MENTAL HEALTH AND SPORTS RETIREMENT IN ANTIOQUIAN ATHLETES WHO PARTICIPATED IN OLYMPIC AND PARALYMPIC GAMES

SALUD MENTAL Y RETIRO DEPORTIVO EN ATLETAS ANTIOQUEÑOS QUE PARTICIPARON EN JUEGOS OLÍMPICOS Y JUEGOS PARALÍMPICOS

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ABSTRACT

Stopping sports practice abruptly and without a process can generate problems such as weight gain, predisposition to sports injuries, cardiovascular difficulties, and psychological disorders among which depression, anxiety, psychoactive substance use, unresolved grief and emotional crises resulting from the loss of sports identity are identified. The objective of the research is to establish how the process of transition to sports retirement and the mental health of athletes who have participated in Olympic and Paralympic games is assumed. for which a mixed research was conducted with 18 former athletes from Antioquia in the modalities of artistic gymnastics (2), Olympic wrestling (3), athletics (1), boxing (4), cycling (4), swimming (2), judo (1), and Paralympic marathon (1) to whom an interview and the GHQ28 questionnaire were applied. The results showed that at present the mental health of the athletes is preserved, at the time of retirement there were multiple symptoms associated with mental disorders such as anxiety and depression; it was also identified that there are no systematic detraining processes that favor physical and mental health in the process of sports retirement.

KEY WORDS: mental health, sports retirement, detraining, sport.

RESUMEN

Detener de manera abrupta y sin un proceso la práctica deportiva puede generar problemáticas tales como incremento de peso, predisposición a las lesiones deportivas, dificultades cardiovasculares, y trastornos psicológicos dentro de los que se identifican la depresión, ansiedad, consumo de sustancias psicoactivas, duelos no resueltos y crisis emocionales producto de la pérdida por la identidad deportiva. El objetivo de la investigación es establecer la manera como se asume el proceso de transición hacia el retiro deportivo y la salud mental de los atletas que han participado en juegos olímpicos y paralímpicos para lo cual se realizó una investigación mixta con 18 ex deportistas antioqueños de las modalidades gimnasia artística (2), lucha olímpica (3), atletismo (1), boxeo (4), ciclismo (4), natación (2), judo (1), y maratón paralímpica (1) a quienes se les aplicó una entrevista y el cuestionario GHQ28. Los resultados evidenciaron que en la actualidad la salud mental de los deportistas está conservada, en el momento del retiro fueron múltiples los síntomas asociados a trastornos mentales tales como ansiedad y depresión; así mismo se identificó que no se realizan procesos sistemáticos de desentrenamiento que favorezcan la salud física y mental en el proceso de retiro deportivo.

PALABRAS CLAVE: salud mental, retiro deportivo, desentrenamiento, deporte.

INTRODUCTION

Sporting life implies a series of changes and conditions in the subject that allow him/her to practice sports and specialize in the discipline in which he/she performs; it is here where multiple factors converge that make possible the ascent towards high sporting performance. These factors include physical conditional capacities (e.g., strength, speed, endurance), sport techniques, specific tactics for competition and psychological elements (personality, coping skills, psychological variables such as motivation, anxiety control, among others), as well as other elements outside the athlete (referees and judges, field of play, rivals) (1). Hence, in order to reach the peak of his performance, the athlete needs a certain lifestyle and the adoption of habits that allow continuous improvement in his sport and the global training of all factors in order to obtain maximum sporting performance. Montalvo (2) states that athletes in high performance sports are subjected to a systematic process of sports and competitive preparation, with the main objective of increasing performance and maintaining the sporting form to achieve the maximum number of achievements, which is why competitions and events are identified in which the athlete can give the best of himself and test his skills.

Thus, in competitive sports there are events that mark the maximum level to which the subjects who practice sports can aspire; in many cases the maximum competition refers to the participation or obtaining a medal in a world

championship, but, in other sports, one can aspire to participate in one of the most significant sporting events: The Olympic Games or Paralympic Games (in sports for people with disabilities); these are multi-sport events in which, every four years the best athletes of the participating countries meet, skills, preparation and excellence in sport are put in evidence; not only winning, but also qualifying and participating becomes the goal of many athletes.

