly there is no definitive apparent cause for the motor problems.

The decision to use the term physically awkward in the study of the experience of this phenomenon is based on my preference for the term, as defined by Wall (1982), and its focus on motor skill ineptitude. It speaks to the central essence of awkwardness, that is, the unexplained difficulty to adequately perform sport skills that are valued in society, in the absence of any known disability. Therefore, for this study, the term physically awkward is used, even though the current accepted expression in most research circles is Developmental Coordination Disorder.

However, clumsiness, DCD and other terms are used along with physical awkwardness in the chapter on related literature and writing on the topic, as the review respects the terminology preferred by the authors cited. Nonetheless, more ordinary lifeworld language, such as "physically awkward" or "awkward", was used in conversations with the study participants, in an attempt to obtain their stories. Awkward is a jargon-free, everyday word that the participants understood and could relate to.

A review of the literature shows that there has been a good deal of speculation about what awkwardness means to some physically awkward children, described as a syndrome of negative feelings, frustration, aggression, withdrawal, and avoidance of physical activity (Wall, 1982), based to a large extent on motivational theory (Harter, 1978). The Syndrome of Physical Awkwardness implies that the link between movement difficulties and social, emotional, motivational, and behavioural problems is causal, even

though that type of conclusion is not warranted. The research is largely correlational and speculations about cognition and feelings are inferred.

The present study is an alternative, non-traditional inquiry that seeks an in-depth examination of the links referred to earlier, by asking people what led to their feelings, what their feelings were in certain situations, and how these feelings have affected their decisions, about participation in physical education, active play, games, and sport? Comprehensive hermeneutic interviewing might yield interesting insights into the heretofore private and undisclosed ideas, thoughts, and feelings of those who have lived the experience of physical awkwardness.

CHAPTER TWO

Approach to the Study of the Experience of Physical Awkwardness

An Overview of the Interpretative Method

Hermeneutic phenomenology, also referred to as interpretative phenomenology (Benner, 1994), is a qualitative research method found within the human science research paradigm, which has an interest in understanding and explaining the meaning of human experiences. In brief, it is a method that attempts to both describe and interpret an experience or phenomenon. Phenomenology, as a descriptive human science is attentive to how things appear and how things reveal themselves. Hermeneutics is interpretative in that it assumes that most, if not all things, have meaning and can be understood and expressed through the medium of language and writing. This type of research can also be described as existential to the extent that it attempts to describe how phenomena present themselves in lived experience, in human existence (Beckers, 1996; Benner, 1994; van Manen, 1990).

The term hermeneutic can be traced to the Greek "hermeneuein" and is associated with the Greek god Hermes, who in mythology, somewhat arbitrarily presented the messages of the deities. However, at times the interpretations were skeptically received. This "art" of elucidation was also linked to dubious techniques of ancient priests and wizards, leaving some to wonder why such a subjective process should earn the rank of science (Beckers, 1996). However, hermeneutics evolved and has been used in the interpretation of texts, as a general theory of understanding, in the fundamental-ontological interpretation of being, and in the hermeneutics of symbols of the latent and unconscious (Seebohm, 1997).

Phenomenology is derived from the root word phenomenon, from the Greek, meaning logos or reason of a phenomenon. Phenomenology, as a human science method has been in use since the mid-eighteenth century. It is linked most closely to Husserl, its modern founder. The method has evolved through his followers such as Heidegger, his student Gadamer, and others such as Merleau-Ponty, Sartre, and Ricoeur (Nicholson, 1997).

Phenomenology became hermeneutical when it argued that every form of human awareness is interpretive and when humans were recognized as being able to take on a central role in interpretation. During the 1960s and 1970s, English translations of works of the early scholars and contributions by contemporary academics did much to advance the understanding and use of hermeneutic phenomenology (Gadamer, 1975; Heidegger, 1962; Husserl, 1970; Merleau-Ponty, 1962; van Manen, 1990).

It has been said that hermeneutic phenomenology is an anachronistic old fashion methodology (Beckers, 1996) as well as one that has no method (van Manen, 1990). However, phenomenology has evolved over centuries such that there are many contemporary approaches to conducting phenomenological research (Embree et al., 1997). Perhaps one could say that there is no one method, but there is indeed method to phenomenology, just as there are methods, in fact a variety of techniques which may be employed to manage and analyse quantitative data.

The approach that I wish to utilize for this study is the type of hermeneutic phenomenology advanced by van Manen (1990), which is informed by the thinking of various Continental philosophers, notably Merleau-Ponty (1962), Heidegger (1993) and Gadamer (1997). This method is built upon the work of early and mid-twentieth century

European educational theorists: the interpretive (i.e. hermeneutic) methodology of the German "human science pedagogy" and the more descriptive (i.e. phenomenological) methodology of the "Utrecht school" of phenomenological research in education and psychology (Montgomery-Whicher, 1997). Van Manen has extended these methodologies to create a distinctive hermeneutic phenomenology that suits my needs in the exploration of the experience of physical awkwardness.

Hermeneutic phenomenology begins with a sense of wondering about what some thing, some phenomenon or experience is like. The question asked may be apparently simple however, phenomenological inquiry is not an uncomplicated process, nor is the answer necessarily simplistic. This interpretative study, as will be shown involves a logical, systematic, multi-phase, methodical approach to the reflection of individuals' subjective experiences of physical awkwardness.

Bruner (1986) writes that subjective experience refers to a personal account of actions and feelings as well as reflections about those actions and feelings. To examine something, such as awkwardness in physical education as a subjective experience "is to place a lens on the meaning of one's actions" (Langley, 1997, p. 145), and feelings.

Hermeneutic phenomenology, not unlike other methods of research, operates under some basic assumptions that have contributed to the method applied to this study. At the onset, a main assumption of hermeneutic phenomenology is that humans are social, dialogical beings who seek understanding. Benner (1994) states that understanding is potentially always before us in our shared background of societies, cultures, languages, activities, and meanings. Given this social, communication-based search for knowing, we are always ready for what is referred to as a hermeneutic circle of

understanding. This is manifested through revisiting and reinterpreting the data, coming to a shared understanding involving the interpreter and the interpreted in a dialogical relationship (Benner, 1994).

The hermeneutic circle, interpretative spiral, or circle of understanding is a conceptualisation of interpretative research that has one constantly revisiting the central question, searching for meaning. The process metaphorically undergoes several loops as in a spiral, in an attempt to find a deeper shared meaning with the participants (Embree et al., 1997).

The experience of awkwardness is something that is legitimately worth wondering about in light of the longstanding research about awkwardness that is apparent in the literature. The method employed in this inquiry may contribute to knowledge of the experience of physical awkwardness in ways not seen through traditional ways of studying it. Perhaps the exercise can open up possibilities about other perspectives, about other ways of viewing physical awkwardness, and subsequently about other ways of investigating it. It may lead to a more enlightened awareness which may in turn lead to further wonderings, to further questions.

Perhaps the most distinguishing feature of hermeneutic phenomenological research is in its emphasis on writing as an integral part of the research process. Phenomenology aims at making meaning explicit through an expressive, perceptive, and insightful use of language, the medium of phenomenological writing. One could say that phenomenology is about writing, and thus the act of writing is inseparable from the act of phenomenological research. In this way hermeneutic phenomenology is distinct from other forms of research in which writing is traditionally employed as a natural reporting

of results and discussion, an activity that takes place after data collection and analysis (van Manen, 1990).

Gadamer (1997) speaks of the limits of language, as the medium of hermeneutic experience "in which substantive understanding and agreement take place between two people" (p. 384) and notes that, "in writing, language gains its true ideality" (p. 391). However he points out that language as a social construction is limited in its facility to be able to describe and interpret. Citing Plato, Gadamer (1997) draws attention to the specific weakness of writing, saying that no one can come to the aid of the written word if it falls victim to misunderstanding, either intentionally or unintentionally. Van Manen reminds us that the intent of a phenomenological text is to attempt "to say a thing well; to be attentive to the form of language, so that language is not merely a vehicle for content, but the use of language, the very form of writing conveys meaning" (van Manen, 1990, p. 130).

While phenomenological research proceeds through phases of questioning and investigating a lived experience, interpretation through writing and language are closely involved at each step along the way. For example, thinking about and formulating a question, engaging in conversation with participants and others, reading and note taking, keeping journal reflections, or even making informal notes to oneself are all linguistic processes which may precede or accompany the finished phenomenological writing (Montgomery-Whicher, 1997).

In order to make human experience the explicit focus of its work, "the aim of phenomenology is to transform lived experience into a textual expression of its essence" (van Manen, 1990, p. 36). A phenomenological study articulates the lived meaning of a

particular kind of experience, "a determinate meaningful aspect of one's life" (p. 38). While the experience of physical awkwardness is not ubiquitous, according to the literature it affects from 6 to 15 percent of people (Sugden & Wright, 1998). For those people affected, it has some meaning.

As mentioned, hermeneutic phenomenology fits within the human science rather than the natural science paradigm. It is of interest that most of the research on clumsiness, physical awkwardness, and Developmental Coordination Disorder (DCD) is drawn from a strong base of empiricism that emphasizes the more conventional scientific method. Although hermeneutic phenomenological research in the study of physical activity is limited, Beckers (1996) makes a strong case for employing it as a scientific method in the study of sport pedagogy. In the same vein, it has utility in the study of other aspects of physical activity, including adapted physical activity, and specifically the experience of physical awkwardness.

Methodological Rigor in Phenomenological Research

Rigor refers to preciseness in the application of the principles, protocol, and procedures one follows when conducting any type of research. Rigor in human science research has been both criticized and defended. Hermeneutic phenomenology has been referred to as both inexact and imprecise (Plager, 1994). However, it is argued this is so because, as Heidegger maintained, it is much more difficult to achieve rigor in human science than it is in natural or so called exact science (1977).

There have been many experts in hermeneutic phenomenology who have developed and described methods to guide interpretative research. Plager (1994) identifies three factors contributing to the rigor of hermeneutic phenomenology, namely,

"the inevitable retrospective and historical nature of interpretive work; the involved and time-consuming need for studying participants in their everyday situatedness; and the arduous commitment involved in interpreting the text" (p. 77). Plager (1994) emphasizes that "interpretative accounts will not be true for all persons ... at all times because concerns and issues are different depending on the situations" (p. 79), just as the individual does not necessarily always reflect the aggregate in quantitative research findings.

Packer and Addison (1989) list four approaches to the evaluation of interpretative research, such as that employed in this study. They say it is important that an interpretive account be coherent, be examined in the context of the evidence, seek consensus among various groups including the participant's interpretation, and has its relationship assessed to future events. However, they caution that these should not be considered ways to validate the research per se, but instead to consider whether or not the question has been interpreted.

Madison (1988) also lists coherence, or the presentation of a unified text as an important consideration for evaluating interpretative research. Madison notes several other principles for evaluation such as, ensuring that the account resolves around a central problem, that it focuses on the questions posed, maintains the text's historical and contextual integrity, reserves room for reinterpretation, and raises further questions for future interpretative research.

Plager (1994) cites van Manen (1990) who structures his approach around research activities that he considers dynamically interrelated in interpretative research. These include the identification of a phenomenon of interest, investigating an experience

as it is lived not as it is conceptualised, reflecting on essential and incidental themes related to the phenomenon, describing the phenomenon through descriptive writing, and balancing the research context by considering parts and whole. Van Manen has organized the content of his text around these research activities (1990). This work has served as a useful guide in conducting this study.

In a review undertaken by Silverman and Skonie (1997), an analysis of published research on the teaching of physical education is reported. Their results indicate that most of the research is quantitative and focuses on the teacher. Qualitative research methods were used in less than 9 percent of studies. The authors suggest the potential of qualitative research has not been realized by many mainstream researchers. However, good questions determine the research paradigm and are followed by a carefully designed and conducted study (Thomas & Nelson, 1996). Langley (1997) argues that combined qualitative and quantitative methodologies will be increasingly more utilized in future physical education research.

Early physical education researchers looked to generic educational research in designing qualitative studies. Now there is a growing body of physical education research to augment the generic literature that has helped to steer this study. For example the interpretative research by Bain (1995); Goodwin (2000); Goodwin and Watkinson (2000); Graham (1995); Halas (1999); Humbert (1995); Lee (1991); Locke (1989); Portman (1995); Rink (1993); Rowley (1996); Silverman (1991); and Winther (1983), among others was useful in structuring this inquiry.

How This Study Was Conducted

Method is comprised of the procedures involved in the gathering of data, its

analysis, and interpretation or in basic language how something is done. The practice of phenomenological research is a creative undertaking that does not rely on ready-made formulas and prescribed methods (van Manen, 1990). However, this study, as is detailed in the following pages, utilized a systematic multi-phase process in an attempt to elicit stories of physical awkwardness and their meanings from the participants.

While phenomenology is not done merely step by step, the processes of phenomenological research can appear to be orderly and sequential in theoretical writing about them. However, initially the procedures are more likely to be disorderly and simultaneous in practice. Nonetheless, upon completion it is hoped that the writing itself will yield a phenomenological "nod", a validity test of sorts, an implicit understanding from those who know (van Manen, 1990), as well as a new awareness for others.

The information gathering extended over the entire course of the writing of the dissertation. I had no planned cut-off point for refusing prospective participants. It was always of interest for me to learn a new story, of a new person's experience with the phenomenon of physical awkwardness until I felt informed.

Following is a description of the process of this study, with a focus upon the origin of the study question, the participant search and selection, question construction, interview protocol, information gathering, and the thematic analysis related to the exploration of the experience of physical awkwardness.

Origin and Evolution of the Study Question

The question of seeking the meaning of the experience of physical awkwardness evolved from my longstanding work and interest in the condition. As noted in Chapter 1, I previously had extensive direct involvement with the design and delivery of remedial

basic movement skill programs for students of early childhood age, identified as physically awkward. For over 12 years I conducted research on various aspects of these school-based motor skill intervention programs. I focused much of my attention on the process of identifying children who were physically awkward, on the mechanisms involved in the operation of intervention programs, and on the implementation of developmentally appropriate motor learning instructional strategies. While individually administering more than 25,000 motor skill assessments to children, over 15 years, I interacted primarily with teachers, resource teachers, consultants, program leaders, and parents to organize programs. I considered myself an expert in motor skill observation, assessment, and instruction.

In recent years, I began to view motor skills acquisition more in the context of the person, task, environment triad (Bernstein, 1967; Newell, 1986) as expressed in Dynamic Systems Theory (Shumway-Cook & Woollacott, 1995; Thelen, 1989), Ecological Theory (Gibson, 1977; Newell, 1986), the Ecological Task Analysis approach to skill instruction and assessment (Davis & Burton, 1991), and the Knowledge-Based Approach to Motor Development (Wall, McClements, Bouffard, Findlay, & Taylor, 1985).

Upon reflection, I realize I had perceived the children in the motor skill program as basically passive respondents to the prescribed motor activities, without consideration for their perspectives and the context in which they participated. I focused on the motor tasks designed to improve their movement skill weaknesses, without regard to their subjective experience or feelings associated with it all.

In developing the idea for this study, I began to wonder about the children who took part in my motor skills program, such as Adam referred to in Chapter 1, and others

not identified, more from the affective perspective. I became increasingly more curious about how these children, now adults, felt then and feel now about their past experiences of awkwardness. This has led to the formation of the question on the meaning of experience of physical awkwardness, the focus of this study.

Delimitations and Limitations to the Study

Delimitations and limitations are found more within the post-positivistic research paradigm however, there are potential constraints, self-imposed and otherwise, that may have had an influence on this inquiry. The study was delimited by my understanding of physical awkwardness or DCD and the effect that this knowledge might have on participants and the interpretation process. It was also delimited by what is hoped is an adequate and reasonable amount of time devoted to gathering information from the study participants.

The study was limited by the influence of my knowledge of physical awkwardness and related past experiences. It was also limited by my facility for setting aside any biases, in the form of bracketed preconceptions. I also assumed that the participants had actually experienced physical awkwardness and that they understood the intent of the study. Additionally, I believed that the participants could accurately recall and articulate incidents and associated feelings and meanings of past experiences of physical awkwardness. Furthermore, I had to be confident in my facility to elicit stories from the participants and interpret their words.

Finally there may be a limitation related to knowing when to cease the search for related literature and participants, and conclude the interview phases of the study. There came a time when I felt I had adequate numbers of participants and conversations with

them to feel informed and that I was sufficiently familiar with the literature to say it enabled me to answer the question. The thinking behind my decision to conclude the search for related literature, participants, and the interview process is dealt with in more detail in the concluding Chapter 7. Overall, I am also making an assumption that the limitations and delimitations imposed will not be so confining as to have an impact on the integrity of the results.

Bracketing Exercise

In phenomenology, a process sometimes called "bracketing", a mathematical term inherited from Husserl (1970), implies that we take what we already know about our preconceived ideas, theories, and thematizations, together with our personal biases and preferences and hold them in abeyance. Bracketing is the suspension of one's various beliefs of the reality of the natural world in order to study the essential structures of the world (van Manen, 1990). Bracketing sets aside opinions and a priori hunches concerning the phenomenon in question. This is done in order to study the fundamental compositions of the target phenomenon.

Because our capacity for wonder is all too often anaesthetized by overused and habitual ways of looking, in order to view something in a fresh way, it may be necessary, as much as possible, to consciously set aside our usual way of seeing along with our beliefs and knowledge about the phenomenon we want to study (Berg, 1995). During the proposal, pilot study, and throughout the interview, analysis, and writing phases of the inquiry, I conducted what amounted to an ongoing self-reflection, to explore, clarify, and check my pre-conceptions and beliefs about physical awkwardness.

Aside from the bracketing exercise and in addition to the more formal writing of

the dissertation, notes were kept, some of which are integrated into the discussion in Chapters 7. Thoughts and questions were recorded along with descriptions of interviews (the context, the people), as well as quotations from reading, anything that seemed relevant to the topic and process of the inquiry. Information from participant interviews, augmented with notes and observations, were compiled following the conversations and are also integrated into the final chapter.

Ethical Considerations

The study research proposal was submitted for approval to the Ethics Review Committee of the Faculty of Physical Education and Recreation of The University of Alberta. In order to ensure the privacy and dignity of the participants, ethical issues were carefully addressed and clearly communicated to them in a letter of informed consent (Appendix B). The purposes of the study were communicated as clearly as possible to potential participants. All participants were given an opportunity to pose questions to me. As the researcher I was available to discuss any related matters of concern with the participants throughout the course of the investigation.

The participants were not subjected to any physical or psychological risk through their participation. Participation was voluntary and participants could have left the study at any time without consequence or repercussion. Participants were made aware that there was no remuneration for participation in the study.

The identity of the participants was protected and was not revealed. Audiotapes are labelled numerically. Participants are identified in the text by a pseudonym. All participant quotations used are presented in such a way as to not compromise the source. I alone communicated with the participants. The ownership of the data is shared with the

participants. The information was made available to the participants at any time during the course of the study.

Trustworthiness and Triangulation

In qualitative research an inquiry is oriented toward the interpretation and production of reconstructed understandings, which contribute to trustworthiness of the study. The credibility aspect of trustworthiness, according to Denzin and Lincoln (1994) relates to the capability of the researcher. As the investigator, with a background of extensive reading about and working with those who have experienced physical awkwardness or DCD, I feel uniquely suited, competent, and qualified to conduct this study. In a sense I was the instrument who interpreted the information on the experience of physical awkwardness that was provided to me by the participants. A practice used to build trustworthiness in this study is triangulation (Denzin and Lincoln, 1994).

Triangulation is a way of employing various perspectives to affirm the method, data collection, analysis, and interpretation. Triangulation can be accomplished in a variety of ways by using a variety of sources, several different interpreters, many perspectives to interpret information (member checking), multiple methods to study a single problem, and other disciplines such as art, music, history, literature, and anthropology to inform the research process and broaden the understanding of it (Denzin & Lincoln, 1994).

In order to practice triangulation, the central question remains in focus and is continually revisited. In this inquiry, a pilot study of 3 participants allowed me to refine the protocol and further develop the questions. This was followed by a preliminary thematic analysis that was presented to colleagues, members of the dissertation

committee, and at an international qualitative methods conference (Fitzpatrick, 1999).

The study participants, knowledgeable colleagues, and my committee members provided valuable comments as they communicated their thoughts on my preliminary findings. These and other encounters provided a continuing mechanism for feedback and modification of the study protocol and process, as well as an increasingly deeper understanding of the question of awkwardness and its meaning. The data were also authenticated through a technique referred to as "member checking" for participant verification (Guba & Lincoln, 1994).

Member checking.

Member checking is a collaborative process using participants to clarify and confirm a text of their narrative. It is a useful way to corroborate and amend information. Participants were given an opportunity to view their transcripts as well as summaries of others' conversations. They were encouraged to comment further or enlighten points of interest. Interview information was also illustrated through a thematic synopsis that provided the participants more opportunity to comment.

The full text of chapters 4 and 5 are accounts of the participants' stories, incidents and feelings associated with physical awkwardness. These chapters were given to all participants to read and indicate how it all resonated with them, in a further attempt at member checking.

In a conversation held with another there is a relationship or connectedness between the researcher and the notion he or she seeks to understand. Conversations have a hermeneutic thrust that is oriented toward making sense and interpreting the notion that drives the conversation, the reason for the interaction. It is important to keep the question

of the meaning of a phenomenon open to maintain an orientation to the experience under study.

Through this process of interactive communication, the search for the meaning of an experience, such as physical awkwardness continues until the conversation lapses into silence (van Manen, 1990). The collation of themes and repeated member checks with participants continued the cycle of returning to the question, its essence, and meaning. Their feedback provided valuable insight in the interpretation, which contributed to the editing and writing process.

Seeking and Gaining Access to Participants and their Stories

A "seeking participants" notice was developed and distributed (Appendix A), based upon a series of real and hypothesized questions and situations from the literature on physical awkwardness. In particular, the work on the Syndrome of Physical Awkwardness (Wall, 1982) was a most helpful source for formulating questions intended to attract the attention of prospective participants.

Questions such as the following were posed through various avenues to invite potential candidates to respond. Did you feel you were among the least coordinated in physical education class; were you not as good as others in sports; were you chosen last for teams, or not at all; did you have fewer times at bat, shots on goal, or passes, or were you last to have a turn; did you avoid "PE" because of your poor skills; did you get ill when it was time to go to gym, or did it even matter to you; how did you and others react to your doing poorly in games; how did you feel about being awkward in physical education?

The purpose of the seeking participants notice was to locate, draw inquires,

solicit, and recruit candidates to participate in the study. I hoped that some or all of the above questions would resonate with potential adult participants who in turn would be willing to take part in some confidential interviews to discuss their experience of awkwardness during the time of their childhood and youth.

The search for participants was made formally and informally to individuals, groups, and associations with which I have direct and indirect contact. The seeking participants notice was distributed in a variety of ways. It was given to individuals, posted in notice boards, placed as a link on my home page (Fitzpatrick, 2000), and printed in a local community newspaper (Headingley Headliner, 2000). Additionally, informal conversations with colleagues and others regarding the purpose of the study sometimes led to participant recruitment.

Although potential participants were initially identified by referral, solicitation, and invitation, ultimately self-identification and self-selection defined one's involvement in the study. At the outset, participants were engaged in casual conversations in order to inform them of the study and give me a sense of their aptness for, and willingness to communicate their experiences of physical awkwardness during taped audio conversations.

Prior to the first scheduled interview, a series of affirmation questions about physical awkwardness, derived from the literature, were posed to the participants (Appendix C) in order to assess as much as possible their authenticity for taking part in the study. I wanted to be as sure as I could be that the core or essential experience related to physical awkwardness and not, to say, disability, obesity, or disliking physical education. I also sought from the participants a self-declaration of a lack of etiology to

explain their awkwardness.

Thus participants self-identified for the study, based upon their perceptions of connecting with the essential features of physical awkwardness. Prospective participants were ultimately accepted according to the following criteria: a) identifying with the questions relating to physical awkwardness, b) personally experiencing difficulties in performing popular, culturally normative sport skills, c) having problems participating in competitive game situations, d) an indication of feeling physically awkward during their childhood and youth physical education, play, games and sport participation; e) a self-declared absence of a disability that would account for the physical awkwardness; f) willingness to commit time for interviews; g), wanting to share experiences by describing incidents associated with physical awkwardness and; h) the facility to express feelings about the experience.

It is important to emphasize that it did not really matter that the participants were previously officially identified as being physically awkward. It was simply important that they personally identified and related to a feeling of being physically awkward, and were willing to talk about it. Given the limited screening of motor skills in public schools and the inconsistencies in the assessment and identification of physical awkwardness or DCD, it is no surprise that many go formally unnoticed (Sugden & Wright, 1998).

By personally identifying with physical awkwardness and voluntarily agreeing to take part in the study, the participants communicated their willingness, or at least not a reticence, to tell me their stories. I felt that if the participants could recognize themselves in the descriptions and anecdotal prompts presented, they must feel able to relate to the experience of physical awkwardness.

There were 18 interviews conducted with 12 participants, in person or by telephone. All information was taped and transcribed, analysized thematically, and discussed within the context of the question and then in the context of the Syndrome of Physical Awkwardness and other relevant literature.

Since the process of conducting conversational interviews can be unpredictable, initially it was not known how many people I needed to interview, or how many conversations I needed in order to feel informed about the experience of physical awkwardness. Therefore, I continued searching for participants, until I felt sufficiently "in-formed, shaped or enriched" (van Manen, 1990) by numerous experiences of physical awkwardness.

I continued to collect a substantial body of such accounts to ensure that I would have enough that were useable. The number of conversations describing experiences related to physical awkwardness continued long enough to collect plausible information in order to come to a shared understanding of physical awkwardness.

Why adults instead of children?

Given my past experience working with children, as enjoyable as it was, for this study, I did not wish to interview children currently living the experience of physical awkwardness. I was more interested in gaining a retrospective insight of adults' experiences of physical awkwardness and their feelings and meanings associated with it.

Although it has been shown that children can provide accurate and reliable verbal reports, Boucher, Doescher and Sugawara (1993) point out that children have an inflated view of their abilities and may give socially desirable responses in order to please the interviewer. Children may report most recent experiences but not necessarily their most

significant experiences.

It was reasoned that adults, better than children are capable of recalling, articulating, and giving accurate responses concerning how they felt previously, especially with emotion-laden events, and how they now reflect on their experience of physical awkwardness. Finally it is believed that adults, in this instance can provide a richer, more meaningful text (Crutcher, 1994).

I also argued that adults were better able to comprehend the overall intent of the study and the questions posed, and in the tradition of qualitative research become co-researchers in the study. Additionally, as van Manen (1990) points out, "the lifeworld of the child has different qualities from the lifeworld of the adult and experience, as reflective, is more easily made sense of after the fact" (p. 101). By questioning adults' retrospective reflections, I gained a sense of how they thought they felt then and now about their experiences of physical awkwardness.

Pilot study.

During the fall of 1998, colleagues and others were asked to refer potential candidates to participate in a pilot study on the experience of physical awkwardness. Subsequently, trial interviews were conducted with 3 individuals to assist in question development, and to assess the viability of the questions and the study protocol. The questions evolved more precisely as a result of these early interviews. The exercise gave me an opportunity to become familiar with the tape recording technology and comfortable with the interview protocol.

The results of the pilot interviews were most satisfying. The information provided by the pilot exercise proved to be so rich and relevant that consequently the pilot

interviewees were invited and agreed to become full-fledged participants in the study.

Connecting with Participants

I felt it significant that both the participants and I were comfortable in a taped interview, itself an unnatural experience. Developing rapport with participants was important as it was assumed that if they were relaxed and at ease having a conversation with me, they were more likely to provide rich descriptions and meanings of their experience of physical awkwardness. I genuinely respected the participants and their willingness to give me their time. I attempted to project a casual manner easing into the conversation rather than conducting formal interviews.

Information Gathering

Following the gathering of a participant's personal information and a review of the purpose for conducting the study, each participant was asked to complete a descriptive writing exercise (Appendix D), recounting in a paragraph a past incident of awkwardness from their physical education, play, games or sport participation. The descriptive writing exercise served two purposes. Firstly, it focused attention on the experience of awkwardness and secondly, it served as a prompt or stimulus for later questions. The taped interview commenced with a request for the participant to verbally recount his or her descriptive writing exercise.

