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3 **REVIEW**

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7 **Current understanding in climbing psychophysiology research**

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19  
20 (Received 14 March 2014; accepted 19 August 2014)

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23  
24 **Abstract**

25 The sport of rock climbing places a significant physiological and psychological load on participants. Psychophysiological analysis  
26 provides a unique insight into affective states arising from the demands of climbing, and the impact that they have on performance.  
27 This review provides an overview of climbing psychophysiology research completed to date. To summarise, an on-sight lead ascent  
28 of a route elicits the greatest psychophysiological response in climbers, whilst a red-point top-rope ascent produces the least. The  
29 effects of climbing stimuli on an individual’s performance appear to be conditional on their experience. In general, experienced  
30 climbers show superior performance and are less anxious than their less practiced counterparts, with significantly lower cognitive  
31 and somatic anxiety, increased self-confidence and lower values of the steroid stress hormone cortisol. It is likely that the  
32 experience–stressor–performance relationship is due to advanced climbers’ greater understanding of the risks associated with the  
33 sport, their habituation to the stressors gained through practice and their ability to perform well with higher levels of anxiety. This  
34 review outlines pertinent psychological climbing stimuli, summarises current methodologies and presents a detailed review of  
35 climbing psychophysiology research. It also concludes with suggestions for improving the depth and breadth of future research,  
36 including the need for the refinement of existing measures.

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39 **Keywords:** *psychophysiology, rock climbing, experience, stimuli, stressors, anxiety*

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57 **1. Introduction**

The challenges, or stimuli, of climbing include the significant physiological demands of the sport, including the difficulty, length and angle of a climb (Watts, 2004); the psychological demands, including the style of ascent, competition, height, fear of falling and climbing with an audience (Hague & Hunter, 2011); along with a significant element of skill (Seifert et al., 2013). These psychological stimuli must be responded to appropriately and effectively managed for athletes to complete a climb successfully (MacLeod, 2010). This review is concerned with research examining the affect of these psychological stimuli on climbers’ physiology and performance.

Through the psychophysiological analysis of the stimuli, researchers are provided with a unique insight into affective states arising from the demands of the sport, along with the impact that they have on individuals’ performance (Draper, Jones, Fryer, Hodgson, & Blackwell, 2008; Hodgson et al., 2009).

Individual differences in interpretation mean that stimuli will not affect all climbers in the same way (Lazarus & Folkman, 1984). Stimuli may be perceived as benign, stressful (distress, anxiety inducing, resulting in a negative affective state) or positive (eustress, enhancing function and optimal arousal) (Apter, 1991). Distress and negative affect in response to a stimulus is likely due to a disparity between its demands and an individual’s ability to

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115 meet them; conversely, eustress and positive affect  
116 are likely to arise when an individual is capable of  
117 meeting the demands of a stimulus (Lazarus &  
118 Folkman, 1984).

[AQ1]

[AQ2]

119 This review comprises four distinct sections.  
120 Section 2 summarises the key aspects of physiology  
121 and psychology research, which underpin our  
122 understanding of climbing psychophysiology. Sec-  
123 tion 3 addresses psychophysiological measures  
124 currently used in climbing research. Section 4  
125 outlines relevant research that has been conducted  
126 in an applied climbing context. Finally, the Section 5  
127 summarises future research directions.

128  
129 **2. The nature of climbing stimuli**

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131 The primary stimuli considered in this review relate to  
132 the significant psychological demands of climbing, in  
133 particular: the style of ascent; route knowledge and  
134 difficulty; and competition climbing and climbing with  
135 an audience (Section 2.1). This is followed by an outline  
136 of theories concerning the psychological bases of  
137 individual variation in responses (Section 2.2) and a  
138 summary of the relevant neurophysiological processes  
139 (Section 2.3).

140  
141 *2.1. Stimuli within the sport of climbing*

142  
143 *2.1.1. Style of ascent.* Climbing psychophysiology  
144 research has predominantly, but not exclusively,  
145 focused on alterations in the ‘style of ascent’ (e.g.  
146 Dickson, Fryer, Blackwell, Draper, & Stoner, 2012;  
147 Draper et al., 2012; Fryer, Dickson, Draper, Blackwell,  
148 & Hillier, 2012). The style of ascent describes the safety  
149 protocol protecting the climber in the event of a fall.  
150 Safety protocols include lower-height ‘bouldering’  
151 routes, commonly protected by crash mats (Stiehl &  
152 Ramsey, 2004). Longer ascents may be protected by a  
153 ‘top-rope’ with which a fall is immediately arrested,  
154 considerably reducing the consequences (Bisharat,  
155 2009). Alternatively, climbers may ‘lead’ a route, where  
156 a fall results in travelling some distance before being  
157 arrested by a trailing rope, attached to either  
158 intermittent pre-placed bolts, known as ‘sport lead  
159 climbing’, or climber placed protection ‘traditional lead  
160 climbing’ (Bisharat, 2009).