However, for some athletes being at the top and participating in this event implies the achievement of the objectives and can be directly related to the culmination of their sports career, closing the process, saying goodbye to their followers, so they will want to have their best performance; that is why many times the Olympic and Paralympic Games are related to sports retirement, since, although the athlete devotes all his time, energy and projects to the practice of his discipline, the sports life cycle has an end.

With regard to sports withdrawal, it is identified that it can be voluntary or normative, corresponding to a planned and agreed decision by the athlete, which enables detraining and the planning of post-retirement actions; or involuntary or non-normative, which, for the most part, is due to events external to the athlete such as injuries or difficulties inherent to sports practice, which, for the most part, do not allow detraining (3). Stambulova (4) differentiates between stressful or difficult situations, transition and crisis. The first focuses on the person's reaction to a particular phenomenon; the transition refers to a change in behavior, career or general life; while the crisis refers to an internal conflict of the subject practicing sport; hence there are three types of crisis: a) related to age, b) related to the sport career and c) related to the situation.

In accordance with the above, it is recognized that, although retirement is an inevitable stage in the life of the athlete and this may correspond to his own decision or be due to a circumstance that leads him to end his competitive career, most of the problem lies in the fact that retirement does not take place gradually, preparing the athlete for post-retirement life. The main problem lies in the fact that most athletes are forced to retire, and unless the end of the sports career develops involuntarily and unexpectedly, athletes are prone to consciously and unconsciously undergo a process of continuous analysis and evaluation of the status of their careers (5). But this process of withdrawal, whatever the reason, entails a series of consequences for the athlete of all kinds (6), it has been mentioned that the abrupt stop of the sporting life generates negative physiological consequences in the athlete such as coronary risks, blood pressure problems, weight gain and other consequences at the osteo-muscular level (7).

Unlike retirement due to old age, in athletes this period is more a transition to the disengagement of work as a professional athlete and a process of linking

to a new occupation, rather than unemployment (Duque, 2016). This is why, in retirement, the athlete experiences a grief associated with the culmination of a stage of his life, which often causes an identity crisis, product of the degree to which he has identified with his role as an athlete (9). Kerr and Dacyshyn's theory (10) divides this process into three stages: withdrawal, uncertainty and disorientation, and the new beginning or the start of another activity.

According to Mena (11), detraining requires a planning that allows it to be systematic and that the athlete is committed in its realization to achieve the objectives, that is why it should be done before assuming the sports retirement, that is to say, the athlete only culminates his sports life when he is detrained, guaranteeing the delivery to society of a person apt to undertake new goals and activities, adapted to new conditions. This means that such retirement will include new functional, biological, social and psychological adaptations (11,6,12,13,14,15).

Depending on the origin or cause of retirement, will be the affectations that will be presented in the athlete, in this way sometimes some transitions generate psychological affectation or in the mental health of the athlete while others generate changes in the environment so that the affectation will be of a psychosocial, economic or professional nature. Therefore, it is necessary to have family support, as well as guidance from coaches and specialists (sports doctor, sports psychologist, physiotherapist) which can help athletes to cope positively during this transition and adapt to their new social role (11,16) states that the most frequent psychological affectations are the loss of social and family role, loss of public image, loss of friendships in sport, stress due to the change in the athlete's economy, feeling of abandonment, tendency to acquire inadequate habits, rejection of sport activity, depression, anxiety, insomnia, loss of identity, among others. (17,18)

García Ucha (5) mentions that, in recent years, in the first nudist countries, great attention has been paid to the effects of retirement on the athlete, and recently programs have begun to be offered to the athlete in transit to sports retirement in third world countries, because not only the physical consequences of retirement should be considered, but also the psychological ones.

An inadequate sports retirement process can cause multiple difficulties in the athlete's physical health, such as: weight gain, predisposition to sports injuries, cardiovascular difficulties, among others; while at the psychological level, sports retirement, without adequate preparation can have repercussions on psychological disorders such as depression, anxiety, psychoactive substance use, as well as difficulties in adapting to new situations, unresolved grief and emotional crises resulting from the loss of sports identity (6,7,8,11).

According to García Ucha (5), the intervention for the transition from sports career to retirement encompasses a series of elements: causes of retirement, process of adaptation of the athlete and recommendations for post-retirement life. In addition, factors such as age, gender, level of schooling, causes of retirement, level of performance in sport and type of sport should be taken into account when guaranteeing the physical health and well-being of athletes who end their competitive life.