Van Manen's (1990) guidelines for producing what he refers to as a lived-experience description served as a guide for me to instruct the participants in preparing their paragraphs. Initially, one was asked to describe the experience as it was lived, avoiding causal explanations, generalizations, or abstract interpretations. At the onset, it is not relevant to describe the "why" of the experience, as that would be the substance of

later conversations. The experience should be described "from the inside ... like a state of mind: the feelings, the mood, the emotions" (p. 64).

The person is requested to focus on a particularly vivid example or incident of the experience that stands out, describing specific events related to it. One is encouraged to attend to the senses of how the body felt, without trying to embellish the account with esoteric phrases or exotic terminology. It does not matter that the experience is accurately described, what matters is the living sense of it (van Manen, 1990).

Following is the exact chronology of instructions given to the participants, prior to the descriptive writing exercise before the first taped conversation. Initially, participants were given a brief overview of the nature of the study, in addition to information they had already read about it. Following the introduction to the study, participants were asked to prepare a paragraph describing an incident of physical awkwardness. After this exercise, the audio-taping commenced and participants were asked to verbally recount their written paragraph. This provided a focus for the remainder of the initial conversation, as well as an avenue from which to generate further questions of relevance.

Origins and Evolution of the Interview Questions

The initial interview questions stemmed from points arising out of the descriptive writing paragraph, in order to identify the details and seek clarification of the stories. Participants were then engaged in further conversation and encouraged to talk freely about their described incident of physical awkwardness and their feelings associated with it. They were then invited to tell me other stories, of other incidents, which led to further questions, conversations, and reflections. More in depth and thoughtful discussion by the participants was encouraged, permitting them to share their feelings and meanings

associated with the incidents in question, to explain why they felt the way they did.

The focused conversations permitted me to narrow in on the question and further uncover the feeling and meaning of physical awkwardness. Repeating significant questions often yielded richer material that contributed to a deeper understanding of previous information. In addition, later clarification questions were aimed at eliciting meaning rather than descriptions.

Through questions and conversations with people who have experienced physical awkwardness, many accounts of lived experiences were gathered. Together, these provided the sources for my descriptive and interpretive writing. Based upon the quality and richness of the individual interviews, and my need to clarify information, a follow-up interview was arranged to obtain more incidents and stories of the experience of physical awkwardness. This continued the process of more deeply uncovering the meaning of physical awkwardness.

Van Manen (1990) distinguishes between two kinds of interviews. There are those which are used primarily to gather lived-experience material (stories, anecdotes, recollections of experiences), primarily descriptions, and those which serve as an occasion to reflect with the interviewee, the conversational relation to the topic at hand, to assign meaning to the phenomenon, in order to better explain it. The gathering of and reflecting on lived-experiences accounts, by means of conversational interviewing, are really two different stages in a single research project (van Manen, 1990).

At the onset, I discouraged the temptation of some participants to lapse into detailed explanation or interpretation, rather than description. Once the incident was described in detail, further probing questions sought to uncover feelings and meanings

associated with it. Later conversations were more reflective than the initial descriptions of awkwardness.

The participant questions were formatted from the description of the Syndrome of Physical Awkwardness (Wall, 1982), and by the research and writing on clumsiness, physical awkwardness, and DCD. This provided a systematic structure for my interviewing, reflection and writing.

The reviews of related literature on physical awkwardness were a rich source for question construction. Specifically, questions associated with the social and behavioural findings of reported comments made by children and youth from the related literature were used to prompt and elicit descriptions of incidents of awkwardness. Relevant questions were posed where they seem to fit appropriately into the conversations. However, it is important to note that it was not always necessary to pose a question, particularly if a participant was volunteering stories and feelings related to his or her experience of physical awkwardness. The questions were only asked, as necessary, to generate conversations. See Appendix C for the Interview Format and Tentative Interview Guide.

When one asks a question on what an incident is "about" one is asking for its meaning. The task of phenomenological reflection and writing is to grasp and articulate the "essential meaning," or, "structure of meaning" of a certain kind of human experience. The questions attempted to pinpoint the meaning of a phenomenon as it is expressed in a particular way. To put it differently, each question is a possible response to the larger question "what is this example an example of?" (van Manen, 1990).

To illustrate, initial questioning prompted the participants to tell their stories.

Once an incident was identified and described, further questions were asked in an attempt to uncover the fundamental, personal, individual meaning of the incident to the participant. For example, with respect to being picked last for a team, as a result of inept sport skills, attempts were made to have an incident described about being picked last, followed by an effort to uncover what being picked last felt like and what it meant to the participant.

Use of Anecdotal Prompts

An anecdote is a short, interesting, amusing or biographical narrative, sometimes unpublished, about an incident or event. Anecdotes are social products, condensations of ideas offered as examples for acting or seeing things in a certain way. They are useful devices as illustrations to make comprehensible some phenomenon that eludes us. Anecdotes may be verbal, musical, visual, artistic, or literary.

Anecdotes have a variety of functions and characteristics. They draw our attention and prompt us to reflect and search for significance because they are intended to reach out and stimulate our interpretive sense. Anecdotes are pragmatic and attempt to make theoretical thought less abstract. They force us to search out the relation between living and thinking, between situation and reflect. They can teach and involve us pre-reflectively in the lived quality of a lived experience, while encouraging a reflection of the experience (van Manen, 1990).

For this study, anecdotes, in various forms, were used as prompts, as required to stimulate memory of experiences of physical awkwardness and their meanings. The use of anecdotal prompts is not unique. Olson (1986) used anecdotes from other literary sources as hermeneutic prompts in studying the meaning of chronic illness.

Anecdotal prompts about physical awkwardness were presented to the participants in the form of descriptive writing paragraphs, restatement of a participant's own comments, selected excerpts from others' transcripts, relevant poems and songs, examples from the media, references to television programs, movies, and fictional literature, illustrations, graphics, cartoons, and emerging themes that were identified during the early parts of the study.

Thematic Analysis, Reflection, Interpretation and Discussion

The literature on analysis and interpretation of qualitative data has at least four common assumptions. Firstly, data collection, analysis and interpretation proceed simultaneously. Secondly, a systematic method for analyzing the interviews is required in order to reduce the data into thematic units. Thirdly, the meaning of the data is drawn from patterns of relationships from the thematic units. Finally, a method is required for verifying the accuracy of the analysis and interpretations to avoid inconsistencies or contractions in the data (Miles & Huberman, 1994; van Manen 1990).

A theme is a recurrent dominant main idea which is common to the content of a text (McKechnie, 1983). In simple terms it is what something is about. It is a focus of meaning, the showing of the point, or notion, the sense of an experience. Metaphorically, themes are more like hooks that help us to organize content or as van Manen says, "knots in the webs of our experiences, around which certain lived experiences are spun and thus lived through as meaningful wholes" (van Manen, 1990, p. 90).

In pragmatic terms, a theme is a tool for deriving meaning of the experience by giving structure to something by defining the essence of it. Themes emerge from the account of an experience in various ways to fulfill our desire to make sense of something.

They are found in various forms, in transcribed taped conversations of stories, everyday conversations, notes, diaries, passing comments, reflections of other's writing, and in literature, film, and drama. Themes may be essential or pervasive as well as incidental or unique.

Essential themes are not generalizations per se, but they are seen with a degree of frequency. In reality, they are a simplification, an inadequate summary or reduction of a notion. Themes are limited in that no single theme can completely unlock the full, deep meaning, the arcane aspects of the experiential meaning of a notion. Individually, a theme by itself, only alludes to, points at, or hints at an aspect of a phenomenon. Together all themes portray a better representation of the meaning of an experience. However, it is important to point out that determining the fundamental meaning of a text is a subjective judgment and could result in an inaccurate meaning (van Manen, 1990).

The methods reviewed here also carry an implicit assumption that a shared common lived experience is revealed. However, it is important to detect where there are differences, as a result of unique experiences and unique responses to those experiences. While essential themes are seen as pervasive and frequent, it is important to note that there might have been less common incidental themes that showed uniqueness in participants and their experiences. Since it is argued that some qualitative methods are intended to capture the individual experience better than quantitative methods, in order to do so, one cannot ignore any "outliers" or extremes reflecting unique aspects of individual experiences.

Van Manen (1990) notes three approaches toward uncovering or isolating thematic aspects of a phenomenon namely, the wholistic or sententious approach, the

selective or highlighting approach, and that used in this study, the detailed or line-by-line approach. All three approaches to thematic analysis were considered for this study, however the detailed reading approach seemed to be most useful for my interpretation of themes, found within the texts of conversations.

In the detailed reading approach, I looked at each sentence or sentence cluster and attempted to determine what a sentence or sentence cluster revealed about physical awkwardness. A systematic process of identifying emerging themes that are contained within phases, sentences and paragraphs was undertaken. A theme may have been embedded within a paragraph or several themes were found within one paragraph. In order to capture the themes, one extracts them by lifting appropriate phrases or singular statements that represent the main thrust of the meaning of the themes. Then one asks what each sentence or sentence cluster seems to reveal about the nature of the phenomenon or experience. The writing and discussion of themes, along with the reading and other research activities is the hermeneutic process.

To determine the value of a theme, one must discover aspects or qualities that make a phenomenon what it is and without the phenomenon could not be what it is. A process of "free imagination variation" helps determine whether a theme is essential or incidental. To accomplish this, one imagines if the phenomenon is the same if the theme is removed from the phenomenon. Does the phenomenon lose its fundamental meaning when it is removed? (van Manen, 1990).

A review of the research and writing on physical awkwardness and DCD was not only useful in assisting in the structuring of questions, for eliciting descriptions of lived experiences during interviews, but was also useful in searching for and identifying

potential themes during the analysis. The information was examined in order to gain an overall impression of the meaning of the experience of physical awkwardness.

In addition to identifying themes and checking with participants for their input, others familiar with physical awkwardness were asked to review the study protocol, the data, thematic analysis, and comment on its believability. Van Manen (1990) refers to this as "collaborative analysis." In this manner, themes are examined, articulated, re-interpreted, omitted, added, or reformulated to generate deeper insight.

The most important aspect of the discussion is the extent to which the findings illuminate the phenomenon of physical awkwardness. The findings are also contextualized as being relative to the situation from which they were drawn. The degree of resonance, truth, or veracity of this research to that found within the literature associated with physical awkwardness or DCD is explored and discussed in Chapter 6, respecting the limitations on the generalization of hermeneutic phenomenology studies. Specifically, the study findings are reviewed relative to the body and the lifeworld existentials (Merleau-Ponty, 1962), the Syndrome of Physical Awkwardness (Wall, 1982), and the Knowledge-Based Approach to Motor Development (Wall, et al., 1985).

CHAPTER THREE

Research and Writing on Physical Awkwardness

"Awkward" Vocabulary

The etymology of the word awkward, meaning clumsy (from the Scandinavian, Icelandic, and Modern English) stems from the following, signifying: in the wrong direction, in a backhanded manner, contrary, perverse, untoward, wrong, ungainly, and difficult (Hoad, 1996; Skeat, 1993). Awkward is described in current dictionaries, also unflatteringly, as clumsy, ungraceful, unhandy, unskillful, bungling, inelegant, or not dexterous (McKechnie, 1983). Synonyms for the commonly used "awkward" and "clumsy" include: uncoordinated, lumbering, gawky, ham-fisted, ham-handed, maladroit, unwieldy, out of one's depth, gauche, inept, and graceless. Closely akin to awkward and clumsy are other emotionally charged words and phrases such as: ill at ease, uncomfortable, embarrassed, self-conscious, discomfited, and discomforted.

Awkwardness is sometimes linked with left-handedness or the French "gauche" along with similar unbecoming words (Coren, 1993). Coren, writing about left-handedness as a syndrome, gave examples of many languages that connect awkwardness or clumsiness to preferences for the left hand. Orton (1937), in one of the first accounts of learning problems in children, wrote of the difficulties of right-handers, performing skillful movements with the left hand and to those children in particular whose unskillfulness extends to both hands. He referred to Galen, the ancient Greek physician and philosopher, who described such children as "doubly left-handed" (1951, p. 190).

The literature on physical awkwardness, clumsiness, and Developmental Coordination Disorder (DCD) and related designations is replete with a variety of

historical and contemporary references, synonymous with awkward. Early expressions include, Colliers "congenitally maladroit" (Ford, 1966), McKenzie's "less-skilled" (1926), and Annell's "motor dysfunction" (1949). Arnheim and Sinclair (1979) cited "play failures", and "physical clumsiness", while Cratty (1994) used "poorly co-ordinated" and "physical incoordination". In some circles the expression "perceptual motor problems" is said to define and explain awkward children (Laszlo, Bairstow, Bartrip & Rolfe, 1988). Denckla (1984) referred to the expression "disorders of motor execution," while "developmental clumsiness" was preferred by Reuben and Bakwin (1968). Medical references cite "dyspraxia" (poor motor planning) and "apraxia" (the inability to perform purposeful movements) without sensory or motor impairment (Cermak, 1985). More derogatory wordings such as "physical illiterate" and "motorically retarded" as well as inappropriate recess expressions such as "motor moron", "klutz", and "spazz" are heard informally, usually on playgrounds or in children's competitive play. More benign idioms such as "all thumbs" or "two left feet" are not uncommon, either self-expressed or assigned by others.

More conventional references to awkwardness include children with: movement problems, movement difficulties, gross motor problems, motor learning difficulties, motor development deficiencies, motor delay, motor lag, motor impairments, motor dysfunction, difficulties in performing basic movement skills; or those who are: poorly-coordinated, less motorically competent, motorically delayed, or developmentally delayed. Clearly, there has been a lack of definitive agreement on what to call those who are awkward during physical activity. Many terms have been criticized as pejorative, degrading, negative, pessimistic, and inappropriate labelling; something socially

constructed, focussing on inability, and incompetence. In the past, some held that awkward movers had some degree of mental impairment, since awkwardness has been associated with cognitive deficiencies (Wall, Reid & Patton, 1990).

If we follow the lead of those who trumpet person first terminology (Sherrill, 1998), we would say "persons (children) with movement problems or difficulties", although this is unclear, imprecise, and ambiguous, because these terms also apply to those with a variety of disabilities. Similar expressions such as "children who display awkwardness during physical activity" are somewhat verbose. Thus, many of the terms and expressions that are associated with physical awkwardness are cumbersome, negative and belittling.

Physical awkwardness, clumsiness, and DCD are the most commonly used expressions in identifying those with movement difficulties. My decision to utilize the term physically awkward (Wall, 1982) seems appropriate, as it appears to be the essential glue that defines and relates to the popular characterizations of awkward and the various terms and expressions associated with it.

Awkwardness Versus Skilfulness: Why Do We So Value Skilfulness in Sport?

Perhaps we can begin to understand the negative connotations associated with physical awkwardness by looking at the way in which we so value skilfulness in sport. Long held historical views favour what is perceived to be the superior, healthy, strong, skilled, athletic, beautiful, and able body, as opposed to one that is inferior, weak, dysfunctional, inefficient, un-athletic, ugly, and disabled. This shows, to some extent, the precursors of contemporary thinking about ability and inability or disability in general, and attitudes towards skilled motor performance and physical awkwardness in particular.

Although physical awkwardness is not always directly equated with disability, impairment, or handicap, it has been associated with these and similar terms (Sherrill, 1998; Shogan, 1998).

Vlahogiannis (1998) argued that throughout history, a healthy, symmetrical, strong, skilled body has always been clearly appreciated over one that is diseased, disproportional, weak, and inefficient. What emerges is a standard of ability, skill, and coordination that is less tolerant of physical inefficiency, functional inefficiency or both. Since early times, an inability to function or meet the expected needs of the community and the norms of society devalued and marginalized disability in various forms.

In earlier times, skills in hunting, fishing, fighting or fleeing from animals or enemies were essential for survival, and the young were socialized early to realize this (Van Dalen, Mitchell & Bennett, 1963). Ancient festivals, ceremonies, and puberty rites were often comprised of physical tasks and tests, many of an extreme nature, that were related to physical skill and prowess. The celebrations provided an informal education, which offered youth the satisfaction of achievement and the opportunity to compete in physical feats of skill and strength. Hero worship and the admiration of the skillful body encouraged others to attempt to achieve the same.

In past times, and to some extent today, the perfect body is seen as balanced (symmetria) and harmonious (harmonia), with ideal proportions being a gift of nature. Fraleigh (1987) wrote that skillful dance, for example, became prized in early Greece as a means to harmonize body and mind, by relating rhythmic movements to the universe's orderly motion. As such, it was used as a means for inculcating these characteristics in not only citizens, but also soldiers and athletes. Skill was connected with a balance in the

world, among other valued qualities. An unskilled body was seen as unbalanced and out of step with nature.

The value of skilled athletic performance stems at least in part from the devotion the ancient Greeks had for open-air athletic exercises, which produced a standard physique of rounded elastic muscles, celebrated in Greek and Roman art and literature (Stevenson, 1998). For example, the play Hippolytus, by Euripides showed the attraction of women for athletic male youth. Females' bodies and skills were also valued at that time, but for other reasons and not to the same extent as males.

Today, fitness clubs, personal trainers, body physique contests, and extreme sports currently offer many opportunities to develop and display the body and its proficiency. Sport heroes are still idolized for their performance of bodily attributes, skill, and coordination. Many of the same physical skills and bodily features, admired since antiquity are still celebrated. Skilled performance has been described as poetry in motion, as a unique type of intelligence (Gardner, 1983). Elite athletes are admired for doing what they do so effortlessly, in order to achieve a desired outcome.

The very fact that we value skill in sport so highly, suggests that lack of skill, such as is evident in physical awkwardness, is devalued, by default. This is seen, on a regular basis, in informal playground activities that require a degree of skill as well as in elite sport performances that demand even higher levels of proficiency. The importance that society gives to proficiency in physical activities at all levels of participation and the impact this value has on those who are physically awkward cannot be ignored. From early childhood on we trumpet the importance of performing a motor skill correctly, and take notice when it is not.

Possible Causes, Characteristics, and Prevalence of Physical Awkwardness

Difficulties with coordination are said to stem from many likely causes. The words "possible" or "may" often precede the range of attributes associated with the condition of physical awkwardness. For example, Missiuna (1999), focussed on sensory sources or central cognitive processes, as a cause, namely, difficulties in: analysing, interpreting, and integrating environmental sensory information; selecting the appropriate motor action; sequencing individual motor movements of the task; sending the correct message to produce a coordinated action; or integrating all of theses processes to control a movement. Other speculated causes of physical awkwardness include biological and genetic anomalies, the effects of toxins, anoxia, minor forms of cerebral palsy, trauma during or after birth, birth order, activity deprivation, and parental neglect, to identify a few (Sugden & Wright, 1998). It is ironic that a condition with claims of an unknown etiology, offers so much literature speculating on its possible cause.

Physical awkwardness is often referred to as a condition, which is revealed and expressed in many ways, in the context of poor motor performance, as well as in social and behavioural manifestations (Sugden & Wright, 1998). Possible characteristics associated with physical awkwardness are numerous and varied, lending credence to the idea of its heterogeneity. It is possible that children who are physically awkward may have difficulties with: fluid movement in sport and daily activities, both gross and, or fine motor skills, uneven development, learning new motor skills, fast paced open activities, and balancing and accuracy tasks. Additionally, such individuals may experience a host of associated emotional and social problems, purportedly as a consequence of their awkwardness (Missiuna, 1999; Sugden & Wright, 1998).

The incidence or prevalence of children who are physically awkward is considered to be between 6 and 15 percent of the population (Henderson & Hall, 1982; Wall, Reid & Patton, 1990). However, this is dependent upon the assessment instrument utilized. It is difficult to determine the exact rate of occurrence of physical awkwardness, as it is freely acknowledged that there is no gold standard for assessment. Different tests yield different profiles and rates of identification (Causgrove Dunn & Watkinson, 1996; Henderson, 1993; Sugden & Wright, 1998). Various assessment instruments are not constant in identifying physical awkwardness. Different cut-off points "have not been consistent between studies, resulting in large variability in the rate of DCD reported" (Piek & Edwards, 1997, p. 56).

The findings of Causgrove Dunn and Watkinson (1996) are an illustration of the imprecision of assessment instruments. They investigated the identification of physically awkward children using the Test of Motor Impairment (TOMI), now the Movement Assessment Battery for Children (MABC), with respect to problems of gender bias. Their findings indicated that an atypically high proportion of girls were identified as physically awkward. The authors suggested that the TOMI might favour boys, in particular with the inclusion of ball skills as a test item. The authors felt that the high rate of identification of girls might be in part due to practice deficits, a result of lack of instruction and experience in ball skills.

Other studies have reported mixed results in identifying the distribution of boys and girls with DCD (Gorden & McKinlay, 1980; Maeland, 1992). Smits-Engelsman, Henderson, and Michels (1998) support the idea of inconsistencies in identification seen in "children who failed one test and passed the other" (p. 700). It seems that the type of

assessment instrument, the culture and environmental context under which it is administered, and gender have all contributed to identification discrepancies and a lack of agreement in assessment procedures as to who is identified as awkward (Keogh, Sugden, Reynard & Calkins, 1979; Larkin & Hoare 1991, 1992; Miyahara et al., 1998).

Origins of Research on Physical Awkwardness

Cratty (1994) identified three historical trends within the literature, related to the study of physical awkwardness and similar conditions. The first period began hundreds of years prior to the twentieth century, when subtle neurological-behavioural dysfunctions were largely ignored. During that time, investigations centered on relationships between diagnosed brain damage and motor behaviour. For centuries attempts have been made to identify causes, characteristics, and cures for various movement abnormalities (Cratty, 1994; Galen, 1951).

The second period beginning in 1910, saw studies of apraxia and dyspraxia done by medical and developmental psychology specialists on patients in their clinics. From 1940 to 1960, according to Cratty, motor incoordination came to be viewed as inseparable from learning disabilities, perceptual dysfunctions, and hyperactivity in school children. Expressions such as minimal brain dysfunction, developmental delay, and minimal cerebral palsy were, and still are commonly used labels in reference to children who are physically awkward. The third period, from about 1960 to the present, has seen focused and comprehensive inquiries of physical awkwardness from a variety of perspectives, including that done by physical educators, in particular, scholars in motor development and adapted physical activity (Causgrove Dunn & Watkinson, 1994; 1996; Marchiori, 1987; Meek, 1987; Paton, 1986; Taylor, 1990; Wall, 1982; Wall, Reid & Paton, 1990).

The work of Orton (1937) represented the early beginnings of a more scholarly approach to the study of movement disorders in children and youth. While Orton studied children's speech and movement problems from a medical perspective, he was one of the first to notice that awkward children were likely to evidence emotional problems such as feelings of inferiority. He reported mixed and somewhat contradictory scenarios for those with movement difficulties. On the one hand he noted:

> they are cautious in undertaking new motor activities.... They all show as they grow older a marked feeling of inferiority but it must be borne in mind that in all athletic activities they are inferior so that such feelings are closely akin to insight (Orton, 1937, p. 139).

On the other hand, Orton also claimed that some children with motor difficulties were very persevering and subsequently successful in their attempts to overcome their "handicap." He noted that, "the apraxics occasionally are apt at scholastic work and gain a variable degree of compensation from this. They are often socially acceptable to the group in spite of their gawkiness and apparently are not inherently seclusive" (p. 139). Orton, in describing the feelings of one patient in particular, reported that, "a question about tennis brought up some obviously rather painful recollections of experiences on the court but the child was prompt to volunteer at this stage that she had by persistence learned to sew quite well" (p. 193-194). Orton's work represents early evidence for the heterogeneous nature of physical awkwardness.

It should be acknowledged that physical awkwardness and related designations have been studied mostly as a condition of childhood, not adulthood. References to the study of awkwardness in adults are sparse. Gallagher (1970) looked at motor learning

characteristics of low-skilled college men. Langley (1995) examined the experience of university students' skill learning, some of who were self-proclaimed as awkward, and Heath (1944) studied military implications of soldiers who were physically awkward. Longitudinal studies, such as that by Knight, Henderson and Longmans (1992) and Losse and colleagues, followed clumsy children through adolescence (1991). However, by and large, the majority of studies on physical awkwardness have been done with young children.

Diversity of Research on Physical Awkwardness

There is a substantial depth and diversity of research and writing on physical awkwardness, clumsiness, dyspraxia, movement difficulties, and DCD, from a variety of perspectives, primarily educational, behavioural, rehabilitative, and medical. Physical awkwardness and its aspects have been investigated by researchers from many areas of specialization, including physical education, special education, learning disability, motor development, adapted physical activity, motor learning, biomechanics, and occupational therapy, as well as neurology and other medical specialities.

The research on physical awkwardness is centered primarily around: definitions and descriptions of the condition; its incidence or prevalence; possible causes; possible characteristics; assessment; comparative studies; sub-group identification; longitudinal studies; intervention, remediation, and programming; theory building; as a syndrome of behaviours; and on its consequences, in particular those associated with emotional and social, or affective behaviours.

The following specifically shows the broad scope of research on physical awkwardness. Causgrove Dunn and Watkinson (1996); Doll-Tepper (1989); Keogh,

Sugden, Reynard and Calkins (1979); Maeland (1992); and Stott, Henderson and Moyes (1986) all have looked at physical awkwardness from the perspective of identification, assessment, or diagnosis. The causes or etiology of physical awkwardness have been investigated by Gubbay (1975); Hall (1988); Lazarus (1990); and Stephenson, McKay and Chesson (1990). Characteristics or marker variables were compared by Haubenstricker (1982); Gallagher (1970); Taylor (1990); Sherrill and Pyfer (1985); and Wall (1982). Perceived physical competence has been studied by Causgrove Dunn and Watkinson (1994). Participation levels and activity patterns have been researched by Bouffard, Watkinson, Thompson, Causgrove Dunn, and Romanow (1996); Clifford (1985); and Levinson and Reid (1991). Perceptual-motor relationships and abilities were described by Dare and Gordon (1970); Laszlo, Bairstow, Bartrip and Rolfe (1988); and Williams, Woollacott, and Ivry (1992). Hall (1988); Keogh and Oliver (1982); Milne, Haubenstricker, and Seefeldt (1991) among others, have trumpeted the value and importance of intervention. In light of this range of research, Sugden and Wright (1998) wondered whether if it will ever be possible to have a cohesive theoretical account of the condition. It is difficult to grasp a unified sense of the nature of physical awkwardness when one considers the diversity and perspectives of the research conducted.

Identification of Physical Awkwardness

Since the early motor tests developed by Oseretsky, in the 1920s, and by many others since, there has been a proliferation of assessment instruments designed to evaluate children's fine and gross motor skills. Gallahue and Ozmun (1995) estimated that there are hundreds of formal and informal, published and unpublished tests related to the assessment of motor skills.

Sugden and Wright (1998) noted that with respect to the identification of DCD "a parent may first notice that a child is not achieving various motor milestones in the same ways as siblings or friends; teachers may notice that a child is having difficulty forming letters and in catching in PE" (p. 35). They called for investigations beyond motor tests that also include "the ecology of the child's development" (p. 94). They recommended asking questions which are of particular interest to this study, such as: what kind of temperament does the child have; what other compensatory abilities does she or he possess; how has the condition been recognized, viewed, and managed at home; and what support mechanisms have been available at school?

Missiuna and Pollock (1995) argued that the judgment of teachers, parents, and the children themselves should be sufficient assessment to support the need for intervention. Missiuna and Pollock (1995) felt that teachers alone were capable of identifying physical awkwardness, when provided with adequate information on observation. Henderson and Hall (1982) echoed the conclusion that "the primary recognition of motor impairment might be safely left in the hands of teachers" (p. 458). Since teachers are in close contact with children in schools, they are well placed to take a more active role in identification.

Missiuna and Pollock (1995) made reference to the need to use a variety of information sources and methods to gather data when assessing children. Sources include previous records, biographical and anecdotal information from parents, caregivers, teachers, and information from the child. "The need exists for information from various sources to be woven together so that the final tapestry is integrated and understandable" (p. 4). However, the input of the physically awkward performer in the identification of

awkwardness has not been evident.