In Colombia in particular, the transition to sports retirement has been one of the least researched topics and has even been addressed from the perspective of sports training and psychology, which is evident in the search for background information on the subject, where research has been found in Spain, Argentina, Chile and Paraguay, but few studies have been conducted in Colombia, and those that have been identified are directed at soccer, not considering other Olympic disciplines.

Hence, the question that guided the research was: how is the process of transition to sports retirement and the mental health of athletes who have participated in the maximum event of the Olympic cycle assumed? For which a macro-project was carried out with two lines of research: detraining process and mental health, having as objectives to establish how the process of transition to sports retirement and mental health of athletes who have participated in the maximum event of the Olympic cycle is assumed, to identify the components of the process of transition to sports retirement of these athletes, to describe the state of their mental health and to compare the process of transition to sports retirement of these athletes.

MATERIAL AND METHODS

The research was developed with a mixed approach aiming to make a more optimal and complete reading of the results in order to respond to the objectives, therefore the method used was the transformative method (19,20), which allows understanding the phenomenon from different perspectives. The level of scope was analytical, with a cross-sectional design allowing the collection and analysis of information through the instruments.

The research was developed with a methodological triangulation approach (21) by which without leaving aside the postulates by Hernández, Fernández and Batista (22) which mention mixed methods; triangulation refers to "a multi-method strategy for research" (21, p. 2); thus, quantitative and qualitative data collection and analysis tools were used; being these, the GHQ-28 questionnaire, the semi-

structured interview, IBM-SPSS V.27, Microsoft Excel and Atlas.ti 9, respectively, thus fulfilling the reliability and validity through the compendium of tools used. For the scope of the study, a multidimensional analysis is proposed with each of the tools mentioned, and it is also intended to propose future lines of research on these topics; finally, the design of the study is of a transversal-analytical nature (22) due to its unique data collection from athletes over time.

The research was developed in phases, each one of them implied a rigorous development by the researchers and the research assistants of the Universidad Católica Luis Amigó in such a way that the objective was fulfilled and the next phase proceeded in an orderly and methodical manner.

The first phase consisted of a documentary review, knowing, understanding and learning the concept of mental health and the transition to sports retirement, also identifying the existing instruments that could serve as a basis for the research and even for the generation of an own interview; for the collection of theoretical information and to be able to analyze it, a documentary analysis sheet was used. This also allows the identification of needs and their contextualization, taking into account what has been currently researched, especially in the Colombian context.

In the second phase, the database of Colombian athletes who have participated in the Olympic Games and Paralympic Games was built; it had to be elaborated because no reliable information was found on athletes from Antioquia who had participated in these competitions. After making inquiries in different Colombian and Antioquian sports organizations and people related to sports, the database was built from journalistic information, files published by the International Olympic Committee (IOC), the Colombian Olympic Committee (COC), the Colombian Paralympic Committee (CPC), databases found in the pages of the Olympic and Paralympic events and information collected through the sports leagues and federations. Finally, the data of the participations were obtained, where the names, sport, department of the athlete and current status (active, retired, deceased) were consolidated. After obtaining the data of the Colombian athletes, the athletes from the department of Antioquia were filtered to define the size of the sample.

Simultaneously (taking into account the time taken in phase two), the third phase was developed, which consisted of choosing the instruments for data collection. For the measurement of mental health, since no questionnaire was identified in sport and no known instrument focused on the retirement stage, it was decided to use the GHQ28, which was developed by Goldberg and Hillier (23) and is widely used for the measurement of mental health due to its properties. The questionnaire presents 28 items that are grouped into 4

categories or subscales: somatic symptoms, anxiety-insomnia, social dysfunction and severe depression; each of the items has 4 response options that the person must score according to his or her perception in recent weeks.