Some insist that a comprehensive assessment should include consideration of the interplay between the child and the environment or a contextual approach to assessment used to create a frame of reference for the interpretation of data collected (Missiuna & Pollock, 1995). Keogh, Sudgen, Reynard and Calkins (1979) also called for both quantitative performance measures and qualitative observations, administered by qualified physical educators, but without providing details.

While there have been references to the consideration of the feelings of the person who is physically awkward, during assessment and intervention, dating back to Orton (1937), nothing has been located which utilizes the subjective feelings of the individual as part of the assessment process. The potential for including the thoughts and feelings of the individual, a form of self-identification, is an area that currently remains largely unexplored, but may well be a potential consideration for further studies on observation, assessment, identification, as well as remediation.

Awkwardness as a Syndrome

The negative repercussion of physical awkwardness has resulted in the speculation of various syndromes of behaviours associated with it (Geuze & Borger, 1993; Losse et al., 1991; Marchiori, 1987; Meek, 1987; Paton, 1986; Wall, 1982; Wall, Reid, & Paton, 1990; Wall & Taylor, 1984). Meek and Sugden (1997) spoke of a syndrome of concomitant behaviours coupled with physical awkwardness that begins to have increasingly detrimental effects in the context of the performance of physical activity.

Many researchers have referred to various syndrome-like behaviours. Wall (1982), in particular compiled this into a Syndrome of Physical Awkwardness, a

hypothesized description of behaviours and affective consequences of awkwardness during physical activity. This is all relative to a culture that highly values sport proficiency, especially among children and youth. Additionally, movement skill proficiency is influenced by "the performance expectations of significant others such as siblings, parents, teachers and peers" (Wall, 1982, p. 254).

Wall (1982) first proposed the "awkwardness syndrome" along with a range of associated behaviours, based upon observations of children participating in the University of Alberta Motor Development Clinic. Some children exhibited "a cluster of behaviours which stem from their inadequate motor performance" (p. 255). Wall cited work by Gordon and McKinlay (1980), Walton (1961); and Whiting, Clarke, and Morris (1969) to support his proposed syndrome of behaviours. Subsequently others (Causgrove, 1987; Paton, 1986; Taylor, 1984; Taylor & Clifford, 1985a, 1985b; Wall, Reid & Paton, 1990; Wall & Taylor, 1984) have all written in more depth about the Syndrome of Physical Awkwardness.

Wall (1982) claimed that a lack of motor skills in play and games environments is the most significant feature of the Syndrome. He stressed the significance of the fact that the physically awkward child's motor performance is open to public evaluation by others. As a result of inept motor skills, the awkward performer is ridiculed. Consequently, Wall predicted that, "in time, the child's peers label him or her as clumsy and exclude him or her from group play situations" (p. 255). Eventually, due to discouragement from others' negative reactions, the physically awkward child further withdraws from group physical activities.

The child's lack of motor skills, minimal enjoyment in physical activities and

social difficulties within play situations combine to create a disinterest in physical activity and a corresponding low level of physical fitness" (p. 255). Wall also declared that over time, increased skill deficiency also occurs. In addition, Wall mentioned that the physically awkward child's personal happiness and general development are also influenced by this awkwardness.

In later writing on the Syndrome, Wall and Taylor (1984) spoke of the problems of lack of participation in physical activity, leading to practice deficits. Concurrently, social interaction difficulties and "unhappiness in play situations ... result from physical awkwardness" (p. 160). Taylor (1984) in an additional account added that a downward spiral of decreased self-esteem continues the avoidance of physical activity.

Taylor and Clifford (1985a) in the most comprehensive depiction of the Syndrome of Physical Awkwardness located, cited that poor motor skills, in turn lead to increased motor learning difficulties. They indicated, that this is all accompanied by a lack of motivation, social isolation, rejection and behavioural difficulties, namely aggression. Taylor and Clifford (1985b) subsequently included the possibility of reduced self-confidence and disruptive behaviours also arising within the syndrome of behaviours.

Clifford (1985) presented the notion that the Syndrome might also include such characteristics as a tendency towards being overweight, having few or younger playmates, and a preference for individual as opposed to group activities. However, she acknowledged that such information (like most accounts of the Syndrome) has not been systematically collected. Causgrove (1987) in her review of the Syndrome focused on self-confidence and the "negative psychological and social consequences" (p. 12). Taylor (1990) also referred to the resulting behavioural problems associated with awkwardness,

but without elaboration.

The consequences of the syndrome of physical awkwardness is described aptly by Causgrove (1987) as follows:

> The delay in motor development ... can generate negative psychological and social consequences; the development of a low level of self confidence and self-esteem in addition to rejection by their peers ...[which]... may cause ... physically awkward ...[children]... to exhibit a pattern of disruptive behaviour in an attempt to mask their movement difficulties" (p.12).

The perceived negative experiences of students who are physically awkward may foreshadow the onset of a syndrome of behaviours, which ultimately set such students apart from their peers. As the Syndrome suggests, this is mainly due to feelings associated with repeated failure to learn and perform basic movement and sport skills, particularly in play and games situations. This withdrawal and avoidance, for some, is purported to be an eventual outcome of the negative physical activity experience.

Avoidance tendencies may be masked by overt misbehaviour, or social withdrawal. According to Taylor, "peers tend to reinforce these behaviours by rejecting the children who cannot perform" (1984, p. 26). Eventually, self-esteem suffers and the spiral continues. Taylor also wrote about the plight of the experiences of some students who are physically awkward in school physical education, and wondered as to "why they hate physical education" (p. 26).

However, as stated, much of the Syndrome is speculative, as it has not been empirically tested to the extent it should in order to be used to confidently make these assertions. The assumption is that it applies to all members of this population. Limited

testing on selected aspects of the Syndrome of Physical Awkwardness has been conducted (Causgrove Dunn & Watkinson, 1994; Meek, 1987; Paton, 1986). For example, Paton (1986) looked at the fitness performance of physically awkward children. He found that, "clearly, physically awkward children are quite unfit" (p 102). However, he concluded by saying that further research needs to done in an attempt to replicate his findings and "confirm that physically awkward children have a low level of physical fitness" (p. 103). Meek (1987) found that physically awkward children had a more negative attitude towards physical activity than those who were not identified as awkward. All in all, few of the outcomes predicted in the Syndrome of Physical Awkwardness have been fully investigated.

Much of the research on physical awkwardness or DCD has been conducted on groups, aggregates and not necessarily confirmed in individuals. No one really knows for sure how an individual deals with the environmental circumstances that have an impact on his or her physical awkwardness, or how the physical awkwardness influences his or her feelings and behaviour. In fact, Sugden and Wright (1998) challenged the assertion that the collection of symptoms described along with DCD, truly represents a distinct syndrome. In-depth conversations with students who are physically awkward would contribute to the research that has been conducted. It is important to note that, regardless of the various assumptions regarding the syndrome of behaviours associated with physical awkwardness, the heterogeneity of behaviours described, suggest that each individual will exhibit a personal profile of feelings, cognitions, and actions.

<u>So How Does One Cope with Physical Awkwardness?</u>

It has long been recognized that physically awkward children exhibit a range of

behaviours during physical activity situations. Gubbay (1979) cited a number of important observations on the emotional and social problems that physical education and sport bring to children who are clumsy. He wrote:

> compulsory sporting and gymnasium periods are anticipated with increasing apprehension and a child may repeatedly invent ingenious excuses such as illness and other dispositions to avoid being the butt of ridicule by his peers. When involved especially in team ball games, his ... [sic] ... sense of self-deprecation may be heightened by the failure of his team caused by his fumbling and inaccurate throwing. Perhaps his only recourse might be to act the fool as a cover in order that others might think he is not really trying his best (p. 44).

Gubbay (1979) also noted that developmental clumsiness may also result in social difficulties and inactivity. "A sense of failure and frustration besets the clumsy child who may have to content himself with television despite parental pleas to interest himself more in physical activities" (p. 44). Gubbay described the child who would rather read a book alone in his room than play ball with his friends in the park, would likely withdraw even further from contact with peers.

During motor skill testing, some students exhibit suspect behaviours such as, distractibility, restlessness, shyness, and dependence (Bracken, 1983; Paget, 1983; Weeks & Ewer-Jones, 1983). Stott, Henderson and Moyes (1986) described work on systematic observations of children's coping styles when they failed to pass tasks on a motor test. Some children appeared to be masters of disguise, as they devoted a great deal of thought, time, and energy to avoiding the test items and their exposure to public scrutiny. Stott, Henderson and Moyes also pointed out that some children conceal their movement

difficulties by deliberately engaging in disruptive behaviour, while other children are inappropriately identified as clumsy because of their disruptive behaviour. It is difficult to say, without asking, if the children who exhibit negative social behaviour are uncomfortable with the test, the tester, the task being tested, or their physical awkwardness, or something entirely different.

Cratty (1994) reported some interesting clinical observations of obvious and subtle compensations and avoidance strategies in children who are physically awkward, that were reported by parents, clinic workers, and teachers. Children used three different types of strategies, in reaction to physical awkwardness. Firstly, a child may attempt to totally avoid situations where physical participation is required. A second group of behaviours were seen on the playground, in physical performance situations where the child, who was not successful at avoidance, found other ways to not actually participate. Thirdly, the child sought ways to modify his or her performance and performance demands so that there was a chance to succeed, but on his or her own terms.

Various tactics were seen when awkward children were confronted with specific demands requiring them to perform physically. Cratty (1994) listed five categories of behaviours, used to avoid physical activity, namely: school phobias; learned helplessness and infantilization; comedic and verbal behaviours; aggression; and a retreat into academia. Specific behaviours related to the phobias include: throwing temper tantrums, claiming fatigue, declaring illness, becoming nauseous, as well as showing other measurable medical symptoms, along with expressing the desire to become the teacher's helper or volunteering for alternate tasks, as a distraction to avoid participation. Displays of learned helplessness and infant-like behaviours are seen in children who give up rather

easily, show immature play patterns, opt to play alone, or with younger children, or demonstrate other age inappropriate behaviours. These displays of behaviour were sometimes accepted and indeed, inadvertently encouraged by parents, caregivers, teachers, and peers as "cute".

Comedic behaviours and excessive verbalization are sometimes exhibited in an attempt to be noticed for other things, rather than physical awkwardness. For example, constantly attempting to be funny, making fun of others, displaying bravado, making unrealistic claims of abilities, setting improbable goals, making inappropriate and irrelevant comments, or concentrating excessively on the rules, such as always volunteering to officiate, are evident in some children. Aggression is sometimes revealed in excessive physical or verbal hostility, frequent swearing, bullying, or picking on weaker children, sometimes in response to frustration and discouragement.

Some poorly coordinated children may find ways to express themselves other than physically. They may seek high academic recognition, become overly fond of their computers, have passive hobbies, or become experts, at an early age, about some obscure topic or subject.

There is good evidence that physical awkwardness in children is not static, nor benign but involves a broad spectrum of behaviours used to avoid exposure. Associated risks of lowered achievement, increased behaviour disorders, and poor self-concept are commonly cited outcomes of physical awkwardness (Henderson & Hall, 1982; Sugden & Wright, 1998).

Research on the Socio-emotional Correlates of Physical Awkwardness

The research on physical awkwardness centres upon many areas including

perceptions, cognitions, emotions, feelings, attitudes, image, competence, confidence, esteem, efficacy, worth, acceptance, interactions, motivation, aspirations, success, enjoyment and concepts of self. The literature on physical awkwardness includes studies about cognitions and perceptions of competence, as well as what may be termed pure affect studies.

There is a fine line between cognition and affect, as feelings are naturally associated with cognitions, and are based upon experience. Many theories include cognition and associated affective responses (Bandura, 1986, Harter, 1985; Weiner, 1985). Observable behaviours may be the expression of a subjectively experienced feeling state or emotion such as sadness, anxiety, fear, and anger, among other expressive behaviours that are tied to personal experience. The experience of affect may be subtle or obvious, slight or intense, as well as transitory or pervasive.

Aside from the pioneering work of Orton (1937), early studies by Brenner, Gillman, Zangwill and Farrell (1967) stressed the emotional and social differences associated with clumsiness, not unlike Reuben and Bakwin (1968) who noted that "a fairly severe emotional overlay, ... feelings of inadequacy and loss of self-esteem are prominent.... Exclusion from games requiring motor skill is another source of unhappiness. Furthermore, the awkward child is a frequent butt for teasing" (p. 607). Reuben and Bakwin cited the stereotypical example of a case study of one boy who while awkward and insecure, had friends with whom he played ball, but was usually made the umpire.

Gordon (1969) continued the early dialogue on clumsiness and possible affective concomitants by agreeing that there is a marked emotional cost to the social consequences

of it. Essentially, based upon teachers' comments, he confirmed that such children are unhappy in sport and school. Gordon recommended the development of a screening test and the use of professionals to help such children minimize the social and emotional consequences of the condition, along with the "prescription" of skill instruction to benefit them.

Dare and Gordon (1970) in reporting a number of case histories of clumsiness strongly argued that movement difficulties "almost inevitably lead to the child's failure and consequent disappointment and frustration at school" (p. 178). They went on to say that "many of these children have emotional and behavioural problems such as inability to concentrate, rapid swings of mood and unrestricted behaviour generally" (p. 178). Many of these claims are based solely upon brief comments of teachers, parents and the students in question.

In another type of investigation on the significance of physical awkwardness on affective measures, comparisons were made among children with various motor behaviour problems. Stott, Moyes, and Henderson (1972) reported that emotional disturbances such as hostility, socially inappropriate passivity, and impulsivity were over represented among physically awkward children, when compared to other groups of children. Hostility scores and other measures of socially inappropriate behaviour were found to be associated with motor impairment. However, it is possible that the data were obtained from children already labelled as emotionally unstable. So awkwardness and emotional social difficulties may not have necessarily been linked in terms of causality.

Further work by Henderson and Stott (1977) reinforced the idea that clumsiness is an experience of "rejection by adults, unpopularity with peers, frequent truancy, failure in

other school subjects, and feelings of depression, inadequacy, aggression and unhappiness" (p. 38). In describing their test of motor impairment, Henderson and Stott reported a desire to minimize "perceptual, cognitive and emotional factors which might affect performance" (p. 39). The extent to which they were successful in achieving this is unclear as no detail is provided as to how this is accomplished. They simply recommend avoiding "tasks which might approach the limits of the child's ability or evoke disturbing emotional reactions" (p. 39).

The above is not unlike work by McKinlay (1978) who, in reference to affect in clumsy children stated that, their "predicament, which often includes gauche behaviour and ineptness at games, with consequent difficulty in making friends, can lead to loss of self-confidence to an extent that such children will not attempt activities of which they are capable" (p. 494). Gubbay (1978, 1979) and Knuckey and Gubbay (1983) also reported social behaviour problems associated with awkwardness. However, the Gubbay (1979) study also suggested that, "only a small proportion of the clumsy children are likely to be affected by their disability after leaving school" (p. 12). This shows the inconsistency of reports on the emotional and social consequences of physical awkwardness.

Studies, during the final quarter of the twentieth century, by researchers such as Abbie, Douglass, and Ross (1978) and Hulme, Biggerstaff, Morgan, and McKinlay (1982) have all supported the contention that there are connections among physical awkwardness, low self-esteem, emotional, and social problems. Other research and writing on affect and awkwardness conclude that there are similar relationships (Cratty, 1994; Henderson, May, & Umney, 1989; Kalverboer, de Vries, van Dellen, 1990). Later

studies have been on self-esteem (Henderson, May, & Umney, 1989; O'Dwyer, 1987; Shaw, Levine, & Belfer, 1982; Van Rossum, & Vermeer, 1990), attributional style (Henderson, May, & Umney, 1989), and personality characteristics (Kalverboer, De Vries, & van Dellen, 1990).

Causgrove Dunn and Watkinson (1994) in essence tested part of the Syndrome of Physical Awkwardness, related to its relationship among movement competence, perceived competence and the changes regarding grade and severity of physical awkwardness. They found that, with respect to the relationship between perceived physical competence and physical awkwardness, gender and severity of awkwardness were significant predictors of perceptions of competence, with males reporting higher perceptions. But interestingly, after grade 3, they saw that older awkward children have more positive perceptions of competence than younger awkward children. In other words, in spite of the logical assumption that perceived competence would decrease with age and severity of physical awkwardness, it did not hold. Causgrove Dunn and Watkinson did not address the impact of intervention in that study, but it is possible that pedagogically sensitive instruction might well have an influence on perceived competence. This is but one example of the anomalies in findings that are evident in the study of physical awkwardness and affect.

Causgrove Dunn and Watkinson (2000) have also argued that decisions by children with DCD, to participate or withdraw from participation in physical activity, are partially a result of self-perceptions and perceptions of the context of the activity. "Decisions and behaviours are mediated by expectancies and values in a particular activity, by conceptions of ability and competence, and by motivational orientations that

may be moderated by perceptions of the climate and the goal structure of the activity" (p. 26).

A study by Schoemaker and Kalverboer (1994), most relevant to this review, also examined the emotional concomitants of clumsiness in children. They found that children who are clumsy judge themselves as less competent and are more anxious than children without movement problems. However, as a result of intervention programs, some participants experienced success and feelings of accomplishment, increased feelings of well-being, and a desire to continue participation. Therefore, one could argue that intervention has multiple benefits.

It is interesting to note that in the Schoemaker and Kalverboer study, no relationship was found between severity of clumsiness and affective problems, except in one of their sub-groups. Signs of socially negative behaviour were less common in the children who were most severely clumsy. Children who were found to be awkward were more introverted, more serious, more insecure, more isolated, less happy, and had difficulties making contact with other children (Schoemaker & Kalverboer, 1994). Schoemaker and Kalverboer also found that the children themselves admitted awareness of the affective problems. As in some other studies, participants rated their self-esteem in relation to physical abilities, as lower than that of their peers (Schoemaker and Kalverboer, 1994; Henderson, May, & Umney, 1989; O'Dwyer, 1987; Shaw, Levine, & Belfer, 1982).

The studies by Schoemaker and Kalverboer (1994) and others cited confirmed previous and later conclusions, that awkwardness is not an isolated problem, but it is associated with various social and affective problems in children as young as age six.

Others agree that children who are physically awkward, rate themselves as less accepted by peers (Shaw, Levine, & Belfer, 1982). Children who are physically awkward are said to show significantly more signs of anxiety during the performance of movement tasks. However, this is a general statement that deserves further study.

Henderson & Barnett (1998) made reference to "the pre-school child whose social adjustment is jeopardized by the inability to play with peers, or the high achieving teenager who attempts suicide because of social isolation" (p. 461). The reference to attempted suicide may be an exaggerated effect of the experience of awkwardness, as it is quite possible that such a drastic action may well be tied to other unrelated variables. However, who can say with certainty that this extreme response is not a possible outcome for someone experiencing physical awkwardness?

Affect and physical awkwardness is also researched in longitudinal studies, which have been conducted by Cantell, Smyth and Ahonen (1994), Losse and colleagues (1991), Murray, Cermak and O'Brien (1990), Geuze and Borger (1993), among others. Social factors, school performance and attitude towards physical education, were also observed longitudinally by Adler (1981, 1982).

According to the longitudinal study by Losse and colleagues (1991), along with the general lack of motor proficiency, "there are quite worrying comments from the pupil interviews concerning their experiences and the help or lack of it they received" (p. 86). Brief comments, cited by subjects, during interviews were included in Chapter 1 of this study. While overall the results were more negative than anticipated by the authors, it is interesting to note that in one case, due to supportive parents and teachers the child was "still highly motivated to learn new skills" (p. 86). The Losse study conclusions are

mixed in that they indicated that the clumsy group did not perceive their social status to be any different from other groups, however they did take part in fewer out-of-school social activities.

Cantell, Smyth and Ahonen (1994) also conducted a longitudinal follow-up study on a group of children, previously diagnosed at age 5 as having delayed motor development. They found that the adolescents with stable motor problems had fewer hobbies and pastimes, however, "they did not have poor opinions of their social acceptance or self-worth" (p. 115). It seems that the experience of physical awkwardness has various influences on different people in different situations.

Henderson and Barnett (1998) claimed that longitudinal studies of children with DCD have contributed to a better understanding of the natural history of it, demonstrating that the manifestations are not merely transitional problems, devoid of personal, social, and educational consequences. Sugden and Wright (1998) also called for more longitudinal as well as single-case studies to examine how well those children with DCD improve over time. It seems that learning from those who do not improve is also important. In any case, coming to an understanding of the individual experience of physical awkwardness may well be an important addition to the literature on affect. Sugden and Wright (1998) felt that examining a number of developmental factors over long periods of time would allow an examination of mediating variables that influence the individual's development and "provide a holistic picture of the child" (p. 85). Notwithstanding this, it seems that the story of physical awkwardness is incomplete without the person perspective.

The diversity of investigations and lack of consensus in nomenclature, definition,

etiology, manifestations, intervention, and prognoses have not prevented the completion of a wide spectrum of research on social-emotional issues, from a variety of areas of specializations. However, none of this research is primarily from the perspective of the person. Children have been studied in groups, using paper and pencil tests of social-emotional variables, with some individual comments on feelings collected unsystematically as an "extra" to the quantitative work. At the same time, speculation on the consequences of physical awkwardness, based largely upon anecdotal comments by teachers and parents, has posited a range of emotional and social repercussions for students who are physically awkward.

The basis for the claims of inappropriate social behaviour linked to physical awkwardness have also come from statistical methods that have been employed on aggregate populations to identify correlations. The extent to which this is generalizable is uncertain. It is obvious that more study is necessary in order to get an unambiguous picture of the relationship of emotional and social accompaniments of awkwardness.

It is also obvious that there have been several approaches to the exploration of the emotional and social outcomes of physical awkwardness, with diverse findings. For example, comparative studies of self-concept between children who are and are not labelled as physically awkward, showed that those termed awkward reported more sadness, more fatigue during physical activity, considered themselves weaker, and would rather watch than play games (Cratty, 1994). However, it is interesting to note that with respect to females, Cratty commented that there were no significant differences in these factors in girls termed awkward, compared to those not identified as such.

The connection between emotions, feelings, and physical awkwardness is

uncertain. The interactive relationships may be due to the presence of general types of neurological impairments that may influence both motor and emotional variables but at the same time are not necessarily related to each other. The correlations, causal relationships and direction of the causation, need to be considered further.

The Knowledge-Based Approach to Motor Development

Wall, McClements, Bouffard, Findlay and Taylor (1985), have formulated a Knowledge-Based Approach to Motor Development with implications for physically awkward performers. The approach is founded upon work in cognitive science, cognitive development, information processing, and motor schema. However, the prominent mediating role of affect in the model makes it particularly relevant and appealing to include in this review.

The Knowledge-Based Approach attempts to form a basis for considering "the personal and environmental obstacles faced by physically awkward children in the acquisition of culturally normative skills" (p. 28). It takes a developmental perspective presenting a holistic view of skilled action stressing the interaction of cognition, actions, and feelings. It is comprised of two major aspects, structural capacity (genetic endowment) and various kinds of knowledge about action.

Knowledge about action includes declarative, procedural, and affective knowledge. Declarative knowledge is factual and conceptual information about what a skilled action involves. Procedural knowledge means knowing how to apply skills and processes to the performance of a motor task. Both declarative and procedural knowledge have higher decision making metacognitive knowledge and skills associated with them. People acquire knowledge about action "by continually interacting with their environment

and the people in it" (p. 31). Knowledge about action is typically acquired throughout one's life. There is an overlap among the various components of knowledge about action, reflecting their complex relationships.

According to Wall and colleagues (1985) affective knowledge about action, is comprised of an individual's subjective feelings, expressed as judgments about action, that are acquired in various activity situations. The development of affective knowledge is based upon the quality of activity experience one has. Affective knowledge about action, a result of cumulative successes, contributes to higher self-efficacy, self-concept, and sport confidence and competence in children to act more independently in their world. Affective knowledge about action also is a major influence on the acquisition of procedural and declarative knowledge. Failure experiences, on the other hand, also have an impact on affective knowledge and over time, negative self-concept and learned helplessness (Wall et al., 1985). Thus affective knowledge about action can also be negative.

Contrary to the positive outcomes of repetitive successful movement experiences, learned helplessness is said to follow repeated failure in the performance of motor skills and is the result of persistent feelings of being unable to influence or bring about a positive effect. Learned helplessness is described as a lack of motivation and persistence in the face of difficulties, and a general apathy to challenging movement situations. "Negative feelings of competence and confidence can have major effects on the motivational state of a learner" (Wall et al., 1985, p. 30).

Wall and colleagues concluded that, "the most striking characteristic of physically awkward children other than their lack of physical proficiency, is their difficulty in the

affective domain" (p. 38). Their lack of interest in physical activity, low self-esteem, and lack of confidence and competence in movement situations, and lack of persistence in challenging movement situations reflect their inadequate metacognitive knowledge and poor motor skills. This work has implications for the consideration of one's feelings associated with the personal experience of physical awkwardness.

"God Damn! I Hate this Game" and Other Stories of Awkwardness

There is not much detail reported on real life stories of physically awkward individuals' feelings. A few published accounts have included brief comments attributed to individuals, but they do not represent a large proportion of research in the area. There are many descriptions by researchers, teachers, or parents of social and behavioural characteristics, purportedly in response to the physically awkward experience. When children's comments about physical awkwardness have been reported, their brief remarks barely allude to, or point at their experience and associated feelings and assigned meanings.

Langley (1995), examined the personal experience of student skill learning in a bowling class, from the learner's narrative perspective of storied experiences. Of the four narrative accounts he selected, two are of individuals who appear to qualify for the present study. For example, Langely identified "Dan" as a long time lower-skilled bowler who was unable to profit from instruction. In the beginning, Dan stated "I enjoy bowling with friends and wish to improve." (p. 121). Eventually, his reaction to repeated poor performance was to withdraw and express an increasingly stronger disinterest in learning bowling. Self-described as awkward and clumsy, he felt he was "in a constant state of confusion.... I'm so concerned about my ball going behind my back and I don't

concentrate well" (p. 122). Finally, Dan gave up trying the "hook ball", saying, "it does not work for me.... I get nervous and I never bowl the way I want to" (p. 122). He felt he had problems "that I only seem to have when ... [the instructor] ... is watching" (p. 122). Dan's frustration, with no improvement in his bowling performance throughout the course, is captured in the following statements:

> I don't feel like I've learned much in this class so far.... Bowling is a frustrating sport that takes too much patience for me to handle.... Every time I come here I regret paying the money I paid to be in this class.... God damn! I hate this game (p. 122).

Watkinson, Dwyer, and Nielsen (2000), interviewed "Tristan" in a study of playground activities of children. Tristan reveals his feelings on various aspects of recess play and games. He wonders about always being "it" in tag by musing, "if one person's it all the time ... and one person's chasing a whole bunch of people for the whole game, it's not very fun, like would you like being it ... the whole time?" Tristan describes another child's frustration at being it by saying, "he can't run very fast, and he gets tagged and then he just sits and sobs" (Watkinson, Dwyer, & Nielsen, 2000).

On the importance of team play, Tristan mused that:

> if one person is bad on the team, because they don't know what to do, then everyone else basically won't have any ... [fun] ... It's like having a puzzle with one piece missing, because the whole team has to be good and work together and have qualities like be able to work in harmony (Watkinson, Dwyer, & Nielsen, 2000).

On the significance of skill in games, Tristan concludes, "if somebody doesn't have those skills then they might not ... be wanted to play" (Watkinson, Dwyer, & Nielsen, 2000). On his strategy during game play, he says "if you're playing with a whole bunch of people, ... the bunch of people go first, then hide behind somebody, and let them go first and then they don't go for you, and you get a clean getaway" (Watkinson, Dwyer, & Nielsen, 2000). One wonders what feelings underlie these stories and how they might be further expressed.

Passero (1995) candidly described her experience of the agony of an ex-physical education student who, as a slightly chubby, awkward, bumbling girl, was reduced to a social outcast in gym class, from "the Klaus Barbie school of Phys. Ed" (p. 74). She mused that:

> our algebra teachers never sat us down without explanation and demand that we solve for "x", yet we were supposed to instinctively know how to perch on a balance beam, shoot a basket or bump, set and spike. Dodgeball was another nightmare. It seemed like the twentieth century equivalent of a stoning (p. 74).

Passero recalled her feelings in physical education class:

> I see myself bumping, setting and spiking my way to glory.... Suddenly, I take a violent swipe at the ball and ... I miss. A teammate tries to rescue it, but the thing skids across the floor and out of bounds. It was the championship point, and I blew it. Slowly, each member of the team turns until I find myself the center of a ring of angry glares. My knees start to feel funny.... I know this feeling well (p. 74).

Passero (1995) added that although the weight is long gone, the awkwardness is

not. She reflected that, "the thought of a gym is enough to make me break into a cold sweat" (p. 74). She recounted her response to a friend's recent invitation to play a game of volleyball. Her "mind starts ticking through a list of excuses " (p. 74). Finally, she claims weak knees as an apology to avoid playing. Upon the acceptance of this explanation by the friend, Passero was surprised that, "she didn't even ask to see a note from my mom" (p. 74).

Closing Comments

A review of the literature on physical awkwardness and DCD relating to affective behavioural outcomes reads like a thesaurus, ascribing a myriad of characteristics and psychological concomitants to the condition. Much of what is written on the emotional and social consequences of physical awkwardness has not been empirically tested. Much has been hypothesized and postulated, particularly predictions regarding the long-term affective results of awkwardness. The possible emotional and social consequences of physical awkwardness are numerous. However, one cannot assume the experience is conclusively negative, or universal, but the prevailing assumptions are that it is.

What one experiences with physical awkwardness and how one perceives that experience are different. When one considers the phenomenology of physical awkwardness, there are at least four aspects of it that come to mind. Firstly, there is the failure to meet a task goal. Secondly, there is the resulting self-evaluation of that failure, in light of other failures. Thirdly, there are the reactions of others to repeated failures. Finally, there are the consequences of the social failure. It seems logical to assume that these consequences are experienced as feelings and emotions and are subsequently expressed as a variety of actions, inactions, or behaviours. Therefore, the focus on

research on the affective outcomes associated with physical awkwardness is appropriate.

It is interesting that, in spite of all the research on physical awkwardness and DCD, during the 1900s, Orton's work, ideas on assessment and remediation written in 1937, are not unlike conclusions and recommendations given some 60 years later. Like contemporary researchers, Orton called for further study of the problem of coordination in some children.

While there are many perspectives to the study of the phenomenon of physical awkwardness, there clearly is a stark lack of work from the person perspective. Thus the fundamental phenomenological question remains clear. What meaning do individuals assign to the experience of awkwardness? It is time to hear from the participants of this study, in their own words.

CHAPTER FOUR

Awkward Incidents and Interactions

"When other people say ... they can't play, ... it means

they can't play very well. If I say I can't play, I can't play!" (Deb).

This chapter presents the participants' words, their stories of physical awkwardness. It begins with a description of the participants, followed by accounts of how they identified with physical awkwardness while recalling various incidents. It concludes with a review of interactions with others, related to their awkward episodes. In deciding to present the participants' words and stories in this way, I am mindful of van Manen's (1990) caution of displaying "endless reproductions and fragments of transcripts under the guise that the researcher has decided to 'let the data speak for themselves'" (p. 167). I am hopeful the information is presented in such a way to resonate meaningfully with the reader.

There were 12 participants, 2 males and 10 females, residents of 3 large Canadian cities. They ranged in age from their mid-30s to mid-60s. They represent a variety of vocations and occupations (teachers, nurse, caretaker, flight attendant, laboratory technologist, administrative assistant, graduate student, businesswoman). I conducted 18 audio taped conversations, 16 in person and 2 via telephone. Six participants took part in 2 interviews while the remaining 6 were interviewed once. Telephone conversations were held with some individuals to clarify and illuminate points of interest. Participants are identified by a pseudonym.

Identifying with Physical Awkwardness

"It became obvious that I couldn't do anything.... I felt like I was put on the spot ... like if you stutter you don't want to do a speech." (Deb).

Participants were asked to explain why they identified with physical awkwardness. In response, they not only agreed they had experienced physical awkwardness, but it was affirmed by family, teachers, instructors, and coaches. Enid's comments are representative. She said, "I certainly self-identified as physically awkward.... from those criteria.... I ... agreed ... with a number of them.... I felt physically awkward.... I identify with that, for sure." Deb was also certain. "It was so obvious. It's like I had this little red hat on my head and it would be saying 'loser.'" Barb was frequently referred to as awkward. "I accepted that I was awkward.... I remember from the medical community, the pediatrician with the judgmental, 'she's awkward', 'she's accident prone,' ... statements ... that made me feel that ... it wasn't a good thing to be."

However, identifying with awkwardness was not something that was always initially acknowledged as such. For example, at the time Enid recalled, "I wouldn't have said I was physically awkward, I would have just said, I just can't do this." Cori thought "I never really put a term on it until I read your ... [notice] ... and then it was like a light went on.... This is me. This explains my life.... I am this exact description."

Deb reflected on her awkwardness only in a sport context. She stated:

> whenever I call myself physically awkward, I kind of laugh.... I guess if someone told me they were physically awkward I would probably right away think of someone who ... would spill things everywhere.... I'm really not awkward in any other things, except for sports.

Others perceived their awkwardness as widespread, in many aspects of their life, not just confined to physical education and sport. For example, Cori flatly stated, "people don't give me small breakable things as gifts.... They just don't because they would be broken". Helen admitted that, "a lot of my friends ... won't walk down the street with me.... I have a tendency of walking into things." Iris was also generally awkward in many activities of daily living. She talked about her awkwardness interfering with her job:

> I walk around and bump into walls all the time.... I work with young children and I have to be up and down off the floor and I also have to be extremely careful walking anywhere around them because they put their hand out to grab your leg. They don't realize just how tipsy I could be. And if I ever fell on one of them, I mean I would really hurt them.... So that's a constant fear.

Aside from references to awkwardness in activities of daily living, there were numerous examples of failed participation and performance in various physical activity situations. Everyone had difficulties with a variety of activities and the profile of each participant shows the heterogeneity of how physical awkwardness is revealed.

Gail was quite analytic. "It's like ... the brain shuts down.... I'm not skilled enough to do this. I'm too awkward." She freely admitted to not being athletic and was often confused about what to do while playing a game. Enid explained her awkwardness by saying "I have a hard time getting the hands and legs going the way they are suppose to."

Ben, in describing his awkwardness, used a classic reference to left sidedness indicating that, "I had two left feet and I still have today." Gail, who is left-handed, said, "I have two right feet, not two left feet." Ben was particularly descriptive in presenting

himself in the following metaphoric way:

> If you took a ball and put a bunch of sticks, pins, or toothpicks into it, ... and tossed it across the floor, that's how I imagine myself as looking. Arms and legs were going everywhere, just not a pleasant sight.... If I had to run after a ball, ... you've seen a newborn giraffe trying to walk.... It's very awkward trying to bend down and pick up the ball when you're that unstable.

Difficulties with externally fast paced, mobile team sports requiring body and object control and quick decision-making were particularly commonly cited examples of situations of awkwardness. Ball skills in various forms were mentioned repeatedly. For example, Fran reported that, "baseball was the worst. It happened to be a combination of all the things I did badly.... I couldn't throw. I couldn't bat. I couldn't catch. That doesn't leave much." Gail told the story of the annual family baseball game. "We got together with the rural cousins.... The picnic part was fine, but then, ... the blasted baseball game afterwards.... My cousins were ... extremely athletic.... I couldn't catch the ball."

Incidents of awkwardness were also evident in individual sports and activities, involving closed type tasks such as biking, bowling, and swimming. Cori recalled that she "was still in training wheels long after my other friends were on their bikes, normal two wheelers." Deb lamented, "I didn't know how to skate, one of very few Canadian people who doesn't know how to skate. I didn't learn to skate until I was about eighteen." Even bowling was difficult for Ann. "It didn't matter where I stood in the alley, the ball was always in the gutter before half way.... I was bowling between my legs in high school because it was the only way I could."

Barb spoke of her awkward attempts at dance. "I'm horrible.... I'm just tripping over my feet when the class moves from one side to another ... always two steps behind and ... getting squished into the wall." Deb also had difficulties with dance. "I've taken aerobic dancing a few times and I don't like it because I always miss the steps.... I've never being able to ... follow the music."

Body Issues

> "We had to wear short shorts and T-shirt's, and I didn't like to wear those in public ... [and] ... being that I ... was unable to do a lot of the things, I didn't want people watching me" (Ann).

Participants referred to feeling uncomfortable with some aspect of their bodies that seem to be accentuated during their awkward participation in physical activity. Ben was concerned about how his thin body appeared to others:

> Everyone was looking at those long skinny legs, and skinny arms of this rail of a fellow they were attached to.... There were too many pieces of this odd person, it was like a freak show, the fat lady, the hairy ape, or whatever.

Ben liked running and felt he was a good runner but "people would start laughing when they saw me running because I had knobby knees." He described his dread of going for swimming lessons. "We had to strip off, I was very conscious of my skinny legs.... Everybody started laughing.... From that point on I was very aware of all the joints in my body. I had too many."

Others commented on aspects of their body. Cori "felt very self-conscious growing up as I was always very skinny." Barb referred to her legs, saying, "I don't have particularly long legs. It probably would be more helpful to have a sort of more willowy

kind of build." She added, "I don't think I've got ... a classic shape for a runner." Ann, on her impression of her body, commented, "I was taller and quite ahead in my development, which was another reason why I didn't want to be in phys. ed." Ann elaborated further on her discomfort wearing the physical education uniform.

> I was far more developed than a lot of the other girls, so the guys would stand at the gym door to watch and the shorts were ... as small as you could get them, and you know when they're looking at you ... and when ... you can't do the things, then it becomes a joke.

Successes and Dubious Successes

> "There are people who are athletes, and people who are non-athletes, and then there is me" (Deb).

Regardless of the many failed attempts at various physical activities, all admitted experiencing some degree of success in some physical activities, some of the time. Although two participants flatly asserted that they had absolutely no success in physical education and sport whatsoever, upon probing, they admitted that, in fact they had some successes. For example Judy, who initially claimed that she could not think of one triumph in her physical activity experience, successfully took part in a ballet dance club.

Successes may be viewed in two ways. Firstly, there were unqualified successes, described without reservation. One simply declared he or she participated and performed adequately in a given activity. Secondly, there were statements of success accompanied with an explanation or with some reservation or caveat. While reporting success in a given activity, participants admitted to being unsuccessful in some aspects of the activity,

or when it was performed under certain conditions.

With respect to outright successes, Ann in particular had numerous and varied examples. She claimed to do relatively well in curling, dancing, and gymnastic floor exercises. In team handball, "the first day I played, I scored a few goals and that's the fun of it, when you do well and then you try harder." Fran, also a "good dancer", admitting that, "I've clog danced for years.... I'm good at it because if the instructor says go left, I do go left, and if it's three steps forward and two back, I have no trouble with that."

By and large, participants felt that activities of an individual self-competitive nature were more successful than team activities. According to Ann, activities involving slower movements made participation easier. Barb "enjoyed competing with myself where I could try to outdo my previous effort." Cori also experienced a sense of confidence in individual sports such as skating, "where I was not in competition with anyone." Later on Cori successfully took up racquet sports, downhill skiing, swimming, and scuba diving, all individual sports that may be done non-competitively. Interestingly, many of the successful activities such as swimming, figure skating, curling, and dance were not typically found in physical education programs of the past.

As indicated, some successes were described with reservation. For example, Cori, in reference to swimming, said, "I had reasonable swimming skills but I'm certainly not fast or graceful. I flail about and get from one end of the pool to the other." Iris used to ice skate. "I have a really good feeling about growing up and going skating every night ... not racing but skating around." Iris also qualified her basketball prowess, by saying:

> that was another one that I wasn't all that bad at, and not good at it either, but I liked it. I really liked basketball.... I could keep up to people and I liked the guarding. I couldn't carry it up. I couldn't dribble it.

Fran epitomizes the idea of a dubious success, as she talked about having received an athletic award upon graduation. She explained. "It's really ironic. If I didn't play volleyball, basketball and everything else, we didn't have a team.... If you were alive you were ... [on the] ... team."

During school field days, Barb participated in the shot-put. She said, "I was never very good at it, but I liked trying." She also felt the same way in her attempts at skating, indicating that, "I'm not a bad skater. I have kind of the weak ankle sort of skating. But I did ok." Barb also performed less awkwardly when higher levels of skill were not required. "I enjoyed it when we played things like volleyball, basketball, badminton ... knowing we were playing at a much lower level.... I enjoyed playing with my peers because they were as equally unskilled."

While Ann noted many successes, she also spoke of many dubious successes. For example, she reflected on her volleyball accomplishments as follows. "I could serve over and underhand, but for the rest of the game, basically they would pull me off." With respect to ice skating Ann said the "kids would play tag and I would distance myself and I would practice my twirls or something.... We played crack the whip and I was usually the one at the front of the line ... because it's easier there." Ann also took ballet lessons with limited achievement. In gymnastics she "did not too poorly, probably because I had ballet training. I was able to do some of the things." She further qualified her success saying,

"by the time I was in grade nine, everyone had far surpassed me." However, Ann considered herself to be "the best double dutch 'turner' in the school"

Falling "Stars"

"I fell so many times and fell so many ways" (Iris).

Falling during the learning and early attempts at a motor skill is not uncommon. However, falling seemed to be a recurring feature for the physically awkward performers. All freely admitted to falling frequently during physical education and sport activities. Indeed many spoke of falls as the focus of their descriptive writing exercise. Some reported falling more often than others, but everyone fell a good deal.

Helen considered her falling to be common in everyday life. "I fall walking, so running enhanced that even more." She added that, "skating of any kind scared me ... because I fell so many times.... In roller-skating, ... I was on the ground more times than I was up." Deb also described falling while skating:

> Instead of having the normal standing up position, I was always kind of bending over, getting ready ...[to fall].... As soon as I would pick up a little bit of speed, ... I would throw myself on the ground because I thought I could lose control.

Ann reflected about falling often, while running. "The kids would ... just grab me by the arm and basically pull me along and then I wouldn't fall." While running during a ball game, Ann reported missing the ball and "I ended up falling in the mud puddle.... Anything to do with running, I would trip and fall a lot over my own feet."

Barb and Ben were the most frequent fallers. Ben reported that he would "go right over completely. I have no balance whatsoever. I've tried.... The minute I'm on my own, I'm going over, I'm flipping, I'm doing a complete turn." Barb initially said she did

not fall that much but claimed to be "more of a tripper," a subtle distinction. In contemplation, Barb confessed to many falling incidents. "That's all I did was fall.... I could not hold my balance properly."

Falling was not always a totally devastating event if it was an expected outcome of an activity, or if others also fell. For example Iris, while talking about her skiing experience proudly proclaimed falling to be an acquired skill. "I did get to be pretty good at falling." Fran, who liked games of low organization such as the three-legged race said, "I can remember just loving doing those.... You used to fall, but everybody else did." Likewise, Cori remembered:

> having to do the long jump which for me was O.K. because I didn't have to go high and it wasn't that embarrassing because you were expected to fall at the end.... You could just run, jump and fall which was great because I could do that.

Scrapes, Scars, and Stitches

"I am down on the mat. My face is stinging, throbbing with pain" (Enid).

Physical pain was a common consequence of falling. There were many stories of pain and injury due to a fall or similar mishap. Barb, in particular was repeatedly injured. "I was the kid ... at the end of the long line of kids ... in ... 'snap-the-whip,' ... the one that got snapped off.... I remember ... waking up with a crowd of people over me." Barb was injured many times:

> I rode my bike lots as a kid.... I got lots of stitches.... I'd trip on the edge of the sidewalk and go down. I've got scars under my chin and my eyebrows and there was a period of time where I was in the emergency department getting stitches all the time.... I actually recall the doctor mentioning ..."she really does seem to be

accident prone."

Cori also experienced a good deal of pain and injury during physical activity. While swimming, she recalled, "I tried the little roll at the end I'd whack my head into the side of the pool, or get tackled up in the ropes along the lanes." While pitching during a baseball game, Cori described the accident that caused her to never play the game again. "The fellow who was batting hit it straight back at me. I got my glove in the general direction of the ball but it hit my wrist, then my face and it broke my cheekbone and cracked my wrist."

Others described injuries, ranging from minor physical discomfort to major pain. Ann recalled hurting her hand playing tetherball. "I never seemed to be able to hit things without hurting my fingers or something." Gail complained of the pain of volleyball. "To serve that volleyball was just a killer.... It was just like that ball was going to break my wrist." Enid also recalled volleyball as painful, breaking a finger while playing. To what extent pain, injury, and falling or the fear of them contributed to the awkwardness is uncertain. However, the participants fell and hurt themselves a good deal while attempting sport skills. The pain of physical awkwardness seemed to add to the insult of not being able to perform well.

Awkward Interactions

"I remember getting yelled at a lot

by the girls who did know what they were doing" (Judy).

Interactions with others, namely family, peers, spectators, and teachers, were regularly cited in the participants' stories of physical awkwardness. At times, the physically awkward performers felt very noticed. At other times they felt ignored. Some

interactions were supportive and sympathetic; others were non-supportive, apathetic, or even critical.

Family Interactions

Physical awkwardness was not only apparent during play situations and at school, but also within the home and family. Deb evaluated her family's sport proficiency by saying, "I didn't really have any athletes in my family.... My parents were not very much into sports and I never played any form of sports until probably grade five." Deb relayed the following communication with her mother, in reference to her participation in this study. "I mentioned to my mom I was doing this little interview and my mom, right away said, 'well, if he wants any more people he's got the whole family.'"

Barb also remembered her parents' general disinterest in physical activity. "My parents weren't people to be physically active.... That was not something my parents would probably pay a lot of attention to." Barb described her parent's apathy toward physical education during parent-teacher conferences. "My parents would never go see the gym teacher. They would go to Math and English and History.... I don't think my family valued ... [physical] ... skills." Iris was frank in saying, "I definitely wasn't encouraged."

Family members often reinforced physical awkwardness. Barb talked about her brothers' teasing about her lack of skill. Reiterating her mother's comments on her awkwardness, Cori recalled, "My mom called me awkward.... I don't think she ever said it in a mean way.... My bike riding was always a source of my parents telling me how awkward and uncoordinated I was."

Ann referred to the apathetic reactions of her mother in response to her concerns

about awkwardness. "I tried to tell my mom but she didn't think it was important, so maybe that's why I thought it wasn't important either." After an awkward attempt at bowling, Ann recalled, "my mother realized just how uncoordinated I was, because ... my little sister, who is 7 years younger than I, got it down the middle no problem."

Family members were at times, sources of empathy, support, and assistance. Ann spoke of how "my mom used to try and get me to learn how to skip." Seeking assistance with her volleyball serve, Ann said, "I'd get my sister to help me at home sometimes. I'd get my mom to hold it and my dad to hold it, but I never could." Ben spoke of his grandfather who would often offer him encouragement, saying things like, " 'you could do this.'... He would sort of help me."

After not making a sports team, Barb talked with her mother. "My mom ... was always very sympathetic about stuff like that, always just the one I should talk to.... So I would ... talk out my feelings and head back to school." Deb received a good deal of help from her brother, who attempted to teach her to skate and ski. "I was just so amazed that he stuck by me when I made a total fool of myself.... I kept falling. He stuck by me and tried to help me."

Family was not only a source of apathy, sympathy, and encouragement, but also a source of discouragement. Barb talked about her parents forbidding her to roller skate. "They thought it too dangerous.... I would borrow friends' skates and would skate a little.... I couldn't go home and talk about it, because my parents didn't want me to do that." Barb described the different interactions with her mother and father regarding her awkwardness:

My mom would be sympathetic ... but my dad would kind of raise his

eyebrows.... I really think he had really clear ideas as to what boys did and girls did and girls didn't do sports, in my dad's eyes. So anytime I'd get injured, ... he'd be not particularly supportive.... It would be my mother's deal to take me to the doctor.... I did feel that my dad ... felt ... I was ... some kind of "klutzy" kid.

After an initial success at running, Ann's father referred to her as " 'Secretariat' just because he thought I had found something that I could do, but when he found out that I fell, he couldn't believe it." At the time, "I thought he was proud of me and then I realized afterwards he was making fun."

On occasion, participants' family members made them take part in an activity. For example, Iris recounted her figure skating experience. "My dad kind of forced me to do that. He had this kind of Barbara Ann Scott dream.... I didn't want to try those stupid things on the figure skates."

Peer Interactions

"He whispered to me that once the ball was in play
I should get out of the way so as not to hinder their chances of winning" (Cori).

Participants' interactions with peers during physical activity were manifested in a variety of ways. Some interactions were supportive, while others were unsupportive and critical of their attempts. Still other interactions were somewhat neutral, in that they had little apparent impact on the participants. Finally, the participants had assumptions that peers were thinking critically about their performance. This is not to suggest that peers always intentionally had a negative impact, although it was often perceived that way.

An example of a neutral reaction is seen in Ann, who recalled her awkward performance during a game. "I missed the ball ... completely and the other team got it

and scored a goal.... Thankfully I didn't get the boos." Helen has a similar impression of a neutral reaction, saying that peers "didn't show emotion, one way or the other." She elaborated:

> When the ball would come towards me, I would try to do the moves ... and I would just misjudge where the ball was coming from, and just couldn't manage to get the ball.... If I could connect with the ball, half the time it would either go left or right or into the net.... They didn't care.... It didn't fizz on them that I goofed up.

Negative interactions with peers were far more devastating to the participant who was the target of subtle and not so subtle criticisms about an awkward performance. Helen got the impression that "the guys just thought I was totally ... kind of stupid.... They kind of snickered." Comparing others' skills to her own, Helen felt that, "the ones who ... had better ability at sports didn't have a whole lot of patience with the rest of us who weren't quite as good." According to Barb, "boys tend to be a lot more judgmental about errors." In response to his awkward dance steps, Ben commented, "you could hear the girls giggle." In fact, Ben felt "totally rejected" due to his awkwardness. "I would be told 'you can't play.'... I would just walk away, very down, very empty.... I was never invited to any birthday parties."

Again being injured during a game, Cori recalled her peers' response:

> If I hurt myself playing in a sport, people were more like "Oh not again, or what have you done now?" I don't think there were a lot of people in my school years who were very sympathetic or patient about it. It was more like if you can't do it, get out.... I don't think there was sympathy ... about my being awkward.

Picked last, not picked, or placed on a team.

"I Know for Certain I Was Picked Last" (Enid).

Picked last, not picked at all, or placed last on a team were common outcomes of the awkward experience and peer interactions. Deb recalled that "there were many instances where there was a team to be picked and I was not the first choice." Adam soon realized that "you just didn't get picked for teams." He became accustomed to being picked last. When asked where in the group she was usually picked for teams, Gail replied casually, "Oh, probably near the end.... I wish I could have been picked earlier.... I never got picked for baseball, but if I did get picked, I was one of the last ones... same with volleyball and basketball." Ben simply said, "I was never picked, I was always placed on a team." However, while lamenting that she would have liked to be picked earlier, Gail often thought "please don't pick me, I don't like it." Expressing a similar sentiment, Iris, when finally picked, "often wished that the ball wouldn't come to me."

Standing out, on display, and the center of attention.

"All eyes are on you when it's a pop fly" (Adam).

Concern about performing in public, being watched, playing in front of others, feeling the center of attention, or simply being on display, when performing awkwardly in sports were familiar experiences. The idea of being noticed, evaluated, and possibly criticized underpinned the distaste for performing publicly and awkwardly. For example, Fran recalled, "I don't like being watched.... Once you start worrying about it, it gets worse and worse and worse."

Cori also spoke of "the feeling that someone was watching me. Even now when I fall, I think, 'I hope no one saw that.' I get up really quickly." Cori " never wanted to be

the one that people would point to and say 'It's your fault, you missed that.'" When Cori managed to blend into an activity and feel she was not performing too differently from others, she felt more comfortable. "When there were people much more awkward then myself, ... I didn't stick out."

Similarly, Iris said, "I just didn't want to have the spotlight on me." She elaborated further. "I felt the awkwardness came out when I actually had to do something on my own, feeling like people were watching me and that they would think that I was doing it really poorly and in a funny way." Ann, on being the unwanted center of attention, put it best in saying, "when you hit the crowd with your ball, you stand out."

Deb felt that "standing out was the main thing that bothered me ... drawing attention to myself for being so untalented." Deb would simply rather not have performed in public. "I'd just do ... something by myself, ... when no one is watching.... I would never join a group, where you had to perform.... I'm too concerned about standing out, being awkward."

Gail "wanted to do well and I would have liked to have done better ... but there you are in front of all your peers and your teacher and you don't do well." Adam was uncomfortable with "anything that required lining up and taking a turn." In reference to signing up for a field day race, even though he chose the shorter race, to get it over with, he still felt very noticed. "That was the quickest ... [event] ... but you know, it's the most blatantly obvious one".

<u>On being teased.</u>

"He would laugh. He would just snicker" (Judy).

Recollections of being teased, about physical awkwardness were mixed. Most

participants denied ever being teased. Adam said, "I don't remember any outright teasing.... People just left you alone." Fran agreed saying, "I never remember anybody ridiculing me.... I wasn't one of these kids that was tormented and felt miserable.... I don't think I've ever been teased." However, others described a different scenario on teasing. Ann told the following story. "We had separate gym classes by high school. That made it a lot easier.... The girls would tease a lot less than the boys.... They used to make comments."

Some of the teasing was received and perceived to be mean. Cori relayed the following account. "I remember people making fun of me for falling and being awkward, by doing ... exaggerated movements around me ... or ... mocking moves, making out as though I was completely physically impaired.... I think it was very mean-spirited." Barb had a different perspective. She felt some of the teasing was not intended to be malicious, and was acknowledged in good humor. She described good-natured teasing "about my unique clam catch." She received many comments, usually in jest, about her catching, throwing and other sport skills. However, she did not believe them to be cruel.

With a little help from my friends.

From time to time, participants talked about family members, peers, friends, someone other than the teacher, instructor or coach, who offered support and assistance with the performance and participation of a skill. These supportive others were like white knights who rescued a participant from a likely unsuccessful, potentially uncomfortable, awkward, and embarrassing situation.

Ann recalled the following story of supportive friendship:

I had a best friend.... She used to try and help me do things.... If we were going

> to do the long jump, she would take me to the pit after school and show me how.... She'd also practice running with me ... after school.

Cori also spoke of one close helpful friend during her elementary school years, "who would stand up for me. If people were teasing me, she would come and do other activities with me." The following illustrates how supportive Cori's friend really was:

> She was a skilled person who could do all sports.... She'd help me if I stumbled or did something bad. She would always wait with me until I got up and got going again.... I remember ... in school we were doing a race.... I fell and she actually stopped running and came back and helped me up and told me "it's ok" and ... ran with me the rest of the race.

Participants often associated with others who were also awkward or had difficulties in physical education. The women in particular, related similar stories of groups of supportive friends. For example, Cori remembered, "we would go home and play with our pets or we'd go to each other's house and do homework or play house. We never actually went to the playground and did the monkey bars and things like that." Deb recounted a similar story:

> I don't think I was ever the only awkward one.... I really associated with other people who were there in high school, ... five good friends and two of them were not very good at sports, so I kind of stuck with them and then we kind of faced the world together.

However, Barb did not want help from friends. "I certainly didn't need somebody to take me by the hand to get me to participate. I always felt comfortable in the setting and would participate, but when I would go to do it, people would be offering

suggestions."

Participant assumptions.

"Gym for me was a nightmare ... another forty minutes.

I just hoped I could get through it unscathed" (Judy).

In addition to peer criticism, there were times when it seems that the participants were hardest on themselves, more self-critical than most others ever were. Ben was often under the impression he was singled out, and had a feeling of isolation. "Everyone would grab ... the people who scored the goals and hang on them and I'd be off in the corner."

Barb explained her sensitivity over what she believed to be critical comments from others. "Maybe they made those same kinds of comments to the other girls too, who just shook them off and didn't personalize it. Maybe I personalized them.... It ... revealed my shortcomings." Cori felt similarly about criticism. "I never took constructive criticism. I always took it as a personal reflection of my person, if I couldn't do something well.... So it always was a tortuous experience."