Since there was no test to measure the detraining process that the athletes underwent and the GHQ28 would not be used to measure their mental health at the time of retirement, an interview was used as the main research instrument. For the construction of the interview, the identified categories were taken into account and related questions were constructed, and questions from other research were also used for the construction of the items. The interview had a quantitative validation of content which was evaluated using Lawshe's equation according to the scores of 5 expert professionals: 2 sport psychologists, 1 general psychologist and 2 sport professionals, who rated the items according to their relevance (they considered that the item was important and should be included in the instrument), internal coherence (the item has a logical relationship with the dimension) and its clarity (the item is easily understood); the responses were consolidated using the Individual Aggregates method (24) and the following criteria were used: Items that had a 100% favorable match were included without modification; items that had 50% unfavorable match were eliminated and those that had partial match were reviewed and adjusted according to the observations made by the judges. According to the judges' suggestions, changes were made to 4 items, modifying the way in which the question was generated by modifying it to past tense and adding the word paralympian; 3 items were also added according to the judges' proposals in the categories of mental health and support networks. The interview had 38 items distributed in the 6 initial categories: sociodemographic (6), sport (4), Olympic event (2), retirement (8), mental health (8), psychological support (3) and support networks (7).

With the defined instruments and the endorsement of the ethics committee through the informed consent of the university, we proceeded to the fourth phase, which consisted of locating the athletes and applying the instruments to those who agreed to participate in the research. Of the 63 athletes from Antioquia who were identified as having participated in Olympic and Paralympic competitions, 34 were found to be retired, of these 18 agreed to participate in the research.

With the collection of this data, we proceeded to the last phase, which consisted of analyzing the information using different tools: Excel, SPSS and Atlas. Ti; these allowed the description of the quantitative and quantitative data.

RESULTS

The statistical program IBM SPSS Statistics Version 27 was used for data analysis. The results of the sociodemographic data of the 18 participants show that the sports in which they participated in Olympic and Paralympic events were Boxing (22.2%), cycling (16.7%), Olympic wrestling (16.7%), artistic gymnastics (11.1%) and 5.6% of the interviewees participated in sports such as swimming, diving, judo, artistic swimming, road cycling, athletics and Paralympic marathon as shown in Figure 1.

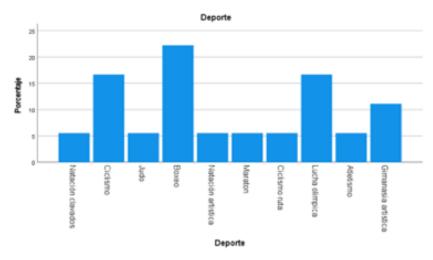


Figure 1. Distribution by sport

Figure 2 shows the statistics on age, starting age, time in sports and age of retirement, showing that the average age is 44.5 years at present and the average age of retirement was 33.9 years; the youngest athlete who retired was 26 years old and the one who retired at the latest age was 48 years old. This information also shows that 16.7% started their sports practice at the age of eight; 22.2% had a minimum permanence in their sport of 18 years; the athlete who had been in their sport the longest practiced it for 30 years. Similarly, in relation to the age of retirement, it was identified that those who retired at a younger age were 26 years old, 16.7% of the athletes retired at the age of 35 years old and those who retired at an older age were 48 years old. In addition, most of the former athletes who participated in the study (66.7%) participated once in an Olympic event and one athlete (5.6%) participated in 4 Olympic events. The reasons for retirement identified were completion of a cycle 44.4%, injury 22.2%, economic 11.1% and other reasons 22.2%.

Estadisticos						
		Edad	Edad_Inicio	Tiempo_Pract ica	Edad_Retiro	Evento_Olimp ico
N	Válido	18	18	18	18	18
	Perdidos	0	0	0	0	0
Media		44,50	11,83	22,11	33,89	1,67
Mediana		39,50	11,50	22,00	35,00	1,00
Moda		38	8	18	35ª	1
Desv. Desviación		13,422	3,382	3,660	5,144	1,029
Varianza		180,147	11,441	13,399	26,458	1,059
Mínimo		28	6	18	26	1
Máximo		82	17	30	48	4

a. Existen múltiples modos. Se muestra el valor más pequeño.

Figure 2. Statistics on current age, starting age, time of practice and retirement age.

With regard to social and personal aspects of the retired athletes, it was found that 50% of them are married, 33.3% are single, 11.1% are cohabitating and 5.6% are divorced. A total of 55.6% have two or more children, while 22.2% have no children.

Most of the retired athletes reside in Medellín (55.6%), and 16.7% are living in the United States. In terms of education, as shown in Figure 3, 44.4% of the retired athletes have only a high school education and in some cases incomplete; however, it is also observed that 27.8% have completed postgraduate studies.