Deb felt criticism from others when she believed that she was letting the rest of the team down, due to her inept play:

> I felt because I was so terrible I was really kind of bringing the team down. I felt a lot of responsibility because I could not do anything. Here I was on this team that didn't choose me obviously, but I really couldn't do anything. That was the worse thing.... People would look at us as losers ... but I guess in sports, I was.

Fran also self assessed and compared her skills with others. "We used to play catch ... and I always used to admire the girls that could.... I always thought they were so good at it. They could always make it go so far." Enid also had the sense of letting others down.

She believed she was the only one having difficulties in physical education. "I don't remember anyone else having difficulty with it except for me.... I was the only one." Gail sensed peer pressure. "We always want to look as good as our peers.... It's not pleasant.... You feel like you're a nerd, a geek to use all the modern terms. You know you're just on the outside. You don't belong."

Performing in front of the opposite gender was also a self-imposed concern. Barb was not comfortable with boys watching her participate in sport. "I think ... [boys watching] ... made me feel more awkward and self-conscious." Likewise, Adam was concerned when performing in front of girls. "The girls were around and if you're in grade five or six, you are concerned about what other people think."

Teacher Interactions

> "She mimicked what I had done for the class and of course everyone laughed.... She shook her head in disgust and basically ignored me after that" (Barb).

Teachers reportedly showed a range of interactions to the physically awkward performers during physical education classes. Teachers' behaviours were perceived to demonstrate apathy, a distinct lack of interest, or no apparent acknowledgement of awkwardness. There were also interactions that were instructionally supportive, but mostly there was an absence of instruction. Additionally, there were instructional practices that were essentially counterproductive to helping the individual overcome the awkwardness. It is interesting that the participants, themselves, did not seek instructional assistance, and in fact avoided the opportunity to receive help.

With respect to a distinct lack of instruction and instructional practices that were inappropriate, Helen felt that there were two types of teachers. There were those who had

high skill expectations for everyone and wanted to teach and encourage everybody. Then there were those who focused their attention mainly on the athletes and skilled performers. Referring to one teacher in particular, Helen was most critical:

> She was ... one of those phys. ed. geniuses, a real physical jerk who was a natural at it.... It was her life.... She didn't have a whole lot of patience for people ... like me who weren't totally coordinated.... She geared herself more towards the ... ones who knew how to do things quite easily and were ... part of the school teams.

Enid also felt teachers focused more on skilled students. "Teachers really seemed to focus on the people who were good and the rest of us were just ignored." Cori summed up the sense that more attention was paid to the skilled performers by simply saying, "either you were athletic or you weren't."

In describing the instructional environment, Ann thought that, "phys. ed. was very poor and very poorly structured in our school.... Our gym classes were very limited in what we did. So it wasn't really a lot of stress as to what you were expected to do." Adam felt there was a general lack of instruction in physical education classes of the 1960s. "There was very little emphasis on skill development." He elaborated during a subsequent conversation. "I needed somebody to show me where to put my feet, what to do with the ball.... If you didn't know where your footing was suppose to be, what were you suppose to do?"

On the subject of lack of instruction, Enid's words are again representative. "I had some pretty lousy gym teachers.... In talking to people who actually liked phys. ed.... I realized that they had people who actually taught them how to throw a ball." Gail

confirmed, "I've never been taught to throw a ball.... I have no idea how to throw a ball even today." Deb also wondered about the lack of instruction:

> I don't know if it's because the teachers were not trained ... or they just thought I was a lost cause, but I couldn't really do most of the things.... If someone had really taken the time to actually show me, ... perhaps I would have done better. I would have never being a great athlete but at least I would have done a bit better.

Deb offered the following observation on lack of instruction for awkward students. "I think teachers don't help people who are not very good.... They taught for the majority ..., athletes and regular people and I was not able to even do the basic stuff."

With reference to the charge of favoritism, Helen added, "I didn't feel that great about it. I thought if your going to be a phys. ed. teacher, you're there to teach ... and not really favour one group of students over another." In reaction to critical or impatient teachers Helen said, "I thought that I really wasn't wanted in the class."

Aside from a distinct lack of instruction, most interactions with teachers were somewhat benign or at best apathetic, having no real effect on the participants. Deb indicated, "I felt ... unnoticed by teachers." Ann, in reference to what she perceived as an apathetic physical education teacher said, "as long as you tried and didn't just sit off on the side, he would basically leave you alone." Gail shared the following impression on lack of feedback during physical education. "I don't recall getting dirty looks, ... ever getting ... hollered at, like ... 'you can do better' or anything like that. But I also don't recall hearing, 'you tried your best' or 'good job.'"

However, not all reflections of interactions with teachers of physical education were critical. There were many examples of supportive teacher interactions when

participants were having difficulty in physical education. Ann told me the following story about her experience with one teacher in particular:

> I had a great phys. ed. teacher in grade seven and eight. She would make all the games so that nobody felt uncomfortable.... She didn't make it stressful and her comments were always positive, even if you missed or didn't do it quite the way you were supposed to.

In reference to her initial success in team handball, Ann recalled the teacher's words of support. He said, "'You've got a good hard throw' and encouraged me and I carried that into high school."

Helen recalled feeling there was "more incentive to go when the teacher taught." She singled out a teacher of physical education who "had a little bit more patience with ... some ... like me who weren't coordinated.... She ... stuck behind us and ... spent extra time working with us." After receiving help from a teacher, Helen, felt "I wasn't quite so afraid to go to phys. ed. She kind of made it as enjoyable as she could for those of who weren't quite as coordinated."

Ben, who generally had little success or positive comments about physical education, also spoke fondly of one teacher who tried to assist him. When asked to describe how the teacher helped, Ben replied, "I think the teacher understood and tried to not make it stand out." Similarly, Adam, who was generally critical of his physical education experience, drew attention to a teacher who made an effort to engage him in the activities. "He tried to encourage other guys to pass me the ball." Barb spoke favorably of all her teachers. While learning to roller-skate, she recalled a teacher who "gave me very definite instructions.... With a bit of instruction, it's amazing what you can do."

Not wanting help.

"I never had the confidence to say please show me how to do this" (Judy).

Although many of the participants lamented they were never taught a given skill, they seldom if ever requested assistance. Deb was certain. "I would never have ever asked for help." Judy simply indicated, "I never cared to ask." Fran, added, "while, I needed somebody to say, 'you're not holding it or you're not doing it right,' ... it did not ever occur to me to ask for help." Ann sensed that "if you asked for help, I'm sure they would have given it, but that just wasn't something I was going to do." Cori agreed, "I would rather just struggle along with it on my own and do what I could do on my own without having anybody evaluate me or watch me."

Gail mused about why she did not seek instructional assistance:

> It might have been a good thing to go and ask the phys. ed. teacher ... for some extra help, or to see if I could have improved my skills. But, I never thought about it.... The physical awkwardness ... was combined with ... shyness.

In conclusion, this chapter has presented the participants' incidents of physical awkwardness and the varied interaction they had with others in relation to their awkwardness. The following chapter presents the participants' feelings and the ways in which they reacted to and coped with their physical awkwardness.

CHAPTER FIVE

Awkward Feelings and Reactions

"I remember that day so clearly – the sunshine, the kids, and my misery" (Fran).

This chapter presents the participants' thoughts, feelings, and meanings associated with the aforementioned incidents of physical awkwardness and the resulting reactions of others. The ways in which participants acted and reacted in response to the incidents are also outlined. Feelings arising from episodes of physical awkwardness were diverse within and among individuals and were expressed in a variety of ways. In a general way physical awkwardness was described simply as "feeling awkward" and was expressed as plainly as that. The word awkward was used not only in reference to uncoordinated performance in sport activities but also with respect to how one felt about a lack of skill. This is akin to the dictionary definitions of the word, as cited in Chapter 3.

While participants volunteered many insights into the feelings that arose during particular incidents of awkwardness, at the time they did not openly express their feelings about it. Ann explained, "Things bothered me but I never showed it outwardly. I kept a lot of things to myself." However, the participants, at the time were concerned about their awkwardness.

Judy worried that others' performance depended upon hers. "I didn't want somebody to lose because of my lack of ability." Deb expressed herself similarly. "I was ... bringing the team down. It felt like a lot of responsibility because, ... here I was on this team that didn't choose me ... but I really couldn't do anything." Cori added to the idea of disappointing others. "I was always very conscious of being unskilled and ... letting down the team. I was terrified of being the one who caused the team to lose."

Interactions with teammates were also cause for unpleasant feelings. For example, Iris reluctantly agreed to play for a team because "they made me feel so bad ... if I didn't come, then they couldn't play. I didn't want to play." Cori who was grudgingly picked by others for their team, felt "it would mean that they were taking you and they had no choice and they didn't really want you there."

Regardless of their awkwardness, participants wanted to do well. Fran "wanted to be perfect, right up there. And I wasn't.... I just wished that I was good." Iris added, "I had lofty ideals, like expectations that I was going to be able to get it in time and when I couldn't, that was seen as a real negative thing for me." Deb echoed, "it just bothered me because, ... I didn't like not being competent at something, because I was always the perfectionist in school. I always had good marks." Helen took her awkwardness personally, "more of an insult towards me being incompetent."

Sentiments tied to physically awkward incidents were expressed in many ways. Words used to describe feelings included feeling bad, frustrated, disappointed, dread, insecure, emotionally hurt, ashamed, stupid, foolish, fearful, hate, angry, insulted, guilty, embarrassed and humiliated. This language was used in response to performing sport skills poorly, letting others on a team down, appearing different, being pressured or forced to participate, and wondering why they were so inept. However, at the same time, the participants were happy if they could avoid participating in physical activity. Fran remembered, "feeling pleased if ... [field day was] ... rained out and wouldn't mind it being rained out for the rest of the year."

At times participants merely stated that an awkward incident made them "feel bad." Iris illustrated this in the following description of an unpleasant baseball

experience. "I would be ready to catch the ball, but I wouldn't always catch it.... I would feel bad because ... I missed my chance." Enid felt, "bad, but it was normal for me because I felt really terrible about phys. ed. so it was par for the course." Cori recalled "feeling bad about nobody picking me." She lamented that "they always made me goalie, because I was always the last one picked and no one wanted me on their team. It's not a nice feeling."

Aside from feeling bad, there were also feelings of disappointment, for example, if one failed to make a team or, if given a chance, performing poorly. Upon doing poorly on a fitness test, Gail said, "I felt quite ... disappointed.... I got some sort of participation badge but it wasn't the same as a gold or a silver or a bronze." In response to her mark of "D" in physical education, Gail again felt "disappointed. I certainly would have preferred higher marks."

Ann, among others, reported a feeling of "dread" tied to participation in anything athletic. Likewise, Cori said "I was never very confident about my physical abilities.... I always just dreaded going to physical education classes." Enid who also "was terrible at phys. ed. dreaded practically every class," like Barb who "dreaded going back into the gym," after a previous episode of awkwardness.

Feeling "stupid" was linked with such things as not doing well enough, letting others down, or failing to achieve proficiency. Helen remembered her pride being hurt as well as feeling stupid. "I could see younger kids going by me and having absolutely no trouble." Iris told me the following story of her awkward experience while playing baseball. "I would strike out a lot but striking out wasn't the worst thing.... Hitting those balls into the double plays all the time really drove me crazy.... I just never got the

strategy ... and ended up feeling foolish."

A sense of fear, of falling, injury, failure, being exposed, or being laughed at was also voiced. Cori recounted her trepidation before a hurdles race. "I remember being really, really afraid, terrified standing at the starting line." Barb was generally afraid of the uncertainty of physical education class. "It was always that sort of fear, of 'what's it going to be today?'" Deb expressed her worries of ball type games. "I have developed such a fear of any sport that involves catching a ball ... when I realized I couldn't catch." Deb recalled the anxiety of an upcoming compulsory learn to swing program. She recollected saying at the time that, "I'm going to drown.... I can't swim.... I was so scared I was going to drown." Recalling a fearful falling incident, Iris said, "it kind of scared me because I didn't have any control over what was happening to my body."

Notwithstanding the broad range of feelings described above, the dominant feelings associated with physical awkwardness are embarrassment and humiliation.

Embarrassment and Humiliation

"I ... was totally humiliated, for being so unskilled" (Cori).

Embarrassment, humiliation, or both, along with other similarly expressed sentiments were universally uttered. Deb, in particular, used the word "embarrassed" a great deal in describing how she felt about her awkwardness. For example, she told the story of failing to retrieve a ball for a group of children playing street hockey. "I was so embarrassed.... Any normal human being could have thrown the ball over the fence ... but ... I didn't know how." Not knowing how to skate in a country where it is seen as a birthright, had Deb say, "I was a bit embarrassed that I didn't know how to skate." After falling on a ski slope, she added, "I had to call for help and embarrassed myself ...

[again]." Embarrassment reflects an assumption that the embarrassed person is at fault or is accountable. It is interesting that there was so little external attribution.

Participants recounted similar stories of embarrassment. For example, asked how he felt about having to participate in sports, Ben simply responded, "embarrassed, always embarrassed." He further explained his discomfiture. "I'd have to bend over at the waist and try to pick something up and then I'd fall over if I didn't do it quite right, ... very embarrassing." Adam also felt embarrassed, about performing in front of girls because "they would see that you weren't very adept." Gail, who dreaded the annual family softball game, "lost a lot of interest in sports because I felt that I was so uncoordinated ... and embarrassed." Ann "was embarrassed about falling down." Cori felt uncomfortable "putting yourself in a position where other people can laugh at you.... definitely embarrassed."

Embarrassment was also expressed as a concern for possible situations that "might" occur. Worrying about being singled out by the teacher Fran said, "if the teacher had singled me out ... I would have been really embarrassed." In response to being asked if participation in physical activity was more humorous or embarrassing, Ann said, at the time, "it was definitely more of an embarrassment."

Closely linked to embarrassment was a feeling of humiliation. To Enid, "those kind of go together, embarrassment and humiliation, and frustration." Describing the feeling of being picked last for a team, Enid, said "not just humiliated, but also feeling guilty too because, I was put on the ... team and ... you're kind of like the burden on the team." After doing poorly in a race Fran, also felt humiliated. "I thought I had done really well.... I felt that running was a real forte of mine.... Nobody else said anything. It

was all me talking to myself about how badly I had done."

I asked Barb if she ever felt humiliated as a result of her awkwardness. She initially replied, "I never remembered being the subject of being humiliated in front of others." However, she contradicted herself later, by using the words, "humiliated, horrified, and disappointed" as accurate descriptors of how she felt at times. She added "I think it was a pretty intense emotion for me." Occasionally the embarrassment and humiliation were translated into more overt hate and anger.

The strong emotionally loaded word "hate" was often used in reference to a variety of physical activity situations, as well as with respect to physical education in general. For example, Fran was quick to say, "I hated throwing a ball ... because I'm no good at it." Barb detested certain competitive games. "Please don't let it be murder ball because I hate murder ball." Deb, while recalling the picking teams ritual thought, "call me when teams are picked, because I knew what was coming. I hated it." Enid recollected, "ever since I was a kid ... I've always hated team sports." Enid reiterated an incident when she was injured during physical education class and attempted to receive first-aid from the physical education teacher. "My toe was starting to swell up.... The teacher told me to, "just go to the vice-principal."... And I thought, "this is just so typical, I just fricking hate phys. ed. and everything associated with it."

A stronger feeling than hate was expressed by Ben who recalled a good deal of anger, as a result of his frustration over a hockey experience:

> I was a pretty good skater, awkward but pretty good.... After ... warming the bench, I got very angry and ... jumped out on the ice. The coach called me back and I cursed and swore at him and told him I was on this team like everyone and I

should be allowed to play. I sort of embarrassed him ... into letting me play.... I got bumped ... a few times and knocked around and everybody was ... laughing because I was stumbling ... [but] ... I scored a goal. Immediately I turned and went to the dressing room and took off my uniform. Everybody came running after me to try and get me to go back. Other coaches wanted me to go and play for them ... but I said, "no, you can keep your fucking sports. I've had it."

Reactions: Avoiding Participation and Concealing Physical Awkwardness

"On field days I made sure I was doing other things,

like selling tickets or ice cream" (Ben).

Participants utilized a variety of coping and avoidance strategies when faced with the reality of having to perform publicly in a skilled manner. There were short and long term, effective and ineffective strategies employed in reaction to incidents and interactions associated with physical awkwardness. The purpose was to mask awkwardness and avoid public scrutiny. For example, Ben was quite good at finding other things to do in order to avoid participation. "On field days I made sure I was doing other things ... behind the scenes stuff." Creative strategies were employed, ranging from complete avoidance to varying degrees of pseudo-participation and non-participation.

I'm Sick (of Physical Education)

"How could I get a wart or something ... [so] ...

they wouldn't let you go swimming" (Judy).

Feinting illness, or having a parent write an excuse for illness is a classic and popular strategy to avoid attending physical education class. Adam told of having notes written to be excused from physical education. He recalled, "in junior and senior high,

getting my mother to write notes to get me out of gym class ... whenever we were required to do anything that may put you on the spot.... Invariably the notes seemed to work."

Ann recalled times that she "would pretend I wasn't feeling well.... I was able to miss a lot of the gymnastics." Ben "would come up with a sore stomach or something to get out of it." Helen would say, "I was sick or I left my gym stuff at home, or had a doctor's appointment." Deb remembered, "as soon as we introduced a new ball sport ... I would just make myself sick because I knew I couldn't do it." When she was really ill, Deb said, "I wasn't in the least bit upset that I didn't have to go." Fran noted that she, "was never actually ill.... You just start feeling horrible. These just aren't good symptoms for kids to have."

Assuming illness was not universal. Barb never feinted illness to avoid physical education. "I remember in high school not being really excited about it ... but I never had physical symptoms." However, for Cori a diagnosed illness was seen as a convenient and legitimate way to get out of going to physical education. "I lucked out because I developed a bone disease in my knees. I remember feeling really happy that I got this disease and I didn't have to participate.... It gave me a legitimate out for three years." Judy discovered that, once puberty had been attained, "faking an illness when you're female is easy.... You just say ... 'I don't feel well. It's that particular time,' and once you say that, ... that was the end of it." She concluded her thoughts on the question of illness, assumed or real, by saying, "I'd get sick at the most opportune times."

If illness could not be used as an excuse to avoid physical education, other tactics were utilized to avert and divert exposure of physical awkwardness. Avoidance ranged

from total abstinence to discriminately taking part in selected activities. Participants spoke of a number of actions or inactions to avoid being placed in situations where physical awkwardness might be exposed. An extreme response was seen in those who chose to simply absent themselves from the situation like Adam who "didn't go to field days.... I avoided them." During a second conversation, he added, "you just ... made sure you avoided being put in the situation where you were going to let other people down." If Ben knew he "was going to be very awkward or going to have a bad day, off balanced, I'd say 'no I can't participate.'"

Deb rationalized "a solution to all of this was to actually avoid situations where I had to be playing any kind of sport at all." Likewise, trying out for a team was not a considered option for Barb, "because I knew there was no hope of doing it. So why set yourself up for failure or disappointment." Ben, after unsuccessfully trying out for a team decided to "never participate in school sports anymore."

With respect to participation in physical activities during recess, Cori, said she usually avoided group activities. "I would go to the wall and play 'jump the ball' with a friend of mine.... I just didn't go to the playground at all.... I always avoided the monkey bars and the climbing things." Cori rationalized her avoidance of physical activity as follows. "I learned very quickly to never put myself in the same position twice if I could have helped it." She continued, "if I'm playing on my own, the only person I let down is myself and that's OK." Helen avoided taking part in physical activity due to her frustration with her poor skills. "It really bugged me that I couldn't do it, so I ended up not doing it ... avoiding it."

Ann acknowledged that she preferred to be physically inactive. "I would rather sit

on the swing and read my book.... Anything that was really difficult for me, I could usually avoid by high school, so I didn't make a complete fool of myself." Asked to elaborate further on the ease at which she avoided participation in physical activity, Ann commented, "I'm very good at that. If they were doing something like cross-country skiing, ... I would find something else that needed to be done and I would do it." On avoiding compulsory participation in intramural activities, Ann figured "if I did a couple of things every so often, they wouldn't bother me too much about it."

However, it was not always easy or possible to avoid taking part in physical education, as it was tied into credits for graduation. Cori explained. "All through junior high I didn't have to take phys. ed., but in grade ten you had to have five credits.... So there was no way of getting out of it." Cori registered in a "phys. ed. class in grade ten, just to get it over with." On being placed on a team rather then picked, Enid said, "I wish I wasn't there so I didn't ... feel so bad.... In phys. ed. classes there wasn't anything you could do. I mean you were forced.... Outside of phys. ed., I just wouldn't do those kinds of games." If it were not possible to avoid an activity, once trapped in an activity, participants used various ways to appear to be involved.

Pseudo Playing

"I don't understand why I was such a klutz, ... but

I was a thinking klutz, so I learned how to hide most of it" (Fran).

Participants did much to give the impression that they were actively involved. If they got through a physical education class unnoticed, it was considered a relatively successful class. Ann said, "as long as I could be in the background and not noticed I was happy." Another strategy used by Ann, related to her perceived expectations of what girls

were, and were not supposed to be able to do in physical activity. "I would be really, really cute.... If you were a girl ... you would never be ever expected to play with the boys or against the boys."

Fran had an interesting batting strategy in baseball. "I never ... [swung when I batted] ... You always got four balls.... I made like I was going to swing , and then I would think, no, because kids can't throw properly." Enid used a playing but not really playing strategy most effectively. "I just made myself invisible ... kind of stand to the side and don't ... stand out." She gave the following specific example of her invisibility. "In a line dance, ... I wouldn't have been on the edges, or in the front, or even in the middle. I would be ... in the back line but in the middle of the back line." On hiding, while waiting a turn, Enid said:

> if there was a line up, I would always make sure that I was the last person. Because ... if you were the last person, ... they would go through the line up, and there wouldn't be enough time. So you wouldn't have to do what ever the activity was.... They would sort of ignore you.

Adam recalled his hiding tactic in line-ups. "I kept going to the end, until the whistle blew and then went on to the next station."

Avoiding the Ball

"If the ball is coming at me ...

I'm moving out of the way" (Deb).

Much avoidance had to do with ball-type activities. The reason to avoid the ball was simple. If you did not have the ball, you were not the target or center of action or attention, and were not expected to perform. Thus you were not accountable or

responsible. Adam gave an example of his football strategy. "Football is easy enough for anyone to play. You just run around and as long as you don't get the ball, you don't have to worry about getting 'swacked.'"

Deb would have liked to catch the ball, but actively attempted to avoid it. She recalled, "not wanting it because you're afraid you're not going to be able to handle it." Commenting on recess dodge ball, Deb explained her primary concern was to try and get away from the ball. "I could never catch it.... Either get away from the ball or get hit and get away from the game."

Selecting Certain Roles and Activities

"Goal just seemed the place to be....

You didn't stand out quite as much" (Ben).

Participants were discerning in selecting certain activities or certain roles within activities while avoiding others. Ben never wanted to be the center of action. "We played football and a few other games.... I'm not going to be one of the forwards so I'd stay back." Fran chose to play third base rather than field because:

> most people hit a foul, and if you don't catch it, it doesn't matter. You just go pick it up and nothing happens. Most kids don't get to third base. They don't even get to first base. So you can sit there and have very little action.

Further explaining her logic in choosing to play third base rather than outfield, Fran rationalized that, in the outfield, "you would have to throw the thing. At third base you don't have to throw it very far." Ben used the same logic in trying to avoid playing right field.

Cori had an interesting approach to team and group selection. She said, "I would

either try to be a captain so I could pick people.... I would choose a team that was really bad, so it wouldn't be my fault if we lost." She also "always sought out friends and partners who are stronger and more coordinated than I am ... I think to protect me."

They Called Me Coach

"When you're only the coach ...

you're not expected to do anything" (Ben).

Legitimate options to actively participating in physical activity included officiating, scorekeeping, coaching, managing, assisting with equipment, organizing events, cheerleading, or simply being a spectator. For example, Fran remembered:

> I was the only kid on the block that had a baseball bat, so I was sought out a lot to bring my bat. I used to ... do all the umpiring ... because then I didn't have to throw or catch.... I never got any better at it because I never actually played it.

Ben chose to become the coach. "I'd coach, handle equipment ... to avoid participating.... You could ... practice with the team, but when you're only the coach or the equipment guy, you're not expected to do anything." He also "ended up being the manager.... Maybe it was because I had a car, ... driving to games and arranging buses ... so I ended up in a role."

Iris managed to have "fewer turns at bat because I liked to watch people do sports.... I'm not a competitor. I don't want to participate.... I love to watch them play." Ann also was "quite happy to be a spectator.... I love watching." Helen "preferred being scorekeeper ... over actually playing." She became the president of the ski club, so "I didn't actually have to do anything. I didn't have to be a great skier. I was able to ... raise money and have socials.... I was an organizer." Cori would "always sit on the sidelines.

I was a cheerleader in high school. I would never play the sports.... I didn't want anything to do with it."

Doing Something Entirely Different

"If there were something I could do

instead of gym I was doing it" (Ann).

If participants were involved in an entirely different activity of a non-physical nature, they would not be available to participate in a given physical activity. Judy would offer to clean the board, or tidy the classroom to avoid physical education. Barb offered to do anything to "help out ... rather than have to run on the track." Adam sang in the school choir. "I was in musicals and operettas.... I had lead roles in the musicals and I worked making the scenery and ... you had your moment of fame when you were on stage when everybody was applauding." Fran remembered, asking the teachers in junior high "if a couple of us could just grab a book and sit under a tree and read.... It depended on which teacher.... I would prefer to do anything than play baseball."

When asked about what she would do as an alternative to participating in physical education, Ann replied, "in high school I joined the yearbook committee.... I was the one running the whole yearbook.... I did a big history compilation and I missed a lot of phys. ed." Manipulating class schedules such that it was impossible to program physical education was done in a variety of creative ways. Ann "took three Sciences, and three Maths, and two English and Russian History so there wasn't room for ... [physical education] ..." Ann "took singing lessons (and I can't sing) as opposed to taking phys. ed..... In fact one of the years, the music classes were during lunch period, so I didn't have to do intramurals." Cori also "found a way to get out of it because I took ... Spanish

and I didn't have time or room for phys. ed. ...so ... I was really happy."

Resisting, Refusing and Rebelling

"I'm not doing it and you can't make me" (Judy).

Some participants, at times resisted, actively refused participation, or rebelled to avoid physical education. Barb, like Ann protested and admitted to being stubborn. "I would refuse to do it a lot," and "by grade nine it turned to complete reluctance to participate at all." Cori resisted and refused more than anyone. "Rebelling against authority was a strategy to get out of being required to do anything that might ... reveal my awkwardness." She elaborated as follows. "I never got into trouble academically because I was always smart enough to get through school, but I hung out with kids who were hanging out at the mall and skipping class and going for coffee." However not everyone resisted or rebelled.

Compliers

"I went along and did what was expected" (Barb).

While some participants successfully avoided attending physical education class or taking part in sport events, others reluctantly complied, even though they were uncomfortable doing so. Barb simply "went along and did what was expected.... I didn't enjoy going to phys. ed." Enid did not try to skip physical education class, but found ways not to take part while there. "I was very compliant.... I would try to figure out a way without going against the rules, to somehow not have to participate.... I wouldn't have skipped class." Cori, who later rebelled, was initially a complier. "I was too much of a good kid to rebel ... at that time.... I just remember the feeling of being very apprehensive of doing it and upset that I had to be there."

While Deb preferred not to continue taking physical education she would have reluctantly complied, if required. She explained. "if I had to go on in grade eleven and twelve, I would have gone on, I don't think I would have refused, I can't remember not doing anything because I still tried." Perhaps Gail, in reference to compliance said it best. "I showed up dutifully with my uniform and ... I would at least get points for the uniform and changing on time.... I'd always try everything.... I was a real suck. I never tried to cut class."

Using Humour to Divert Attention

"I kind of laugh it off.... This is just my coordination, 'mucked' up again" (Helen).

Participants, at times saw humour in their predicaments and used humour as a way to cope with awkwardness. Ann commented, "by high school when I would miss or do something I ... could laugh at myself and that helped." Cori provided the following story about how she used humour during a required dance performance:

> We had to do free style dancing to music.... My friend and I ... picked a song that was sort of humorous. We did exaggerated ... awkward looking movements to the music.... People were laughing at us, on purpose rather than just laughing at us because we were awkward.... It was fun because I was making fun of the assignment.... If people were going to laugh at me, I might as well ... be laughing with them and it wouldn't be as bad. It was like a coping mechanism.... It made it easier.

Deb used humour when "I didn't want to take a chance. I thought I'd rather play the clown." However, she added, "when I was a kid, I didn't think it was so funny." Ben

added, "when I look at it now it is a very laughable ... [but] ... there was very little humor growing up." He explained. "I am a little awkward and I have fun with it. I have learned to make fun of myself and it can be a lot of fun." In further retrospection, Ben said, "if you're destined to be that way, you had better learn to live with it and either ... have fun with it, or stay in that shell and never enjoy anything in life." Although humour was used, it was assumed and not seen as actually funny for the awkward performer.

Sometimes humour was merely a natural outcome of a funny situation shared by all, as Cori described. "Skiing down this hill, I must have fallen about fifty times and it was just a little hill. We'd all laugh." In addition to using humour to deflect attention, participants could also, in refection see humour in their awkwardness.

Iris, in considering her awkwardness said, "I've wanted to become a clown, as clowns are often awkward and clumsy and I could be a clown because I am awkward ... and my clumsiness and my awkwardness will just come in handy." Barb, commenting on her throwing style, spoke of others' humourous verbal reactions. She recalled comments such as, "'you throw like a girl ... you look goofy when you throw.'... It's a sort of a source of comedy for people.... I'm a goofy catcher as well."

Trying and Persisting

"I was going to try as hard as I possibly could" (Deb).

Notwithstanding their feelings and actions in the face of repeated incidents of awkwardness, initially participants persisted. Deb remembered trying hard, "because I thought I wanted to do well.... It was part of school.... I took it seriously."

Ben offered many stories and insights into his experience of physical awkwardness and his efforts at trying to improve and succeed in a given activity. "I

found that everything that I couldn't do well, I tried to do harder when I was by myself. So the next time I went there, I wouldn't be quite so embarrassed." However, Ben persisted even though he often felt, "very embarrassed, very awkward but I would fight with it all the time.... I always tried ... my best, just to show them I can do it"

To improve her coordination, Cori even enrolled in charm school. She also took up "weight lifting and bodybuilding," thinking it would improve her coordination. Ann felt "there were certain things that if I worked really hard on I could eventually get." She "rented things to see if I could do it and see if it was worth wasting the money on it."

Wondering Why

"What's my problem?" (Helen).

Participants, at times wondered why they were so unsuccessful performing skilled physical tasks. Fran "felt that I should be able to do it better but what I thought I could do from a logical point of view, my arm didn't do it for me. And I don't know why." Helen wondered why many others, could "put the skates on for the first time ... and were able to do it.... I couldn't get that rhythm.... What's my problem? Why couldn't I do the moves as well?" Enid also speculated about not having "eye-hand coordination, not understanding ... the kind of dynamics of what you're supposed to be doing.... I had no idea what we're doing.... no sense of the strategy of the game."

Deb also wondered why. "It bothered me because I thought, 'what's wrong with me?' I really thought there is something wrong.... 'Why can I not throw a ball like a regular human being?'" She even speculated about a possible genetic link for her awkwardness thinking that "some people carry a gene ... for non talent and I have it....

Maybe it explains it and, I am off the hook. I just have a bad gene."

Accepting Awkwardness

"Damn it! I can't do it, ... the hell with it. I'm not even trying" (Judy).

Some participants mentioned coming to a sense of just not caring. Helen became increasingly disinterested in physical education after repeatedly failing to perform skillfully. "Between the teacher, my own feelings, and fellow students, I really lost a lot of interest in phys ed." Ann summed up not caring, as follows:

> When you first start out you're hoping you can do everything that everybody else can do ... but by the time you're in high school ... and you're at the bottom at the physical education tests, ... it was obvious to me that it wasn't something I was going to excel at.... If any one made fun of me, I really didn't care at that point.

Beyond a wondering why and a proclamation of not caring, participants came to an eventual realization and reluctant acceptance of their physical awkwardness. Iris reported that, "It wasn't the end of the world ... even though it was a situation of awkwardness." Deb also became resigned to her awkwardness. "Whatever sport we tried ... I wouldn't do very well.... That's the way it is, that's the way it has always been.... It was a fact of life for me to be like that." She "accepted the fact that I was not to be athletic and by then it did not hurt me so much because I was quite good at a number of other ... [non sporting] ... things."

So by and large, participants eventually accepted their awkwardness. Barb opted for other activities. She explained, "you don't make anything, so okay fine. I don't need to beat myself up anymore. I'll do other things, I'll join other kinds of activities at school."

Thank God It's Over!

"I was so relieved.... Finally I'm out of it" (Deb).

Once the compulsory obligations for physical education were met, participants were happy to leave the experience behind them. They expressed a feeling of relief. Gail "was glad when grade twelve came and I didn't have to have phys. ed. any more.... It was over....'Yea, no more phys. ed.!'" Helen recalled, "I was there because I had to be there, not because I wanted to be there.... I put up with it ... in grade ten and eleven. In grade twelve it was more of an option.... I didn't go."

After receiving her physical education credit, Cori chose not to enroll in any other activity courses. "After I finished my five credits in grade ten, I never took any notice of physical education classes again." She added, "it was a relief to not have to participate in that and so other ... [non physical] ... activities became more attractive." Enid, who had a history of good marks in school, was bothered by low marks for performing poorly in physical education class. She passed physical education because, "I was an "A" student, so I could ace the exams. But in terms of the physical part, I always did so poorly that it brought my average down. I just said, 'I ain't doing this again.'" Deb also felt that because it brought her marks down, "why not get rid of it.... Eventually I just dropped out." The relief from not being required to take physical education freed the participants from the risk of displaying their poor skills in front of others.

Reflecting on the Experience of Physical Awkwardness

"I fell going upstairs.... My purse ... went flying.... I thought, 'a good day to talk about being awkward'" (Cori).

Participants were asked how they now felt, while reflecting upon their experience

of physical awkwardness. Asked what is evoked upon thinking of her awkwardness, Fran said, "It was being disappointed ... at not being good at something." Gail, replied similarly, "probably sadness, disappointment." Cori agreed, saying "sad, it makes me sad." Although Cori said she felt bad about the experience, reflecting further on her awkwardness, she thought:

> it's been a life long thing that I have learned to accept as I have gotten older. It has molded my choices in life in terms of what to do and what to be involved in, and probably choices in friends and partners.... I would say it has impacted all aspects of my life.... It makes me sad that I missed out on what I think is such an important and wonderful opportunity.

In retrospect, Cori also felt, "I was very, very hard on myself for any kind of mistakes I made if I was playing on any kind of team." Deb also felt she has reluctantly accepted the experience of awkwardness, but also believes she was too hard on herself:

> I guess in some ways I'm accepting of it and other ways I'm hard on myself about it.... It almost bothers me thinking of how awkward I was. It's almost like I've learned to live my life without any sport.... I really wished I had been good at one sport because I would have liked to continue playing.

Fran made a similar comment:

> I think I tortured myself. I really do, when I look back on it.... I realize that probably most of it was in my own head, and as long as I'd kept away from baseball, I was fine.... I feel sorry that I put myself through all that. It wasn't necessary. You know it's really too bad. It's silly.

Ben also admitted to being too critical of his awkwardness:

> I still feel that I'm awkward but I think that through being awkward and experiencing these things that I was a little harder on myself than I needed to be and maybe if there would have been a bit of encouragement or family involvement somewhere along the way, I might have had better experiences.

When Fran was asked about her greatest disappointment about being physically awkward, she replied "in myself, that I wasn't better." Fran also put it all in balance. "I'm one of those very lucky people who had a very happy childhood. I really was a very happy kid.... I think I was happy enough that it didn't spoil my life." Ann was also more accepting in reflecting on her experience as an uncoordinated child. "It actually could have been a lot worse.... I got very lucky with my teachers and with my classmates because it could have been bad.... Nobody really made it difficult. It just wasn't my thing and they knew it."

Adam, now feels "I'm a better person because of this, more understanding of other people, other kids." He added, "I've accepted it, ... I can take responsibility.... There was nothing stopping me for having gone out and learned curling or learned golf." Ben was particularly introspective about his awkwardness. After reviewing the transcript of his interview, he commented, "it brings back a lot of memories, some not so pleasant." Ben sees himself in some children of today and offers them encouragement. He added the following retrospective reflection:

> There are people that are good at things, and people that are not quite so good.... I realized that, "hey you're never going to win the Stanley Cup ... or anything like that. Be happy with that." My life would have been a whole lot easier.

Barb, upon looking back said, "I don't consider myself to be an awkward person now....

As an adult, I've learned, given time, in the right kind of circumstances I can learn to be quite good at some things."

In response to being asked to reflect on her awkwardness today, Helen mused:

> I've learned that now people are more tolerant when they ... make fun of you or laugh at you. They're not really laughing at you, they're sort of laughing at themselves. They remember themselves at that point, trying an activity, whereas before, if anyone laughed, they were laughing at me.... It doesn't bother me quite as much now, because I kind of laugh it off.... I'm not as scared of physical activity now as I used to be.

Adam, Ben, and Iris all made similar comments about the value of talking about their experience of awkwardness, as being a form of therapy. Ben said, "It was good therapy, it helped me a great deal." Iris made a similar remark:

> I noticed it right away, as soon as I read this is, that it would be therapeutic for me to talk about it.... I thought that even if I could just talk to somebody about that maybe it would make me feel a little bit ... less ... misunderstood ... because that was a very, very critical part of my life you know, my growing years. And I never really felt that I talked to anybody about that.... I thought that it may be kind of helpful to you and maybe someone might benefit by that, down the road.

Judy reflected back on physical education teachers and felt it ironic that, "if you had told me then, I would be married to a phys. ed. teacher, I would have told you, 'you were out of your mind,' because I thought you were all a horrible breed."

Advice to Teachers: More Attention and Instruction

"If somebody had shown me a few skills ..." (Fran).

In closing, participants lamented the fact that they did not receive enough instruction during their physical education experience. Gail in talking about the role of teachers, said, "probably phys. ed. teachers nowadays should look at the awkward, shy types and ... think of some little remedial stuff they could do to help these kids do better and to feel more confident and develop their skills more."

Ann thought that since she was not born with an athletic body, it was "too bad that I didn't get any encouragement." Ann continued the idea by saying that if she had:

> more instructions, when younger, it may have helped.... Maybe I'm blaming but maybe if we had phys. ed. at a younger age, things may have been easier, may have been better.... In grade six and trying to learn how to do things, when you have never been exposed to them before, it's almost getting late.... I think the more you do, the more you are exposed to things, the more likely you will improve.... I would have appreciated back then if someone had take the time.

Ann concluded, "if any of the teachers had ever said ... 'come out and try out', I may have, and if they said 'I think I can work with you', I would have tried very hard ... but it didn't happen." In a similar way, Fran said:

> It's so important to see where kids are having trouble, just like you do when they can't do carrying in addition, and look at what the problem is when they are young.... It would have been nice if somebody had shown me a few skills.

Barb, recalling her physical education felt, "I think our class size was pretty large and when I look at certain activities where we got more individual instruction ... I would

do better.... I do think it would have made a difference." Adam, also "would have appreciated learning a few skills, I think there are some things that I could have done ... if somebody had taken some interest."

Giving advice to teachers of today, Deb offered:

> Never ... get people to pick teams. That is the ... meanest thing.... You can divide the class into groups and try to put kids that are really good together and kids that are not doing so well in ... [a] ... group ... [so] ... they don't stand out as much.

When asked what advice she would give to others experiencing awkwardness, Deb replied, "find other things that you are good at... It might take you longer to learn but ... if you apply yourself someone can help you with it."

This chapter has reported the feelings and meanings participants assigned to their experiences of physical awkwardness. The next chapter more explicitly identifies and discusses the themes, which define the essence of physical awkwardness. The final chapter is comprised of my reflections and observations and concluding comments, formulated as a result of my experience with this study.

CHAPTER SIX

Thematic Analysis and Discussion

This study was done primarily in an attempt to answer the question of what it feels like and means to have experienced physical awkwardness. In so doing, this chapter presents a discussion of the study participants' words and stories from the previous two chapters. Recall that the participants' text is divided into two main categories, "awkward incidents and interactions" and "awkward feelings and reactions." These designations were an important part of the thematic analysis, wherein the character of physical awkwardness is embedded and revealed as its essential themes. The themes of physical awkwardness are derived from the participants' descriptions of awkward incidents, and associated thoughts, feelings, assigned meanings, and reflections that were mediated by interactions with and reactions of others.

This chapter presents a discussion of the findings with respect to the themes of the experience of physical awkwardness. Additionally, the results of the study are reviewed relative to the body and the lifeworld existentials (Merleau-Ponty, 1962), the Syndrome of Physical Awkwardness (Wall, 1982), and the Knowledge-Based Approach to Motor Development (Wall, et al., 1985), as cited in Chapter 3.

The Essence of Physical Awkwardness

The fundamental nature of the experience of physical awkwardness is captured in the following four essential themes. Firstly, physical awkwardness means frequently "failing and falling" while attempting a task associated with a physical activity, game, or sport. The failure is a public one. Secondly, the fall or similar mishap, leads to "hurt and humiliation" or uncomfortable thoughts and feelings. These sentiments are portrayed in

many ways, from simply "feeling bad" to more intense "embarrassment." Thirdly, as a result of the sport related mishaps, the physically awkward performer dwells upon the incidents of awkwardness, and others' reactions to them. He or she "worries and wonders" about physical awkwardness and how to escape further episodes of it. The fourth and final essential theme of the experience of physical awkwardness is entitled "avoiding awkwardness." This has the physically awkward performer employing various and sundry schemes in an attempt to evade situations where awkwardness is revealed and recognized. Notwithstanding the alliterations, these expressions, as themes, capture my interpretations of the essence of the experience of physical awkwardness.

The experience of physical awkwardness begins with one's failure to perform culturally normative sport skills (Wall, 1982). Failures in physical education, active games, and sport are not uncommon. While many children have their first major failure in life, in the field of sports (Douillard, 1995), the disappointment is not usually longstanding. However, for children who are physically awkward, sport failures are frequent and enduring.

Sport failure is experienced during a variety of circumstances. For example, early attempts at skill learning, not making a team, being cut from a team, performing poorly, making errors, losing a game or championship, not achieving one's potential, not measuring up to standards or others' performance, reaching one's performance limits, or not meeting personal goals, may each be a cause of failure and frustration. These situations are not uncommon as they reflect the structure and reality of physical education, sport participation, and competition in our Western society.

I am not suggesting that the experience of sport failure is equivalent to physical

awkwardness. We cannot be sure just exactly what the experience of sport failure feels like and means to the individual, without asking. However, most of us have experienced sport failure, while most of us have not experienced physical awkwardness. We can assume that the temporary feelings of sport failure hint at the experience of physical awkwardness in some way. While the feelings may be comparable, similar to some extent, in the case of physical awkwardness, as the Syndrome describes and this study shows, the failures are recurring, are perceived as much more negative, and their impact is potentially far greater.

Failing and Falling

The first salient and essential theme, related to the experience of physical awkwardness, is repeated public failing and falling during attempts at skilled physical activity. It is important to note that it is a public failure, because, as participants recounted, if ineptness is unnoticed, it is not as much a concern. If the physically awkward performer "survives" a physical education class, by blending in and becoming invisible, in order to avoid recognition and exposure of awkwardness, it is considered a relatively successful class.

The physically awkward performer falls frequently. However, falling is merely a metaphor for any mishap that might occur while attempting to play a game. Slipping, tripping, falling down, falling from an apparatus, falling while attempting to strike or catch a ball, or bumping into something, or someone while performing in a game is not uncommon for early learners. For most, it is an uneventful occurrence, a brief inconvenience. However, for the awkward performer, such calamities are more regular, with potentially more emotionally disastrous consequences. Falling is the final insult, a

powerful statement, punctuating the failed performance. The failing and falling is not only obvious to the faller, but also blatantly obvious to everyone else, as well.

Closely aligned to the idea of performing sport skills poorly in public, is the underlying feeling of being pressured or forced to participate. Enforced compliance such as being required to take part, to do what is expected, to conform and perform are captured in the idea of feeling trapped in the activity, unable to choose not to play. Other situations contributing to the public nature of awkwardness include being picked last for a game or not picked at all, letting others "down," disappointing the team by allowing a goal, or being teased. The resulting attention is often related to the public failing and falling, and further compounds the unpleasant feelings associated with it.

Hurt and Humiliation

As a consequence of publicly failing and falling, a second essential theme of the experience of physical awkwardness is that of various and comparable uncomfortable thoughts and feelings, or hurt and humiliation. These feelings are reinforced by interactions with, and reactions of others. The negative cognitions, various feelings and emotions that accompany repeated incidents of physical awkwardness most closely define the essence of the experience. A main impact is the effect of the collective public gaze and reactions centered on the inept performer.

The reactions to the physically awkward performer vary. They may, at times, be empathic, sympathetic, supportive and helpful in nature. However, more often than not, they are perceived as unsupportive and hurtful, manifested in discomfort, derived in part from the critical scrutiny of others.

Language used to describe a physically awkward performer's perception of his or

her public display of awkwardness is similar and familiar. Such sentiments as embarrassment, humiliation, frustration, disappointment, insecurity, fearfulness, emotional hurt, ashamedness, insult, guilt, stupidity, foolishness, or simply feeling bad are all words and expressions that were used to describe the feelings arising from an awkward incident. Words such as discomfit, discomfort, confusion, uneasiness, or distress are comparable to the above words and expressions. In brief, physical awkwardness involves feeling bad and feeling different from others during physical activity. This makes one feel even more, the uncomfortable object of notice.

The words embarrassment and humiliation were the strongest most commonly used ways of describing how one felt as a result of a physically awkward incident. Embarrass means to cause to feel self-conscious, confused, ill at ease, flustered, disconcerted, or make more difficult. Humiliate, in a similar vein, is something that makes one humble, lowering pride and dignity, to hurt feelings, or cause to feel foolish, mortified, or contemptible (McKechnie, 1983).

Given the interconnectedness in meaning of the above words, the participants' descriptions of how they felt, during the time of awkwardness are aptly chosen. It is interesting that the words and expressions used to describe feelings associated with physical awkwardness are very much akin to the account of the etymology and definitions of the word awkward, found in Chapter 3.

Worrying and Wondering

A third essential theme arising, as a consequence of an awkward incident, involves participants' worrying and wondering about what had taken place, and what yet might happen. As an athlete relishes, with anticipation, an upcoming competition, and a

champion savours a win, the physically awkward performer is concerned about the upcoming forced participation in a physical education class. He or she revisits and recalls the feelings of previous failures and falls, and worries and wonders about what might yet happen.

Prior to and after a physical education period, the physically awkward performer contemplates past incidents of awkwardness with disappointment and relived hurt and humiliation. This worrying is not only reflective of an incident of awkwardness. A great deal of worrying and wondering is focused upon finding ways in which to understand and deal with physical awkwardness. The worrying and wondering turns to questions of why the individual is so awkward, why he or she has so much difficulty in physical tasks, why skills that others find so easy, somehow seem to elude him or her.

During participation in physical education class, the physically awkward performer also worries and wonders about how to mask awkwardness, how to remain unnoticed. The wondering leads one to scheme, to think of strategies that enabled him or her to escape a situation, or if escape is not possible, to minimize the risk of exposure within the activity. The various strategies are all calculated to avoid further failing and falling and the resultant uncomfortable feelings. Consequently, the awkward performer has come to dislike, dread, or even "hate" some aspect of physical education, sport, or physical activity in general, something they wish to avoid in future.

Avoiding Awkwardness, a Subversive Activity

Avoiding awkwardness, a theme arising out of worrying and wondering, is classed as the fourth and final essential theme of the physically awkward experience. The physically awkward performer attempts to orchestrate her or his participation in physical

activity, on his or her terms. This is reminiscent of the clinical observations of obvious and subtle compensations and coping strategies of physically awkward children, described by Cratty (1994) and Stott, Henderson and Moyes (1986) in Chapter 3.

Avoidance is employed in an attempt to create ways to hide from or escape a potentially emotionally unpleasant situation related to physical activity. This meets a desire, on the part of the physically awkward performer, to get out of an activity, class, or game by either being absent from it or if that is not possible, to become invisible within the group, in order to evade further hurt and humiliation.

The physically awkward performer seeks to create situations that reduce the risk of displaying awkwardness. If possible, one plans not to participate. This can involve pretending to play within a game, taking on a supportive but inactive organizational role, or arranging to do something entirely unrelated. This is done in order to minimize involvement in what is perceived as a potentially uncomfortable situation. While others may eagerly anticipate an upcoming baseball game or physical education class, the awkward performer worries about future failures and wonders how it all can be avoided. While others think nothing about attempting new activities, the awkward performer is hesitant, quietly contemplating how to hide from it all.

The physically awkward performer, while a part of a group, is not engaged in the same ways as others. While others plan their next play in a game, the awkward performer plans ways not to play. While others select favourite activities, the awkward performer struggles to choose the least conspicuous option.

An array of avoidance and coping strategies are utilized to minimize the risk of exposing physical awkwardness. Avoidance, in its purist form, is seen in such tactics as

feigning illness or injury, or manufacturing an excuse to be absent from a physical education class. Conversely, if one cannot be absent, being present by playing, but not really playing is a useful way to avoid unwanted attention and exposure of awkwardness.

In addition to feigning illness or pretending to play, the physically awkward performer also selects a peripheral role within a physical activity as an alternative, to minimize attention. For example, requests to administratively assist the teacher, or volunteering to coach, manage, officiate, become a cheerleader or spectator, permits the awkward performer an indirect, albeit legitimate role, but not one that leads to performance evaluation.

Doing something else, such as seeking to do unrelated inactive tasks, rather than taking part in a given physical activity, also makes one unavailable to participate. For example, taking on extra credit courses, so that the timetable has no room for physical education is an attractive alternative to lining up and taking a turn in class. Taking on leadership roles in non-physical activity related school projects, such as school newspaper or yearbook editor, or organizing school social or sport events are, at times, equally appealing options for the physically awkward performer. Recall that Ann volunteered to complete an historical compilation of her school, and as a result, "missed a lot of physical education classes." The goal of the awkward performer is to be unavailable to be picked last, not picked, or placed in a risky role in physical activity.

It is important to emphasize that these avenues of avoidance are not always available to everyone, all the time. Avoidance is more accessible and successful for some, but avoiding exposure of awkwardness remains the underlying aim. Chapter 5 shows the many and various ways avoiding awkwardness is attempted and sometimes

achieved.

Discussion .

The essential themes of failing and falling, hurt and humiliation, worrying and wondering, and avoiding awkwardness seem to capture the pattern of feelings, meanings, and actions associated with the experience of physical awkwardness. These all arise from repeated unsuccessful attempts at publicly performing a sport skill, and a concern of what might happen next. When unable to successfully avoid a situation, the physically awkward performer endures and dreads it, waiting for another physical education class to end.

Themes incidental to the essential themes of awkwardness are various phenomena, feelings, and actions that are sometimes associated with physical awkwardness but alone, do not fully define its essence. For example, the external hurt or pain from failing and falling is occasionally manifested in various "scrapes, scars, and stitches," or "bumps, blood, and bruises," which are incidental to awkwardness. Similarly, teasing and mocking directed at the physically awkward performer contributes to hurt and humiliation but it is not pervasive and universally associated with the experience. Likewise, others' various reactions and behaviours aimed at the physically awkward performer are sometimes linked to awkwardness, but do not essentially define it. Finally the ranges of strategies employed to avoiding a physically awkward situation, are merely a means to escape it, but alone do not define the essence of it. The essential nature of physical awkwardness differs from the incidental nature of it in that if the essential themes of awkwardness are removed, they do not fully describe or define it. Incidental themes merely add to, but alone do not capture the physically awkward

experience.

Physical awkwardness is an experience that is manifested in similar thoughts, feelings, emotions, and actions across the participants in this study. However, there is an eccentricity that underlies the experience of physical awkwardness, seen in the various ways in which an individual reacted to the negative outcomes of performance failure. This was influenced by peer interaction and subsequently has a distinct impact on the physically awkward performer's feelings and actions and the ways in which he or she chose to deal with awkwardness. For example, each participant wished to avoid further awkward experiences, but the ways in which he or she chose to avoid differed greatly. One participate may have hidden within the group, within the activity, while another simply did not attend. Still someone else found an alternative to participating in physical activity by studying extra courses or volunteering for an inactive custodial or administrative task.

As noted in Chapter 3, when one considers the phenomenology of physical awkwardness, there are, at least four aspects of the phenomenon that come to mind: the failure to meet a task goal; the resulting self-evaluation; the reactions of others; and the consequences of the social failure. In concert, these ignite the themes that illuminate the physically awkward experience.

This study shows that there is a connection of feelings and meanings associated with the many varied incidents of awkwardness, with familiar consequences. It reveals a rather predictable pattern of events, cognitions, feelings, and actions in the physically awkward performer. It is not so much that the problem is one of physical awkwardness but one of being exposed as awkward, and consequently, hurt and humiliated by being

forced to display ineptness in public. What follows is a discussion of the study findings in the context of the body and lifeworld existentials, the Syndrome of Physical Awkwardness, and the Knowledge-Base Approach to Motor Development, first introduced in Chapter 3.

Bodily Constraints and Lifeworld Existentials

The moving body is constrained in many different ways. For example, it is constrained by its own limits, the space in which it moves, the time of movement, and its relationship to other bodies and objects in the environment. The constraints of awkwardness are socially related to the failure to perform culturally normative skills that many are able to take for granted (Wall, 1982). Merleau-Ponty's (1962) four lifeworld existentials, namely corporality, spatiality, temporality and relationality, or lived body, lived space, lived time, and lived relationships are an interesting framework in which to discuss the experience of physical awkwardness.

The lived body or corporality refers to the reality that one is always bodily in the world. This has even more significance when one considers the importance of the body while performing skilled action. The body, as a whole and its parts, is clearly visible, as one attempts to coordinate and control skilled movement.

According to Turner (1984) one's body is a site, an instrument, the social self and location that form an identity within the world. Others take notice of an efficient and effective body, one capable of skilled performance in sport. The physically awkward performer's body is also noticed, as one incapable of performing as well as others. Subjective bodily experience is mitigated by factors such as social constraints, practicality, contingency, and free will (Meskell, 1998). The physically awkward

performer's body does not move with the same ease, practicality, and utility as others. The awkward performer struggles to avoid unforeseen events that lead to awkward displays of the body in tasks that others seem to do with ease. Unforeseen and uncontrollable factors lead to physical and social awkwardness.

In terms of the monism or dualism question of body and mind, the failing, falling body is very much evident during awkward performances, obvious to others, as well as to the physically awkward performer. Recall each participant's comments of being uncomfortable with his or her body or some aspect of it during physical activity, such that it is devalued in some way. While an elite athlete is unaware of his or her flawless movements, the physical awkward performer is very much conscious of his or her body in moments of failure.

Perhaps it is not so much that there is a bias against the awkward body, but when it is compared to the skilled athletic body, the differences become so pronounced. It seems the esteem we hold for athleticism leaves very little room for any degree of acceptance or tolerance of inefficiency in the body.

It was also Meskell (1998) who said, "bodies cannot be simply explained away" (p. 148). They are indeed always present to us, and to others in the world. In failed movement, the body is most visibly responsible, as it is what is most clearly seen. However, it must be acknowledged that both the mind and body together are inextricably involved in movement because without goals and intentions, we simply do not move purposefully. In the context of physical activity, the body as the tool used to accomplish skilled movement, is very much noticed by self and others.

Meskell also states that, "our external appearance and performance does not

necessarily tally with what we feel ourselves to be" (p. 86). However, the physically awkward performer, at the time of awkwardness, makes little distinction between the body, its awkward movements, and the self. I am not suggesting that the physically awkward performer is fundamentally different from others, but with respect to physically awkward activity, he or she may well be more acutely aware of his or her body and its inability to perform motor tasks skillfully, as a representation of self.