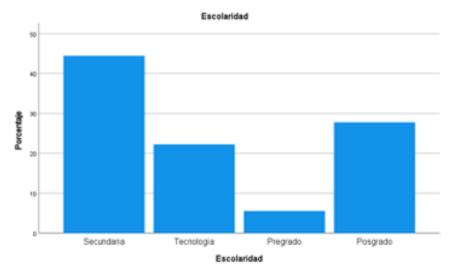


Figure 3. Schooling of retired athletes

In terms of employment, 61.1% have a formal contract or permanent job, 27.8% work as freelancers and 11.1% do not work. It also stands out in this aspect that the work performed is related to the sports they practice in most cases, being coaches or holding administrative positions related to sports (16.7%).

Now, at a quantitative level, the results of the GHQ-28 questionnaire, which evaluates the mental health of the athlete at present, were also examined; the results showed that mental health is at an adequate level without the presence of significant alterations (score below 2 points) as shown in Table 1, with the mean 1.33 on the anxiety-insomnia scale having the highest score and depression having the lowest score.

Table 1. Measurement of data dispersion. Made by the authors

		Standard	
	Mean	deviation	N
Somatic	1,00	1,283	
symptoms			
Anxiety -	1,33	1,782	
insomnia			
Social	0,61	1,092	
dysfunction			
Depression	0,06	0,236	

As can be seen, the test has 4 subscales: somatic symptoms, anxiety-insomnia, social dysfunction and severe depression, each of them was analyzed independently identifying the answers given in each of the items so that recurrences could be established in some answers in isolation, however, only in the anxiety-insomnia subscale was variety identified in the answers, in all the others the answers were concentrated in options 0 and 1. Likewise, a correlation was made between the responses in each subscale as shown in Table 2, finding that the only scales that are related are somatic symptoms and anxiety-insomnia; however, it should be kept in mind that all scales obtained very low scores, so a significant relationship between the items would not be found.

Table 2. Correlations. Performed by the authors

	somatio		anxiety-		major
	symptom	าร	insomnia	dysfunction	depression
Pearson					
correlation					
N					
Pearson	,617"				
correlation					
Sig. (bilateral)	0,006				
N					
Pearson	0,336		0,040		
correlation					
Sig. (bilateral)	0,173		0,874		
N					
Pearson	0,000		-0,047	-0,140	
correlation					
Sig. (bilateral)	1,000		0,854	0,581	
N					
	correlation N Pearson correlation Sig. (bilateral) N Pearson correlation Sig. (bilateral) N Pearson correlation Sig. (bilateral) Sig. (bilateral)	Pearson correlation N Pearson ,617" correlation Sig. (bilateral) 0,006 N Pearson 0,336 correlation Sig. (bilateral) 0,173 N Pearson 0,000 correlation Sig. (bilateral) 1,000	correlation N Pearson ,617" correlation Sig. (bilateral) 0,006 N Pearson 0,336 correlation Sig. (bilateral) 0,173 N Pearson 0,000 correlation Sig. (bilateral) 1,000	Symptoms insomnia	Symptoms Insomnia dysfunction

As mentioned, at the methodological level, the research analyzed qualitative data with the objective of having greater access to and understanding of the information, especially because the retirement process and its possible consequences were experienced at the moment in which it occurred, so the former athlete had to resort to subjectivity. That is why the interview was the appropriate method to access the desired information. These interviews were analyzed in the software Atlas. Ti software and gather 4 dimensions that cover the general aspects of the experience that these athletes had in the process of transition to retirement.

For the respective analysis, each dimension was subdivided into specific categories which were nourished with quotes extracted from each of the interviews which were recorded and later transcribed for analysis.

Table 3 shows the dimensions and categories used for the organization and analysis of the information in the software.

Table 3. Qualitative categorization. Made by the authors

Dimensions	Categories			
Sports retreat	Reason for withdrawal			
	2. Retirement Plan			
	Type of withdrawal			
Mental Health	1. Positive emotions in			
	retirement			
	2. Negative emotions in			
	retirement			
Attention/ support Psychology	Psychological help			
Support networks	Occupation after retirement.			
	Retirement decision support			

The first analysis consisted of a word cloud from the information collected in the 18 interviews, summarizing the frequency of the words used by the interviewees. For this, a filter was used that eliminates all conjunctions, prepositions, pronouns and individual letters, generating word clouds that provide a graphic interpretation of the frequency of the words in the transcripts; from there 4 word clouds are generated: one referring to sports retirement, the second directed to mental health, the third to psychological accompaniment and the last to the support networks perceived by the retired athletes.

The first word cloud (Figure 4), which refers to the sport retirement dimension, shows the reasons for retirement and the type of retirement of the interviewees, noting that the most prevalent reason is pressure, and also identifies that, according to this word cloud, the retirement was a decision of the athlete, which was planned or at least processed by the athlete at the time of being executed.

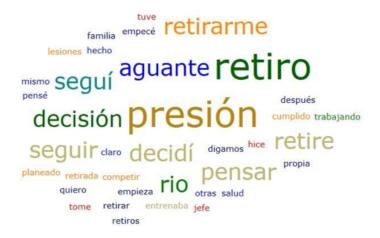


Figure 4. Word cloud. Made by the authors in Atlas.ti

Figure 5 shows the word cloud corresponding to the mental health of the athletes at the time of retirement, showing positive and negative emotions and feelings, highlighting sadness as the most common emotion; anxiety, stress, depression and anger are also identified as negative emotions and tranquility as a recurrent positive emotion.



Figure 5. Word cloud. Made by the authors in Atlas.ti

With regard to psychological care and support, the word cloud (Figure 6) shows that very few of those interviewed received psychological support at the time of retirement, with the preponderance of no answers.



Figure 6. Word cloud. Made by the authors in Atlas.ti

Finalizing the analysis of the word clouds, Figure 7 shows that the main support network of the retired athletes was the family.

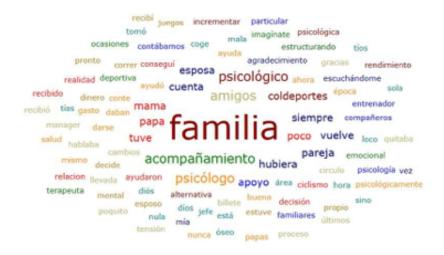


Figure 7. Word cloud. Made by the authors in Atlas.ti

However, the interviews were also subjected to a textual analysis according to the answers given in the interview in each of the dimensions. The most significant findings in each of them are listed below.

Sports retreat

The former athletes state many reasons for their retirement, including lack of economic support, injuries and the culmination of a cycle, pressure, declining results and that they were no longer happy practicing the sport. In addition, none of them made a retirement plan, so it is evident that there is an emphasis on voluntary retirement.

Proof of this are the answers given by retired athletes D1, D3, D4, D5, D7, D8 and D17. The first of them stated, "I didn't even make an official retirement, I didn't tell anyone". "It was gradual, I began to notice that year after year I was going down a little bit more and more and I really did not have the freshness of the technical group to perhaps reach another goal of a fourth Olympiad" (D1), while D3 considers that "I believe that retirement is because a cycle has already expired, the physical capacity is no longer the same, then the duty fulfilled has been done". "I think that one thinks at the time is, when one begins to lose competitively, one begins to think that other generations are coming", D5 mentions the time in the sport "already the years, long time losing weight, this far

from the family" "I already wanted to be chubbier", just like D7: "my progress was not going to be more and because the time was getting too difficult for what I wanted to be", D8 makes it clear that it was external factors that led him to withdraw "Seeing that my achievements were not recognized", while D4 mentions elements of pressure "I could not stand it, I could not stand it, I could not stand it, I thought it was unfair and I decided to take the pressure off". "The blows are not vitamins or candies that are thrown at you" and finally D17 on this dimension emphasizes that she did not prepare for this moment: "It was never planned".

Mental health:

In this dimension, as mentioned in the word cloud, the retired athletes report positive and negative emotions or sensations, highlighting that those conceived as negative are the ones that occurred most frequently at the time of retirement. Feelings of frustration, hopelessness, frustration, devaluation, demotivation and emotions such as anxiety, stress, sadness and anger stand out. All of these are mostly the result of having an uncertain future that they never contemplated or planned for and that is associated, for the most part, with time and economic management, since both were conditioned by their sporting activity.

Positive emotions are described by athletes who were able to plan their future and who visualize self-improvement as part of their way of being.