Frankel (1984) mentions, that the question of human identity is bound up with the ways in which other people see us. Having the body repeatedly seen performing awkwardly is of major concern for the physically awkward performer. This serves as a trigger to such feelings as hurt and humiliation. This, in turn influences the way in which one reacts and acts in future, worrying and wondering about how to avoid further failures.

It is as if one's body is defined by how well one moves, or does not move. This is reminiscent of Sartre's (1956) reference to the mountain climber becoming acutely aware of another watching him. The impact on the physically awkward performer is even more devastating in that he or she is already unsure of how to execute coordinated movements. This uncertainty, in full view of others, magnifies the awkward performance.

Van Manen (1998) writes about the body experience in illness and health and refers to the person, who for reasons of circumstance, is out of step with his or her body. This is not to suggest that physical awkwardness is to be interpreted as illness, or disease. The field of Adapted Physical Activity has long argued against the assumption that disability is akin to disease or sickness. While this is not a popular comparison to make, it could be said that someone experiencing physical awkwardness is out of step or, out of balance with his or her body, in comparison to others. The out of step, unbalanced,

awkwardly moving body fails and falls short of its goal. For example, recall Adam's reference to not knowing where to place his feet and how to move them during a basketball class. For example, he felt out of step, unsure of what to do with his feet during a basketball lay-up. The distinction is subtle, but the out of step awkwardly moving body is obvious to all, particularly to the physically awkward performer.

Van Manen (1998) also notes that one takes the healthy body for granted, but not so in the case of illness. While the reference is to health, it can be said that, during movement, the skilled performer also takes his or her body for granted. One wonders if the idea of taking the body for granted is a simple matter for a physically awkward performer, as he or she is acutely aware of his or her body, particularly during repeated failed attempts at skilled movement. In the case of awkwardness, the body is not usually skilled and then awkward for a moment. It is awkward much of the time while attempting skilled movements. The physically awkward performer is aware of his or her awkward body, but not aware enough to know how to move it skilfully.

Is being out of step with the body, something experienced by one who is physically awkward? The study participants' stories suggest that it is when they compare themselves to others. It was Fitts and Posner (1967) who first proposed three stages of motor skill acquisition (cognitive or thinking about it stage, associative stage, and the autonomous stage). While most learners progress through all three stages, perhaps the physical awkward performer is caught within the first or second stage. Thus he or she never really experiences the idea of automatically performing a habituated skill with ease, because he or she lacks the necessary knowledge to perform a given skill at the third stage of motor learning.

Van Manen (1998) in closing comments, states that every person is challenged to be constantly reflectively engaged in questioning how to live in contextually appropriate relations with the body. In the context of physical activity, for the individual who is physically awkward, there is an ongoing challenge to cope with the body and its awkwardness. For example, Ben, in particular, was concerned how others perceived his body, as he described feeling he had too many arms and legs during some of his falls and failures.

Lived space or spatiality, refers to the environment in which one moves his or her body, or its parts, such as the space of the gymnasium, or the play field. For the physically awkward performer, the space in which one is expected to move the body is seen as an inhospitable space, a place that is unwelcoming. This, in turn, further contributes to the feelings of hurt and humiliation. The space of the gymnasium, that of the ball diamond, among other areas used to perform routine physical activity, provides an environment that fuels the negative feelings of awkwardness. Simply being present in the area of the gymnasium gives the physically awkward performer cause for worry, wondering what further catastrophes might await him or her in that setting.

Lived time or temporality, or subjective time, is our temporal way of looking at the world. As van Manen (1990) said, it appears to slow down when we are involved in something we do not like. The physically awkward performer painfully endures the time when physical awkwardness is at risk of being exposed. For him or her, time extends the bad feelings generated by physical awkwardness. It spans the period before, during, and after an awkward event. Dreading an upcoming physical education class, a turn at bat, waiting in line or for the class to end, reflecting after an unpleasant incident, or

wondering how to avoid the situation in future are all extended and slowed down by time.

Lived relation or relationality refers to the relation one maintains with other people, objects, space, boundaries, as well as a given physical activity. One interacts in many ways with his or her body relating to space, time, objects and others. With respect to equipment, recall Judy's uneasiness of having to face the climbing rope, Enid's fear of the uneven parallel bars, Helen's frustration with a tennis racquet, or Deb's aversion to a ball. In short, the awkward performer has an uncomfortable relationship with his or her movement environment, objects in it, and others.

Interacting with others in games is also difficult for the physically awkward performer, because his or her goal is not necessarily the same as the goals of others involved in the dynamics of a game. In the case of the physical awkward performer, the goals differ in that most others want to interact with the ball to achieve an objective such as scoring, while the physically awkward performer has a primary goal of simply avoiding the ball. If he or she achieves this, he or she feels successful in the activity. The goal of not exposing awkwardness and its emotional consequences is thus attained. The awkward performer does not relate well to others in a games context. He or she feels alone within the group because he or she does not wish to be present, interacting in the game, with the ball, teammates, opponents, or the teacher.

The teacher has a paradoxical relationship with the physically awkward performer. The teacher's primary purpose is to instruct, but the awkward performer does not necessarily want to be taught. In fact, the teacher of physical education may not necessarily recognize the individual as awkward because he or she is concealing it so well. If the teacher recognizes the awkward performer, he or she may be viewed as an

unmotivated student, a lost cause, to be ignored or politely dismissed. The participants' descriptions of the physical education instructional environment suggest less than appropriate teaching practices were somehow implicated in their experience of physical awkwardness, as was described in the stories in chapters 4 and 5 and will be discussed further in this chapter.

There is an odd connection between the physically awkward performer and the lifeworld existentials with which she or he interacts. Lived body, lived space, lived time, and lived relations combine to accentuate the plight of the experience of physical awkwardness. Interacting with other people and objects in an unwelcoming space, during an uneasy time with a body with which one is uncomfortable, while attempting a skilled movement, are powerful forces and factors that have a potent impact on the individual. This makes him or her feel even more the unwanted center of attention, action, and awkwardness.

The Syndrome of Physical Awkwardness

Wall's Syndrome of Physical Awkwardness (1982), is comprised of an assumed series of events and behaviours that can be observed, along with speculation about what might link them. As described in detail in Chapter 3, the Syndrome describes a downward spiral of events and behaviours that begin with the public evaluation of poor motor skills. As a consequence, the physically awkward performer is labelled as clumsy, ridiculed for inept motor performance, and eventually excluded from group play and game situations. After repeated incidents the individual voluntarily withdraws from physical activity, as there is minimal enjoyment and interest in active play and games. This is due to reduced motivation, and discouragement from others' negative reactions to

the awkwardness.

The resulting practice deficits, motor learning difficulties, and low level of physical fitness, contribute further to increased skill deficiency that are linked to the rejection, withdrawal, and social isolation of the physical awkward performer. Other factors, suggested to be part of the Syndrome, include a tendency to being overweight, having few or younger playmates and a preference for individual as opposed to group activities.

The detrimental psychological and social consequences of awkwardness have an impact on personal happiness and general development, specifically in the area of reduced self-esteem and self-confidence. Ultimately, disruptive social interactions and undesirable behaviours, such as aggression are purported to occur.

The located descriptions of the Syndrome of Physical Awkwardness are not lengthy or detailed in accounts of the consequences of the condition. There is a general impreciseness in the way in which Wall and other authors have explained it. It is unclear which variables lead to which actions and which are moderators or mediators of behaviour. If, as the Syndrome suggests, there is an assumed pattern, cause-effect, or serial order to the events that occur as a consequence of awkwardness, descriptions of it are not clear about what they are. A variable has to be carefully defined as leading to a particular behaviour and whether an intervening variable is an influence. The Syndrome of Physical Awkwardness, as proposed by Wall and others has failed to do this, perhaps because there is such variability in the way in which the syndrome unfolds in different individuals.

In looking more closely at each aspect of the Syndrome of Physical Awkwardness,

one can see how the participants in this study, in some respects conformed to, and yet also differed from Wall's account of the outcomes of physical awkwardness. In a sense the study participants give an insiders' perspective to the Syndrome of Phyical Awkwardness, not a test of it per se, but the subjective perspective to it.

In comparing all the located descriptions of the Syndrome of Physical Awkwardness to the results of this study, it is clear the study participants had a lack of motor skills. This is evident from the many and varied stories of physical awkwardness described in Chapter 4. All felt their inept motor skills were publicly evaluated and overtly or covertly criticized. Subsequently, everyone attempted to withdraw and or avoid physical activity, but withdrawal and avoidance were not always a viable option.

Wall's and others' accounts of the Syndrome imply that withdrawal is something that is freely available and easily achieved. However, the experiences of the study participants would suggest otherwise, particularly in their in-school physical activities. It was more difficult for the participants to withdraw during school physical education and intramural activities because participation was either a course requirement or was encouraged by teachers and peers. Participants had more control in their out of school physical activities but given the popularity of physical activity among children and youth, they were often part of the action but were wary of playing since the decision to withdraw was socially expensive.

Thus while the study participants told of many ways to avoid physical activity, simple withdrawal was not always a choice or option for them. They had to endure and continue to worry and wonder within their imposed environment. There seems to be a distinction between structured and unstructured or voluntary activity settings. In

unstructured settings the participants could better pick and choose in what, when, and how to participant.

However, it is worth noting that, by and large, participants were physically active in some activities such as swimming, skating, and dance. So there was never really a complete withdrawal from physical activity. This is an important area where the study participants showed a difference from Wall's account of the Syndrome. This is not to suggest that they did not want to withdraw, for as Enid said about skipping class, "I would have done it in a second ... [if I could get a way with it]." As Chapter 5 shows, there were many attempts at withdrawal, which I have termed avoiding awkwardness. It is interesting that it is displays of awkwardness that one wishes to avoid, not physical activity per se, although the distinction is blurred.

With respect to lack of practice and practice deficits, I wonder if it is more accurate to say that there is a lack of appropriate practice, due in large part to a lack of appropriate instruction, a key related variable. Wall indicated to me that he felt, it is not so much that one is physically "awkward", but a situation where one is physically "uneducated." This has obvious instructional implications. Although practice is more frequently driven by the self some instructional cues are needed. To what extent physical awkwardness is due to a lack of skill acquisition resulting from lack of instruction, lack of practice or both is unclear. However, there is no doubt that both instruction and practice were mediating factors in the participants' experiences of awkwardness.

While all participants experienced little if any enjoyment in those physical activities that made them feel awkward, everyone participated in other activities with some success. From the participants' accounts of awkwardness, it can be argued that there

was a disinterest in selected physical activities and a corresponding poor attitude toward those physical activities that revealed awkwardness. However, disinterest and a poor attitude toward physical activity was not universal within and across participants. By and large, successes occurred in individual, self-paced activities. However, many team sports were also mentioned as accomplishments.

Contrary to what the Syndrome proposed, most participants were not ridiculed as a result of their inept motor performance. Only one study participant was formally labeled "clumsy," not by peers, but by a physician. Exclusion from group play was also not evident, except in the case of Ben, and his segregation was not consistent.

With respect to the prediction of low fitness, Wall (1982) and Wall, Reid and Paton (1990) note that, as a result of the lack of practice, physical fitness is affected. It is difficult to say with certainty, that decreased fitness is a result of, or unrelated to awkwardness. However, the study participants mentioned less than positive outcomes from their fitness testing experiences. Nonetheless, as stated above, all participants were physically active to some degree. This would have contributed to developing fitness, to some extent. The motor performance component of fitness testing that is dependent upon coordination, agility, and balance might well have an impact on fitness scores.

While the participants were personally unhappy with their awkwardness, mainly during times when it was revealed, this did not spill over into other aspects of their lives. Was their general development affected as a result of awkwardness, as the Syndrome suggests? The participants' stories did not leave me with that impression, as they were content doing other tasks.

With respect to the forecast of increased skill deficiencies or increased learning

difficulty, there is no indication that awkwardness got worse. Perhaps it is more accurate to say that, while others improved their motor skills, the participants' proficiency did not progress, and awkwardness was a stable feature of their lives. I am not sure it is accurate to say that participants became more awkward with time. Perhaps others became more skilled and the differences were more obvious. It is possible the study participants also improved their skills over time, but they were still within the bandwidth of physical awkwardness.

The study participants, while selectively physically active, were at times quite creative and resourceful in finding ways to avoid subjecting themselves to situations they found to be uncomfortable. It is unclear whether participants had poor self-esteem as a result of their awkwardness, in the absence of self-esteem measures, but it would appear from the participants' accounts that self-esteem was affected. However, they did report satisfactory involvement, to various degrees, in academics, arts, and other non-physical activity interests.

With respect to social isolation, rejection, behavioural difficulties, and aggression, the study participants' stories again deviate from the Syndrome. Reports of extreme atypical social behaviours among the participants are not evident. Ben came the closest to demonstrating withdrawal, social isolation, behavioural difficulties, and aggression, as the Syndrome describes. However, he did not fully conform to it, as these behaviours were occasional. Besides, Ben did not really totally withdraw, as he stubbornly persisted in trying to learn and perform sport skills, even after his failures and peer rejection.

Another major difference between the Syndrome of Physical Awkwardness and the stories articulated by the study participants, relates to the intensity of hurt and

humiliation and other feelings associated with awkardness. While the Syndrome, and other literature, report negative affect as central outcomes of awkwardness, the literature, by and large fails to mention the strength and intensity of those feelings. For example, in research accounts of physical awkwardness and DCD, the words embarrassment and humiliation are rarely used, though Symes (1972) used the word humiliation in reference to the physically awkward child's reaction to peers' reaction and rejection. Is it possible that those who conduct research in the area, and others underestimate the magnitude or intensity of the feelings of the physically awkward performer?

Thus, physical inactivity, social isolation, peer rejection, and aggression were not automatic outcomes of physical awkwardness for the participants of this study. The study participants, by and large, were active in some form, had friends, a support group with whom they interacted and shared interests. However, the interests were not necessarily physical activity related. The study participants' stories do not conform to the Syndrome of Physical Awkwardness entirely in the way Wall describes. What emerged, is not so much a syndrome, but a scenario of behaviours, one that is highly variable from individual to individual, as will be discussed.

Knowledge-Based Approach to Motor Development

As described in Chapter 3, Wall, McClements, Bouffard, Findlay, and Taylor (1985) have proposed a Knowledge-Based Approach to Motor Development, with implications for physically awkward children. The Knowledge-Based approach is briefly outlined below for purposes of discussion.

Wall et al., (1985) outline a holistic heuristic model, an approach to motor development that emphasizes the significance of genetic endowment or structural

capacity in motor skill acquisition, but also respects acquired knowledge attained as a result of experience. Recall in Chapter 3, that the approach identifies and describes four main domains of knowledge that are obtained through experience (procedural, declarative, affective, metacognitive). The domains interact in the acquisition and performance of skilled action.

The Knowledge-Based Approach to Motor Development states that skill development and motor proficiency is dependent upon not only age and maturation, but also on the learning experiences of the individual. However, motor learning opportunities may not always be available to the physical awkward performer due to such factors as rejection, withdrawal, or avoidance of physical activity. The outcome is such that the physically awkward performer lacks opportunities to develop and acquire motor skills in the way most others do.

The study participants' experience of physical awkwardness suggests that they generally had limited access to knowledge about action, declarative and or procedural. For example, Helen wondered why many others, could "put the skates on for the first time ... and were able to do it.... I couldn't get that rhythm." Enid also speculated about, not having "eye-hand coordination, not understanding ... the kind of dynamics of what you're supposed to be doing."

Causgrove (1987) also found that physically awkward children were significantly behind their peers in procedural knowledge about action as the Syndrome of Physical Awkwardness proposes. The lack of procedural knowledge is explained in part by a practice deficit. The practice deficit is the result of motivational variables and strategies adopted to avoid negative affective experiences.

Prolonged practice deficits lead to performance decrements relative to peers. That the study participants devoted a good deal of effort to finding ways not to participate and practice motor skills, especially within an instructional context, shows that there was less desire and opportunity for practice. Many strategies were employed to mask awkwardness and avoid public scrutiny. The avoidance strategies, when successful, contributed to practice deficits. To illustrate, Deb remembered, "as soon as we introduced a new ball sport ... I would just make myself sick because I knew I couldn't do it." When she was really ill, Deb said, "I wasn't in the least bit upset that I didn't have to go." Helen also simply avoided taking part in physical activity due to her frustration with her poor skills. Enid used an invisibility strategy." I just made myself invisible ... kind of stand to the side." She elaborated on her strategy in line-ups:

> if there was a line up, I would always make sure that I was the last person. Because ... if you were the last person, ... they would go through the line up, and there wouldn't be enough time. So you wouldn't have to do what ever the activity was.... They would sort of ignore you.

Adam recalled his hiding tactic in line-ups that contributed to his practice deficit. "I kept going to the end, until the whistle blew and then went on to the next station." Thus, the study participants were unable to acquire or apply knowledge about action due, in part to the avoidance of instructional and practice opportunities.

In some instances, the participants had declarative knowledge about action that is, they knew what to do, but they did not possess the necessary procedural knowledge that is, they did not know how to do the skill in question. As an example, recall that Fran "felt that I should be able to do it better but what I thought I could do from a logical point of

view, my arm didn't do it for me. And I don't know why." Yet, it is also obvious that others had neither declarative nor procedural knowledge, let alone higher decision making metacognitive skills, needed to perform a task skillfully. For example, Enid commented that she "had no idea what we're doing.... no sense of the strategy of the game."

It is apparent that the study participants' low motor skill and reactions of others had an impact on their affective knowledge about action and, in turn, the low affective knowledge had a reciprocal influence on skill development, mediated by a lack of declarative and procedural knowledge, reinforced by voluntary practice deficits.

It is no surprise that participants had no idea what to do with the ball or where to position themselves, during a game, if no one showed them. Although it is interesting to note that they were very skilled at knowing how to position themselves to avoid the ball and the action. This is where practice deficits had a major impact on declarative, procedural and affective knowledge about action. Participants were becoming skilled at avoiding the ball, not manipulating it. Lack of success from repeated disastrous experiences in physical activity, in turn had a devastating impact on affective knowledge about action. In addition, others' negative impressions contributed to the participants' negative affect.

The participants' stories provide numerous examples to illustrate individuals' negative self-perceptions, and the experience of tension, anxiety, embarrassment and humiliation, due to awkwardness, as shown in the data chapters 4 and 5 and captured in the themes of "worrying and wondering" and "hurt and humiliation." These themes show the apprehension, uneasiness, and angst associated with repeated, unsuccessful public mishaps while attempting to execute a skill or play a game. Words and expressions such

as feeling badly, frustration, disappointed, dread, insecure, emotional hurt, ashamed, stupid, foolish, fearful, hate, angry, insulted, guilty, embarrassed and humiliated were commonly used by participants in describing negative self-perceptions. For example, Fran, in reference to having her awkward performance viewed by others recalled, "I don't like being watched.... Once you start worrying about it, it gets worse and worse and worse." Deb also negatively felt that "the main thing that bothered me ... [was] ... drawing attention to myself for being so untalented."

There are many examples of embarrassment, as articulated in the theme of "hurt and humiliation." For example, Ben was often, "embarrassed, always embarrassed." Adam also felt embarrassed, performing in front of girls. "They would see that you weren't very adept." Gail, "lost a lot of interest in sports because I felt that I was so uncoordinated ... and embarrassed." Ann "was embarrassed about falling down," while Cori felt uncomfortable "putting yourself in a position where other people can laugh at you.... definitely embarrassed."

The link between the identified themes of this study and the Knowledge-Based Approach to Motor Development is where knowledge about action underlies motor development and motor performance such that people, such as the study participants lacked knowledge about action in one or more of the knowledge domains. Affective knowledge about action was negatively impacted by the lack of declarative, procedural and metacognitive knowledge, further influenced by the negative reactions of others and the individual's pessimistic self-perceptions.

Therefore, as is seen in the presentation of the participants' stories in chapters 4 and 5 and as cited above, it would seem that the study participants did indeed lack

knowledge about action, as Wall and colleagues predict (1985). However the knowledge deficit was not uniform for all participants or across all of the domains of knowledge about action, as is seen in comments by Fran and Enid. Fran understood what should be done when performing a skill, but what she thought she could do and what she could actually do were different. This suggests that she had declarative knowledge but not procedural knowledge. Enid, on the other hand commented that she "had no idea what we're doing.... no sense of the strategy of the game," suggesting she did not have declarative, procedural, or metacognitive knowledge about action.

That some participants stated they sometimes knew what to do (declarative knowledge), even though they could not actually do it (procedural knowledge) is an interesting point. This may suggest that underlying deficits and or lack of practice affects the development of procedural knowledge, but not necessarily declarative knowledge. Is it possible one can only learn "how to do" with practice, but can learn "what to do" by watching others, listening to instructions, and not actually performing the task? Is it possible that the study participants benefited from observational learning, which they would probably view as less threatening than actually doing the skill in question? Motor learning research and literature on pedagogy emphasizes the importance of motor skill observation and demonstration as part of the learning process (Vogel & Seefeldt, 1988).

It is difficult to say the extent to which the study participants actually lacked knowledge about action. It is possible that they were simply unwilling to expose themselves to the risk of participating when learning a new skill. They may not have even been aware of what they could and could not do, perhaps because they simply, by and large did not care. While the participants lacked metacognitive knowledge, they did

not necessarily lack metacognitive skills in that, some at least knew what to do to get help. For example, they knew that they should ask the teacher for help, but they did not do so.

It is likely they did not seek help because of their lack of affective knowledge about action brought about by previous failures, negative reactions of others, and poor self-perceptions regarding their inept motor skills. Their negative emotions or feelings about physical activity and motor skills ultimately made them feel pessimistic about their performance. As a result they were tense, anxious, and embarrassed, feeling badly about their performances and themselves in physical activity situations. Eventually they simply gave up trying, did not care and avoided participation. As Ann summed up:

> when you first start out you're hoping you can do everything that everybody else can do ... but by the time you're in high school ... and you're at the bottom at the physical education tests, ... it was obvious to me that it wasn't something I was going to excel at.... If any one made fun of me, I really didn't care at that point.

Deb also became resigned to her awkwardness. "Whatever sport we tried ... I wouldn't do very well.... That's the way it is, that's the way it has always been.... It was a fact of life for me to be like that." She "accepted the fact that I was not to be athletic." By and large, participants eventually opted for other activities. Barb explained, "you don't make any ... [team] .... Okay fine. I don't need to beat myself up anymore. I'll do other things, I'll join other kinds of activities at school."

A Scenario of Physical Awkwardness

There is a distinction between a series of behaviors and a syndrome of characteristics. The latter is the more conventional idea of a syndrome. Wall might have

used the term syndrome incorrectly. Perhaps scenario is a better way of describing the course of physical awkwardness. A scenario is an outline of the plot of a play, indicating specifications as to the story, scenes, situations, characters, and acting directions. As has been shown, for the participants in this study, the scenario of physical awkwardness is one that is predictable in many respects, but also highly variable. The physically awkward performer is the director and lead actor in the scenario, but is not always fully in control of his or her role. Based upon the information provided by the study participants, the following scenario is proposed. It is presented, not so much to refute Wall's Syndrome, but to complement it by adding the subjective or insider perspective.

The story of physical awkwardness begins in childhood with a failure to perform active play and sport skills. In so doing, the awkward performer is not simply unsuccessful, but the failure is exaggerated by something as obvious as falling in front of others, missing the ball, or causing one's team to lose. As a consequence, one stands out, is on display, or is the unwanted center of attention. The dynamics of the situation are mediated by the physically awkward performer's internal self-imposed perceptions, thoughts, and feelings (hurt and humiliation), which are influenced by interactions with and overt reactions of others. The physically awkward performer values the approbation of others as an indication of one's own value. Other's reactions range from no apparent acknowledgement or awareness of the plight of the physically awkward performer to obvious disdain or condescension in the form of disgust, impatience, or teasing.

As a result of repeated awkward incidents, and others' reactions and interactions to them, the physically awkward performer is uncomfortable with his or her body, some bodily attribute, or the display of the body, during the unsuccessful public attempt at a

skilled activity. As a consequence of awkward incidents and interactions, further uncomfortable feelings arise because one does not wish to repeat the awkward incidents and continue to experience the negative feelings.

The individual dwells upon and worries about his or her awkwardness being further exposed. The awkward performer begins to wonder about how to avoid further exposure, and covertly and overtly tries to shun participation and conceal awkwardness. Avoidance is a protective shield from further negative evaluations.

Attempts at withdrawal take on many forms. However, it is noteworthy that, avoiding awkwardness is not always a viable option. Since withdrawal is not always possible, by and large, the physically awkward performer half-heartedly tries and persists, continuing to quietly question why he or she does not succeed in an activity, wondering why he or she is so awkward.

It is also interesting to note that there is often a conscious decision on the part of the physically awkward performer, not to seek assistance, due in part to lack of encouragement from peers and teachers. Indeed, there is reluctance to seek instruction, even when given an opportunity. This may be so, because the awkward individual may not want to draw even further attention to his or her dilemma. In addition, expectations for success as a result of instruction may be low.

Claiming illness or injury to avoid attending physical education is a useful avoidance strategy. Along that vein, having a parent write a bogus excuse, or forging one's own, is also a way to get out of physical education, and pass up the risk of displaying awkwardness.

Humor is also used, in some instances, to divert and deflect attention from public

awkwardness. However, it is ironic that the physically awkward performer sees little humour in his or her situation. Humour is simply a way of shifting attention. Perhaps the awkward performer uses humour as a mask to awkwardness to overwhelm it, as a defense mechanism. Awkwardness is still evident, but humour devalues the activity, suggesting to others that it is unimportant to the physically awkward performer.

The physically awkward performer, at times, pretends to play, that is, playing, but not really playing. An effort is made to blend into the activity, to become invisible within the group. At other times, one quietly tries to steer clear of interactions with the apparatus, equipment, and others in order to avoid having to act.

The physically awkward performer also selects certain roles in activities or certain other activities, in order to minimize attention to a lack of coordination. For example, he or she opts to coach, manage, organize an activity, be a cheerleader, or a spectator, almost anything, rather than participate. In such a role, he or she has a legitimate role, but not a performing function where physical awkwardness is at risk of being exposed.

If possible, the physically awkward performer completely stays away from an activity by doing something entirely different, thus becoming unavailable to take part in the given physical activity. For example, seeking to assist the teacher in cleanup, or taking on an organizing or administrative role, at the periphery of the action, is more attractive than participation in physical education. A slightly different kind of strategy involves doing something exclusively unrelated to the activity, in order to be unavailable during physical education class.

Over time, the awkward performer begins to acknowledge and accept physical awkwardness, showing an indifferent attitude, or devaluing the activity. In a sense, there

is a reluctant resignation to, and gradual acceptance of, physical awkwardness, an outcome of repeated unsuccessful attempts at participation in physical activity. The impact of repeated motor failures is less with time as the individual becomes less concerned and more accepting of his or her awkwardness.

Eventually, the physically awkward performer is no longer required to take part in physical education. He or she has control over choosing whether or not to participate, and is generally thankful and happy to be rid of mandatory attendance and forced participation. As a result, in future, one feels more in control of being able to decide to participate, or not.

Reflecting on past experiences of physical awkwardness, the awkward performer expresses regret as to how hard he or she was on himself or herself, at the time. Advice is offered to teachers of physical education to encourage more sensitive awareness and tactful instruction for others. One welcomes the opportunity to talk privately about the experience of awkwardness. The openness and willingness to speak about it suggests there is a need to communicate more closely with the physically awkward performer.

This chapter has presented a discussion of the study participants' words and stories along with the themes of physical awkwardness, derived from the participants' descriptions of awkward incidents, and associated thoughts, feelings, assigned meanings, and reflections that were mediated by interactions with and reactions of others. Additionally, the findings were also reviewed relative to the body and the lifeworld existentials (Merleau-Ponty, 1962), the Syndrome of Physical Awkwardness (Wall, 1982), and the Knowledge-Based Approach to Motor Development (Wall, et al., 1985). The following, final chapter explores my reflections and observations on the study,

addresses the purpose of the study and questions identified in Chapter 1, and suggests ways in which the negative experience of physical awkwardness, as described by the participants in this study might be altered, to make the physical activity experience more positive.

CHAPTER SEVEN

Reflections and Observations

This concluding chapter explores my reflections and observations on the study and suggests ways in which the negative experience of physical awkwardness, as described by the participants in this study might be altered, to make the physical activity experience more positive. The following thoughts and reactions to the study are taken from field notes recorded during the process and progress of the inquiry.

Reflections on the Study

With respect to my initial thoughts, upon embarking on the study, I wondered if what I had proposed was in fact achievable. I wondered if I could actually locate participants who had experienced physical awkwardness and, once located, could in fact engage them in conversations. Over time, I was pleased that I was in fact, not only able to find participants but was able to have lengthy dialogues with them about their past lived experiences of physical awkwardness.

The information gathering took place over 3 years, between 1998 and 2000. A pilot study, conducted with 3 participants, allowed me to become familiar with the recording technology, make me and the study participants feel more at ease, and also conduct a preliminary review of the information. This enabled me to refine the study protocol, and questions.

Participants were sought and located in a variety of ways, from a variety of sources. Unfortunately not many participants were located from traditional attempts at recruitment. A newspaper advertisement yielded but one call of inquiry. I found participants in unlikely ways. For example, at a neighborhood gathering, the topic of

sport participation arose. One of the guests was quick to announce that she was "no good at sports" (Deb). I engaged her in an informal dialogue, to learn more, to see if she might fit my study and might be willing to take part. As a result, Deb became a participant in the study and provided me with countless descriptions and impressions of her awkwardness.

Casual conversations at meetings or social events occasionally would elicit interest from a potential participant or from one who knew of another with whom the study might resonate. All leads were followed and every opportunity was taken to invite individuals to become involved in the study. I welcomed the opportunity to discuss my work with anyone at anytime, in any setting.

Some individuals were eliminated as possible candidates, as they did not seem to fit the criteria of awkwardness. For example, potential participants were excluded if it was determined that a disability may have restricted participation in physical education, play, games, and sports. Even though it may be true that such an individual might well have felt physically awkward, I wanted to be as certain as possible, that I was investigating awkwardness, not a specific disability or some other phenomenon or experience.

The participants in this study can be described as bright, articulate, gainfully employed, successful contributing members of society. They volunteered many stories of physical awkwardness, over many hours, in effect acting as co-investigators. The fact that they were so willing to talk freely about their experiences of physical awkwardness makes me wonder, if they would have been as open, when they were living the experience, if given the opportunity. How would others, less articulate and extroverted,

describe their experience of physical awkwardness?

With respect to the purpose of the study, as outlined in Chapter 1, I have gained insight into the lived experiences of persons who have felt physically awkward or clumsy during past participation in active play, physical education, games, and sports. I have a deeper understanding of the feelings and meanings ascribed to the experience of physical awkwardness, as identified in its essential themes.

In answer to the questions posed in Chapter 1, I was successful in my intent to investigate physical awkwardness at the person level, give a voice and forum to the person perspective, and show the significance of it all from the experiencer's point of view. Additionally, as Chapter 5 shows, I have increased sensitivity and understanding of how the participants coped with their awkwardness, of how they acted and reacted, in response to doing poorly in game situations. The text indicates how it did matter to them that they were not proficient in physical activity, but also shows that they eventually came to accept their awkwardness.

Through the process of the thematic analysis, the essential and incidental nature of physical awkwardness has been identified. Themes of failing and falling, hurt and humiliation, worrying and wondering, and avoiding awkwardness have given me a better insight into what the phenomenon of physical awkwardness has meant to the study participants. However, ultimately I will leave the final interpretation to the reader.

Why More Women than Men?

Since most of the research into DCD has identified more males than females, I initially expected more males to take part in the study. There were only 2 male participants among the 12 people who agreed to take part in the study. Is it possible

women were more willing, or felt more comfortable talking to me about their experiences of physical awkwardness? Is it possible that men, more than women, are more reticent to come forward? This might be tied to the past cultural expectations that males should be proficient in sport.

Perhaps the impact of physical awkwardness is different on girls and women than it is on boys and men. Perhaps the female participants in this study felt more compelled to discuss their experiences. Nonetheless, the 2 male participants who did take part were forthright in their comments and were not at all reluctant to volunteer stories of awkwardness.

Knowing When to Stop the Recorder, When to End the Participant Search

I was most pleased during those times when conversations occurred without obvious inhibition of the tape recorder, or my need to ask questions, or otherwise comment. I learned very quickly not to be too anxious to interrupt a participant. More importantly, I learned not to be too eager to close the interview and turn off the tape recorder. Casual comments, as the close of an interview, often led to rich lines of questioning and conversation.

The decision to conduct no other interviews and cease the participant search came about during the initial process of the thematic analysis. It was simply a subjective decision. I came to the conclusion that more conversations with the participants and others were not going to further illuminate my central question. I was hearing similar stories from each and all participants. There was an increasingly familiar ring to the stories within and among participants. I began to feel informed and enlightened by the conversations. I sensed it was time to cease the search for others, as I felt I was

exhausting my sources. I had a feeling of being saturated, as there was an emergence of regularities in the text.

Reflections on the Findings

While I am familiar with the literature on physical awkwardness or DCD, including the emotional and social consequences, I was initially unsure of what I would learn from the study participants. At the outset, I was uncertain what essential themes would emerge. I would not have predicted the 4 themes that have been identified.

Specifically, I was unprepared to learn of the intensity of feelings, associated with the experience of physical awkwardness, as described to me, by the study participants. I did not know that hurt and humiliation would be such a poignant theme of the experience. I was also surprised at the amount of time and effort that was devoted to worrying and wondering about physical awkwardness. I also did not expect to learn that there was a reticence on the part of the study participants to seek instruction. Furthermore, I was unprepared for the considerable efforts of the participants to avoid awkwardness.

I could not have predicted that participants' final reflections of awkwardness would be framed in such an accepting way. For example, as Fran said, "It did not spoil my life." Like others, while she regretted the experience, she eventually accepted her awkwardness. I was pleased at how forthright the participants were with me. Finally, I was surprised that the individuals felt that their participation in this study was therapeutic, that they were eager to have the chance to discuss their physical awkwardness with me.

What to Do About Physical Awkwardness

With respect to the identification of specific actions that might be taken in order to meet any unmet and unstated needs of persons who are experiencing physical

awkwardness, I close with the following observations. Since there seems to be a reticence on the part of the physically awkward performer to seek instruction, it is incumbent upon teachers of physical education and others who act instructionally with the individual to take the lead. This can be achieved by creating an environment that invites the physically awkward performer to participate in a way that gives him or her the best possible physical activity experience.

Teachers of physical education should be encouraged to regularly check to determine the level of engagement and understanding of students in their classes and determine how students really feel about their participation in the activities. It is important to better inform teachers of physical education of the impact of potential failures, feelings, and fears to better meet the physically awkward performer's needs.

There is much research on empirically tested ways to provide instruction in physical education. The literature on physical education pedagogy is rich with research on best teaching practices and guidelines for effective instruction (Vogel & Seefeldt, 1988). If applied more consistently, improved instruction would surely begin to meet the needs of the physically awkward performer and perhaps alter the experience. A challenge is to ensure that teachers of physical education are informed of the strategies and encourage their utilization.

The knowledge-based model makes little mention of how to instructionally apply knowledge about action. However, the implication is that, if one is introduced to activities that are congruent with his or her needs and skill level, increased success will result, and concurrently, so will movement confidence, competence, and positive self-perceptions. The awareness of the importance of affect within the physical activity

environment must be an important consideration while interacting with the awkward performer.

It is apparent that affect, that is the emotional impact of physical awkwardness, is an important reality to consider when interacting with the awkward performer. It should be considered during all aspects of programming, during observation, assessment, and intervention, in remedial and regular settings. I am not suggesting that we enter the debate about primary and concomitant goals of physical education (Davis, 1989; Sherrill & Montelione, 1990).

Briefly, Davis (1989) describes two categories of goals in adapted physical education. "The primary goals are the improvement of physical and motor fitness and the development and acquisition of motor skills. Concomitant goals ... include language, social, and cognitive skills" (p. 205). Davis argues that "each activity in physical education must include at least one primary goal; if it does not, then it is not physical education" (p. 210). Sherrill and Montelione (1990) conducted a study to develop an instrument to assist in prioritizing adapted physical education goals. The findings support the consideration of self-concept as equal in importance to fitness and motor skills. Sherrill believes that self-concept should be a primary goal of physical education, however she does not totally dismiss the fitness and motor goals that Davis identifies as primary (Sherrill & Montelione, 1990).

What I am suggesting is that, when instructing a physically awkward performer in a physical activity environment, the way the individual feels about taking part is an important factor to bear in mind. In other words, affect must be a consideration but only in the context of instruction and skill acquisition. It is not enough that a physically

awkward performer feels good. Steps must be take to impove skill such that one feels better about the resultant successes, and is encouraged to continue participation, skill development and participation.

Teacher preparation programs might take steps to ensure that teachers of physical education, coaches, researchers and others are aware of the potential impact of physical awkwardness, and the perspective of students who are physically awkward, when teaching, coaching, and otherwise interacting with them. Much attention has been given to the average to above average performers. More awareness and attention should also be devoted to the awkward performers' needs.

It should come as no surprise that the study participants were left unskilled, and untaught, as they actively attempted to get by in physical education unnoticed. Given the reported incidence of physical awkwardness, it is no wonder that one or two students in a class would go overlooked by a teacher, particularly since they were happy to remain anonymous or invisible.

The physically awkward performer should be invited to seek help and assistance from teachers, peers, and others. However, the ultimate responsibility for dealing with physical awkwardness lies not with the physically awkward performer, nor the researcher, but with the teacher of physical education. However, the teacher of physical education must first recognize the anonymous or invisible physically awkward performer.

Perhaps teachers of physical education who generally like physical activity, who are skilled, who have had positive experiences in sport and physical activity, assume that all students naturally like physical activity, are skilled, and have had positive experiences. This study suggests that this is not the case. This raises the issue of how physical

education faculties and teacher preparation programs have been good at encouraging better skilled people as prospective teachers of physical education, in effect reproducing skilled practioners. Perhaps our field also needs to attract and develop professionals who have not had a good physical education experience.

Changing the experience of the physically awkward performer can initially be accomplished by increasing teacher awareness of the problem of awkwardness. Sensitive instruction, remedial programming, club activities, peer tutoring, and more meaningful communication and interaction with the physical awkward student, are but a few ways to change the experience of awkwardness.

Taylor (1988) suggests that leisure counseling be employed when communicating with the awkward performer. Wall (1982) recommends the introduction of more individual, self-paced tasks that can be attempted within the physically awkward performer's own timeframe. Ways to create an instructional environment that makes the physically awkward performer a more self-regulated learner should also be considered (Bouffard & Reid, 2000).

There should be greater opportunities for voluntary participation in regular and remedial activities. Perhaps the diversity of research on physical awkwardness and the meaning of the experience require more individualized intervention, as recommended by Thompson, Bouffard, Watkinson, and Causgrove Dunn (1994). The philosophy and principles of inclusive physical education might also be applied, as an approach that would take into account the awkward performer's needs (Block, 1994; Health Canada, 1994).

During instructional situations, there should be a concerted effort to match the

physically awkward performer's resources to the instructional demands of the situation. Perhaps a more gradual introduction to winning, competition, and game playing within the instructional environment might make the physical education experience more palatable for the physically awkward performer, and others as well. More choice in activities and a greater acceptance of non-traditional ways to perform tasks, as has been suggested in the Ecological Task Analysis Approach to instruction, might also be exercised (Davis & Burton, 1991). Research on instructional strategies, on ways to assist the physically awkward performer has been available for decades. Teacher awareness and access to the pedagogy may not be utilized as much as it could be. However, the lack of time available to teachers for instruction may also be a limiting factor.

Further Wonderings, Further Questions

In closing, future phenomenological studies that focus specifically on various aspects of the Syndrome of Physical Awkwardness might provide further insight into the problem of awkwardness. In addition, a phenomenological focus on the identified themes of this study may provide further insight into the experience of physical awkwardness.

Further research questions that come to mind include: what is the nature and essence of hurt and humiliation in the context of awkwardness; what is it like to be picked last due to physical awkwardness, or to be teased; what is so appealing about the successes of the study participants that made them feel better about participating; and finally how does one cope and arrive at acceptance of awkwardness?

With respect to gender, age, instructional environment and physical awkwardness, are there differences in meaning ascribed to the experience of physical awkwardness for males and females, at different ages, in different instructional environments? Given that

the study had predominantly female participants, a further inquiry might focus on the nature of physical awkwardness, solely from the female perspective. Additionally, perhaps a study focusing only on males' experiences of physical awkwardness should also be considered.

It also seems logical, as a next step, to continue the study of the experience of physical awkwardness by locating and talking to children and youth who are currently living the experience of physical awkwardness, in order to get their first hand perspective of it. One wonders when the child first notices physical awkwardness and what he or she makes of it? What is the effect of formal and informal assessment on a child? It may be useful to include some references to how the physically awkward child reacts to the testing situation, perhaps asking how he or she feels about being tested and about how he or she reacts to participation in remedial settings. For example, why was Allan, at such an early age, so reluctant to participate in the remedial motor skills program?

Perhaps we can continue to learn more about physical awkwardness by studying it from a personal subjective perspective. What are the feelings of peers who interact and react to the physically awkward performer? What are the feelings of teachers of physical education towards the physically awkward student? Do teachers always recognize awkwardness or does the awkward performer conceal it so well? What insights might parents and siblings of a physically awkward child contribute? Is it possible that a more in-depth investigation into the phenomenon of sport failure could yield information that would assist teachers with instruction of all students, including the physical awkward performer? Would focus group discussions stimulate further dialogue and provide more insight into the experience of physical awkwardness? Conversly, would in-depth

conversations with one individual following a case study approach yield more information about the experience of physical awkwardness? Future research on physical awkwardness or DCD should include the person perspective, in the hope it may add to the study findings, and what is currently known about the condition.

Concluding Comments

In answer to the question of the feeling and meaning of the experience of physical awkwardness, it means a publicly witnessed failed attempt at performing a task, associated with a physical activity, game, or sport. The public failing and falling set in motion a chain of unconstructive feelings and actions, such as hurt and humiliation, worrying and wondering, and avoidance that are influenced by the interactions and reactions of others. This, in turn, further affects one's thoughts and feelings, and the way in which one acts and reacts in similar situations in future.

Perhaps the method employed in this study has contributed to the knowledge of physical awkwardness, in ways not seen through traditional approaches to studying it. Perhaps the study has shed light and provided insight into the nature of the experience of physical awkwardness, along with its related affective consequences. Perhaps the study has opened up possibilities about other perspectives, about other ways of viewing physical awkwardness, and subsequently about other ways of studying it, to further wonderings, to further questions.

As Cantell, Smyth, and Ahone (1994) conclude with respect to the long term effects of clumsiness "some children do grow out of it; some do not" (p. 127). Can we afford to have such a wait and see attitude? As Sugden and Wright (1998) state, children with DCD encounter varied problems. Some cope and succeed at school and beyond, but

others do not do as well. Losse et al., (1991) make a similar conclusion that seems to apply to the participants of this study:

> Not all 'clumsy' children have concomitant problems. Some bright and well-adjusted children seem to have come to terms with their ineptitude. They appear to cope well with their school experiences, are able to talk freely about their problems and evidently enjoy other aspects of life (p. 65).

In retrospect, one does not simply "get over" the experience of physical awkwardness. One survives it by living it during a good part of his or her school years. The main impact of physical awkwardness occurs during the growth, development, and maturation period. It is not possible to say exactly when the participants in this study have come to terms with their physical awkwardness. However, their retrospective reflective conversations with me suggest they have done so. This does not mean there is any less reason to address the problem of physical awkwardness, not just from a retrospective reflective view, but also from the real time perspective of such children of today.

How can the problem of physical awkwardness or DCD be dealt with in the school system? What can be done to find ways to make the experience of those who are physically awkward more enjoyable than that of the participants of this study? Are we able to really understand physical awkwardness without insight into the subjective personal experience of it? One may wonder if the best accounts of the experience of physical awkwardness are yet to come, not from physical education teachers or even scholars in DCD, but from those who are currently experiencing it.

The final words of Ben and Deb seem appropriate in closing. Ben's reflection on

his awkwardness had him concluding, "you are who you are and you don't have to worry about keeping other people happy. Be happy with yourself. God gives you this body. Do the best you can with it.... I'm more comfortable with my body now." Deb's final advice for the physically awkward performer is to, "find other things that you are good at.... It might take you longer to learn but ... someone can help you with it."

In conclusion, I am reminded of Wall's comment to me about such individuals not being physically awkward, but physically uneducated. I am also reminded of a work by Evans (1975) entitled "They Have to be Carefully Taught." Tactful teaching with a focus on the emotional and social consequences of awkwardness, might be a useful approach to assisting the physically awkward performer at a time when awkwardness has its greatest emotional and social impact.

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Appendix A

Seeking Participants Notice

Seeking Participants for a Study of:

The Experience of Awkwardness in Physical Education and Sport

Awkwardness is seen in healthy and normal people as an unexplained difficulty in performing coordinated movements used in physical education, games and sports.

For example: Did you feel you were among the least coordinated in physical education class? Were you not as good as others in sports? Were you chosen last for teams, or not at all? Did you have fewer turns at bat, shots on goal, or passes, or were you last to have a try? Did you avoid PE because of your poor skills; get ill when it was time to go to gym; or did it even matter to you? How did you and others react to your doing poorly in games? How did you feel about being awkward in physical education?

Does any of this describe your physical education and sport experience? If so, are you will to take part in some brief confidential interviews with me to discuss your experience of awkwardness during your school physical education program?

For more information please call David Fitzpatrick, Physical Activity and Sport Studies, The University of Winnipeg, at 786.9341. You are under no obligation to take part, and you may withdraw from the study at any time.

Why participate in this study? Physical education teachers need to know more about awkwardness, and others like you require an understanding that you may not have received.

This is being distributed to anyone who may know someone interested in taking part in this study on the experience of awkwardness in physical education and sport. Participants must be 18 years of age or older, and no longer attending high school.

Appendix B

Participant Information and Letter of Informed Consent

The Experiences of Awkwardness in Physical Education and Sport

Participant Information Letter:

Dear _____:

As part of the requirements for my doctorate degree, I am conducting a study to learn about past experiences of people who have considered themselves to be physically awkward, or uncoordinated during their school physical education and sport activities. Awkwardness has been described as an unexplained condition, where people have difficulties in learning and performing sport skills in physical education and other physical activity settings, although they are normal and healthy in every other way.

My purpose is to gather information about the experience of awkwardness from people who have had difficulties in learning and performing sport skills, in school physical education and sport settings, so I may have a better understanding of physical awkwardness. Your recall of the experience of awkwardness in school physical education, sport, recreation, and leisure activities are all of interest to me. I hope this study will help me understand how those who have personally related to physical awkwardness feel about it, and how they now describe and give meaning to those feelings.

If you volunteer to take part, you will be asked to do a brief descriptive writing exercise about an incident associated with your experience of awkwardness in physical education. If you wish to continue, you will be invited to describe further incidents about awkwardness during an interview with me. Further interviews may be requested, but conducted only with your permission. If you agree to participate, you will be interviewed by me between one and six times, for no more than 45 minutes each time, about your childhood and youth experiences of awkwardness in physical education and other physical activity settings.

Your involvement with the study will be confidential and you may withdraw from the study at any time by informing me by phone, in writing, or in person. All information about you will be kept anonymous to all but me. To ensure your confidentiality, information will be coded and stored in a locked file cabinet accessible only by me. After publication, all information about you will be destroyed. You will have access to the results and copies of the publications related to this study. If you have any questions you may contact me at (204) 786.9341, or my advisor, Dr E.J. Watkinson at (780) 434.7292.

Dave Fitzpatrick

February, 1999

Dear Potential Study Participant:

As part of the requirements for my doctorate degree, I am conducting a study to learn about the past experiences of those who have considered themselves to be physically awkward or uncoordinated during their school physical education and sport activities. Awkwardness has been described as an unexplained condition, where people have difficulties in learning and performing sport skills in physical education and other physical activity settings.

My purpose is to gather information about the experience of awkwardness from people who have had difficulties in learning and performing sport skills, in school physical education and sport settings, so I may have a better understanding of physical awkwardness. Your recall of the experience of awkwardness in your school physical education, sport, recreation, and leisure activities are all of interest to me. I hope this study will help me understand how those who have personally related to physical awkwardness feel about it, and how they now describe and give meaning to those feelings.

There may be some discomfort in retelling the stories of awkwardness. Given the instrumentation (audio-tape) used to collect the data in this study, the risks associated with participation revolve around the disclosure of confidential information. In light of these risks, every attempt will be made to ensure confidentiality is maintained throughout this study.

If you volunteer to take part, you will be asked to do a brief descriptive writing exercise about an incident associated with your experience of awkwardness in physical education. If you wish to continue, you will be invited to describe further incidents about awkwardness during an interview with me. Further interviews may be requested, but conducted only with your permission. If you agree to participate, you will be interviewed by me, between one and six times, for no more than 45 minutes each time, about your childhood and youth experiences of awkwardness in physical education and other physical activity settings.

Your involvement with the study will be confidential and you may withdraw from the study at any time by informing me by phone, in writing, or in person. If you decline to continue or you withdraw from the study, your data may be removed from the study upon your request. All information about you will be kept anonymous to all but me. To ensure your confidentiality, information will be coded and stored in a locked file cabinet accessible only by me. Normally information is retained for a period of five years post-publication, after which it will be destroyed. You will have access to the results and copies of the publications related to this study. If you have any questions you may contact me at (204) 786.9341 or my advisor, Dr. E.J. Watkinson at (780) 492-0996.

Sincerely,

Dave Fitzpatrick, PhD Candidate

Dear Study Participant:

You are invited to participate in a study investigating the past experiences of people who have considered themselves to be physically awkward in their school physical education classes. Your involvement will consist of a brief writing exercise, describing an incident of your experience with awkwardness, and private audio-taped interviews with the investigator, David Fitzpatrick. If you choose to participate you will be asked to do the following:

- Complete a brief writing exercise (less than one page) describing an incident about your experience of awkwardness in physical education class.
- Take part in one initial individual interview, and with your permission, approximately four to six 45-minute follow-up interviews with David Fitzpatrick about your experience of awkwardness.

If you understand the requirements to participate in the study and agree to take part, read the following, print, and sign your name below. You will receive a signed copy of this Consent Form.

- I understand that my participation in this study is voluntary.
- I understand that all information gathered is confidential.
- I understand that I can withdraw from the study at any time without prejudice or penalty by informing David Fitzpatrick by phone, in writing, or in person.
- I understand that the information from the study will be used for a doctoral dissertation, presented at professional conferences, and published in scholarly journals.
- I have received and read the attached cover letter and understand the nature of the study.
- I understand that a copy of this signed consent form will be returned to me.
- I understand the above, and my signature indicates that I agree to participate in the study.

_____ _____

Participant Name (print) Signature of Researcher

_____ _____

Signature of Participant Date Witness

Appendix C

Interview Format and Tentative Interview Guide

Interview Format

The interviews will be comprised of the following elements (modified from Kvale, 1996):

Greeting and Welcome – to create a relaxed interview environment.

Explanation and Purpose of the Study – to inform the interviewee.

Objectives and Purpose of the Interview:

1) project description – a general statement about why an interview is requested,
2) statement about written notes and tape recording,
3) explanation of types of questions to be asked and that the participant's reflections about awkwardness are sought,
4) disclosure of the use of audio tapes,
5) indication that further interview may be requested, based upon the previous dialogue.

Explanation of types of questions:

1) descriptive questions to collect information about the participant,
2) affirming questions to confirm participant's experience of awkwardness,
3) prompting questions, to seek incidents and stories of the experience of awkwardness,
4) probing questions to encourage more of a response,
5) context questions to encourage further conversation about an answer.

Interview Guidelines:

1) interviewee is made to feel comfortable.
2) interviewer expresses interest (verbally and non-verbally) to reassure the participant, particularly at the beginning of the interview.
3) Restating and incorporating participant's views by repeating points in the participant's own words and uses the participant's words and expressions in subsequent questions.
4) creating hypothetical situations: Questions are phrased based on hypothetical situations in an effort to expand what the participant says and to stimulate recall of similar incidents.
5) Close of interview: The participant is thanked for his or her time and participation. Information as to what will be done with the interview information will be provided.

Tentative Interview Guide

The following sample questions originate and are derived from Weiner's (1987) theory of attribution and the syndrome of physical awkwardness (Wall & Taylor, 1984) and serve only as a guide to prompt the participant to describe incidents about their experience of awkwardness. Questions will be posed only as necessary. The direction of the interview will depend upon the information provided by the participant. It is important to note that the question format and content will evolve as a result of the continuing literature review, pilot study, and ongoing communication with my advisory committee.

Initial Questions:

Will you tell me about an incident that describes your awkwardness?

Tell me more of your experience described in your descriptive writing exercise?

Follow-up Questions (as necessary):

What were you thinking when this incident was happening?

Is there an incident which lead you to respond and think the way you did?

What were you thinking about yourself in that situation?

Affirming Awkwardness:

Describe an incident that helped you to know you were awkward in physical education class.

Were you ever given extra help in learning skills? Give an example of an incident.

Were you skill tested in physical education? Recall an incident.

How did you react to sport skill testing situations?

How did you feel about the test?

How did you feel about the tester?

How did you feel about the tasks on the test?

Do you recall any incidents of comments by teachers about your awkwardness?

Do you recall any comments on report cards about your awkwardness?

In what activities did you consider yourself awkward?

Can you give an example when you felt you lacked the ability to learn/perform motor and sport skills?

How would you explain awkwardness to someone, in your own words? What is it like?

Activity Choices:

Tell me about what activities you chose to do?

Tell me about what activities you chose to avoid?

Hopes:

What expectations or aspirations did you have during physical education? (Give example)

How did you feel about how you performed in physical education? Describe an incident.

Attitude/Opinion:

How did you feel when being taught, attempting skills, learning skills, when successful, during failure?

What value did you place on skilfulness and proficiency in sport and physical activity?

Did you value sport and physical activity?

Did you want to be good at sport?

Did you think of being a professional athlete?

Reaction by Others:

Tell me about an incident of how others helped or hindered you (parents, teachers, peers)?

Tell me about a time when you felt you were not accepted by others as a result of your awkwardness?

Tell me about an incident when you were ridiculed.

Were you excluded from games? Tell me about an incident.

Can you give an example of rejection during games?

Coping Strategies:

Tell me of an incident where you tried during physical education class.

Give me an example of how you tried to disguise your awkwardness?

How did you feel about your awkwardness? Give me an example of a bad time.

How did you feel if you couldn't perform well in physical education?

How did you resolve or accept your awkwardness?

Did you readily accept the lack of skill in the same way others might accept not being able to say, play a musical instrument?

Can you tell me about an incident when you withdrew or reluctantly continued participating in physical activity?

How do you now feel about the experience of awkwardness? Is there an incident that stands out?

Social/Affective Behaviours:

Is there an example of how you misbehaved during physical education as a result of awkwardness?

Can you give incidents when you were: aggressive, anxious, frustrated, clowning around, shy, criticized, or teased about awkwardness?

Tell me about an incident when you received peer criticism?

Successes:

What examples of successes describe your experience in physical education?

Give an example of what you enjoyed about physical education?

Describe an incident of how you felt when you succeeded at performing a sport skill.

Describe an incident of how you felt when you did not succeed at performing a sport skill.

Are there times when you experienced feelings of accomplishment when learning a new skill.

Closing:

Do you participate today?

What incidents do you reflect upon now with respect to awkwardness?

What advice would you wish others had given you during an incident of awkwardness?

Is there anything else about awkwardness you want to talk about?

Appendix D

Descriptive Writing Exercise Form

Descriptive Writing Exercise

Please describe an incident about your "physical awkwardness," that happened to you during your elementary, middle, or senior years' school physical education program.

Name: _____ Date of Birth: _____

Address: _____ City: _____ Postal Code: _____

Phone: _____

Elementary School: _____

Middle (Junior High) School: _____

Senior High School: _____