In the negative emotions can be identified in fragments of the interviews, D1 mentioned: "Crying with anger and sadness". "if they had given me a revolver I would shoot myself", D3: for his part said "No I think emotions, no, it is a feeling of sadness for me", D5 mentions: "Nostalgia, you no longer have the same abilities", D6: "I felt depression. Thinking about the future of my family and myself", D7: "A lot of fear, how to lose my shape", D8: "A lot of sadness, a lot of stress, boredom, I was disappointed, I didn't sleep and I started to think about things", D11: "Quite sad, it was very hard for me. Going crazy. I fell into eating, drinking and I didn't want to go out and I was locked up" and D12: "I felt like a mushroom in the world, I no longer fit in anything, I went back to my parents and I didn't want to, I have always had a good relationship but I felt I was going backwards, I didn't have any money, I had savings but they wouldn't last and I don't know how to do anything... I was no good for anything else... I locked myself up for a week, I didn't want to eat, I didn't want to go out or see anyone".

In relation to positive emotions, D2 said: "No emotions, decision" referring to the security with which he retired from the sport, while D14 expressed: "Happiness, here I do not get what I want, what makes me happy, I felt good" and D18 felt: "Tranquility, I closed that chapter very well", so it can be seen that it will also depend on the person and the reasons for his retirement.

Psychological care/accompaniment

The answers given in this dimension show that very few retired athletes received psychological support at the time of their transition, for various reasons, some because at the time of their retirement this did not exist, others because the sports entities did not provide it and others because they did not see it as necessary. Those who did receive it did so from the national sports entity and others on their own. It is also noted that most of them express that in the high performance or competitive process they did have psychological support as part of the support received from the different institutions.

Those who received psychological support expressed: "Yes, we had support from Coldeportes, the psychologist makes many changes" (D1), D15: "My mental health was good, good, I had psychological support" and D16: "Yes, a psychologist from Coldeportes, every time I talked to him he took a little bit of stress away".

There were those who sought external support such as D8: "I got another individual" and D17: "Yes, but on my own". Others who did not find support from the entities: "In recent years very little, because in my time, there was no sports psychology" (D3), D11: "No, never, at that time they did not give you anything" and D13: "Psychological help was null, I am my own psychologist".

And those who expressed that they did not require psychological support or accompaniment: "I did not receive psychological accompaniment, because I was always psychologically well" (D2) and D14: "No, I was always very driven by what I wanted to do" (D2) and D14: "No, I was always very driven by what I wanted to do" (D3).

Support networks

Family, partners and friends play a key role as a support network for athletes, especially in the transition and retirement from sports, as they are the ones who ensure the economic and emotional well-being of the athlete. This is evidenced in the answers given by the retired athletes, most of whom responded that the support they had received when making the decision was mainly from their primary network: their family, rather than from coaches and representatives of the sports entities, who sometimes did not support the decision.

It should be noted that many of the athletes are still in contact with their coaches and teammates for work reasons, but did not receive support from them

at the time of retirement. It should also be noted that the affiliation with the sport, in most cases, has not been definitively severed because some continue to be linked to their sport of origin in a different role: in this case as coaches, judges, administrators, or they practice it recreationally.

Some interview responses that reflect the support networks are those given by D5, who states that the main support received has been "My family, my wife's", D6 says that he received "Only emotional support, from family and friends". D1: "My mom and dad, listening to me and structuring the life process, what are you going to do now, this alternative or take this one and so on, a bad relationship with parents makes you go crazy" and D3 "With my coach, we greet each other from time to time, sometimes I ask him for help in training issues for the children".

In relation to the current link with the sport, D4 mentions: "I did it as a coach and now I am match maker", D2: "If I continue, for example accompanied the paisa pride in the competitions that perform as laps to Colombia", D10 currently works "With the Colombian Olympic Committee", D6: "I continued practicing cycling for health and because I liked it and as a coach", D1 "I am, coach of the Inder of Medellin", D3: "Linked in the administrative part, as president of the league, president of clubs, organization of sporting events" and D13 is "National and international referee".

DISCUSSION

The ascent to high performance in sports occurs due to multiple factors among which are the physical abilities, technique and tactics of the specific sport, psychological elements such as motivation, stress and anxiety and others outside the athletes such as sports entities, judges and rivals (1), these statements are shared by the Antioquian athletes interviewed who emphasize that these elements are also determinants at the time of retirement from their sport.

Sport retirement, in accordance with what has been identified in the theory and in the research consulted, is evidenced in two ways: both voluntary and involuntary (3), however, in the present research, according to what was reported by the retired athletes, the most frequent reason was voluntary due to the decrease of the physical capacities for the sport in which they participate; this facilitated in some cases the elaboration of the emotions of the sports retirement process, assimilating the process and allowing the athlete, despite the negative emotions that were generated, to resignify the process and assume it in a positive way in a short time.

This is the opposite case to those who had to retire due to external factors or external people, thus constituting an involuntary or non-normative retirement

(3) in this case, in the interviews, the retired athletes expressed greater frustration, emotions related to stress and depression and greater intensity when faced with them, This is directly related to what is expressed by (11,5,25) who state that the retired athlete will go through a grieving process in which he/she will have to make use of all the available resources for its elaboration; In this case, the athletes used their support networks, and work and academic strategies and other sources to recover elements related to mental health, which has allowed them to preserve their mental health at present.

The recognition of the reasons for retirement of athletes allows sports science professionals to generate support programs in which the prevention of negative physical and psychological repercussions, the promotion of healthy habits and the generation of possible alternatives for the use of free time and economic management are required taking into account the concerns that afflict athletes when thinking about sports retirement, taking into account that this is an inevitable stage in the sports career.

Similarly, recognizing that sports retirement requires a detraining process because for years the athlete was exposed to high loads that made his body adapt morphologically and functionally to them and the lack of them will generate again a morphofunctional change and the need to adapt to new conditions (11), the generation of structured, systematic programs is required. In the present research, none of the athletes had participated in a detraining process despite the fact that most of their lives they had practiced sport and the morphofunctional adaptation to sport is significant; even some retired athletes expressed having health problems after having retired. According to Reyes et al (26) there are many authors who have talked about detraining but their contributions lack comprehensiveness and have limitations in their conception, taking into account that they do not conceive methodological elements, specificities of sports training or the programs lack a basic theoretical foundation; Likewise, these proposals lack formative elements that imply that the athlete (or athlete in transit) can adhere to and go beyond the sporting or biological aspects, applying the process to his or her extra-sporting life (27) mention that the detraining process is a "pedagogical process" that should not imply the definitive abandonment of physical activity or physical exercise; therefore, post-retirement activities should be planned in such a way that they do not imply the definitive abandonment of physical activity or physical exercise. The post-retirement activities should be planned in such a way that the integral wellbeing of the retired athlete is considered and in which the sport or physical activity continues to be conceived as an important part of the life of each retired athlete, This can be an impediment for those who, due to the reason for retirement and the emotions generated. decide to distance themselves definitively from everything related to sport.

Another important element that was identified in the research is that the mental health of athletes depends largely on the strategies that they manage to establish in post-retirement life, in this way the family, the link to sport from different alternatives (beyond competitive practice), having an alternative life project and having stable social relationships allows to cope and even more easily elaborate the negative emotions that may appear after the sports retirement no matter what had been the reason for it. In this regard, García Ucha (5) is emphatic in mentioning the importance of accompanying the athlete in the retirement process and a plan that includes psychological and family support that favors adaptation to new conditions.

Hence, a transition program towards sports retirement that contemplates physical detraining, but also the life project including habits, new economic alternatives and emotional management is necessary for athletes, in this case who have practiced a sport discipline most of their lives. Likewise, there is a need to adapt assistance programs towards retirement (28) that start when the athletes reach their sports goal (this may be Olympic or not) or an accumulated 20 years of sports practice; in addition to this (29) rational emotive behavioral therapy is proposed for former athletes who still practice their sport; which shows a change (7%) in beliefs and some myths about their performance.

LIMITATIONS AND FUTURE PATHS

Not having a database of Colombian and/or Antioquian athletes was the greatest limitation of the research, which meant that a lot of time was invested in its elaboration; after having it, another limitation was contacting retired athletes, making it difficult to obtain data and information.

Therefore, after obtaining contact information and considering the time available for the development of research, it is proposed as a future line to investigate the mental health and detraining processes in Colombian athletes who participated in these events and who are retired, making comparisons between sports and the processes of accompaniment by department.

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