[AQ3]

161 It is common for climbers to experience fear of  
162 falling, particularly whilst leading routes; this is  
163 especially common in lower-grade climbers (Hörst,  
164 2008; MacLeod, 2010). MacLeod (2010) describes  
165 a fear of falling as a significant limiting factor in many  
166 climbers’ performance. A fear of falling is a non-  
167 associative phobia, which may develop without the  
168 individual experiencing any direct or indirect trauma  
169 (Menzies & Clarke, 1993). Typically, the initial  
170 fearful response to falling will diminish over time due  
171 to habituation (Clarke & Jackson, 1983); however,

172 poor habituates and individuals who do not get  
173 sufficient safe exposure may remain fearful (Clarke &  
174 Jackson, 1983). Climbers may habituate and  
175 desensitise themselves to falling through actively  
176 taking falls whilst practicing climbing, and through  
177 progressively increasing the fall length (Hörst, 2008;  
178 Macleod, 2010). Research is necessary to establish  
179 the effectiveness of fall training interventions, it is  
180 also not known if habituation to falling indoors  
181 transfers outdoors, to sport or traditional climbing,  
182 or vice versa.

[AQ4]

183 The affect of fear of falling has not yet been  
184 examined in climbing psychophysiology literature,  
185 although contexts where it is inferred have been used  
186 (e.g. Draper et al., 2008). Alterations in height have  
187 also been used to manipulate anxiety levels, relying  
188 on individual’s fear of falling and the presence of real  
189 physical danger to elicit negative affective states  
190 (Spielberger, 1966). These studies have examined  
191 the anxiety–performance relationship (Pijpers,  
192 Oudejans, Holsheimer, & Bakker, 2003), the affect  
193 of anxiety on visual attention (Nieuwenhuys, Pijpers,  
194 Oudejans, & Bakker, 2008), anxiety-induced  
195 changes in movement in a whole body task (Pijpers,  
196 Oudejans, & Bakker, 2005) and the role of anxiety in  
197 perceiving and realising affordances (Pijpers, Oude-  
198 jans, Bakker, & Beek, 2006).

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201 *2.1.2. Route knowledge and difficulty.* A climber’s  
202 prior knowledge of a route impacts the way in which  
203 the ascent is completed, along with altering the  
204 relative psychological load (Draper et al., 2008). The  
205 principal forms of ascent are ‘on-sight’, without any  
206 prior knowledge, on the first attempt; ‘flash’  
207 competing a route with prior knowledge on the first  
208 ascent; or a ‘red-point’, repeat ascent of a whole or  
209 partially climbed route (Goddard & Neumann,  
210 1993). An on-sight is often considered the purest  
211 form of ascent, although it is speculated that a red-  
212 point, at a climber’s absolute maximum climbing  
213 grade, may prove to be a greater physiological and  
214 psychological challenge (Hague & Hunter, 2011).  
215 Within published climbing psychophysiology  
216 literature the antipodal conditions of on-sight and  
217 red-point have been used exclusively (e.g. Draper  
218 et al., 2008; Hardy & Hutchinson, 2007).

[AQ5]

219 The size and quality of hand and footholds  
220 available, and their spacing and the length and  
221 angle of the climbing itself usually dictate a climber’s  
222 difficulty. Climbs are ‘graded’ for ease of compari-  
223 son, to judge performance and to allow climbers to  
224 choose suitable routes. Within climbing research the  
225 authors recommend the adoption of Draper, Cana-  
226 lejo, et al.’s (2011) convention for the summary of  
227 climbing grades and the standardised division of  
228 experience across these grades.

[AQ6]

229 Climbing routes present a complex problem-  
 230 solving task; the correct perception of affordances  
 231 that a route offers plays a significant role in the  
 232 success of an ascent (Pijpers et al., 2006).  
 233 Affordances, in a climbing context, describe the  
 234 link between the visual properties of holds and the  
 235 more general climbing environment and the action,  
 236 or actions, which may be performed with them  
 237 (Gibson, 1979). The link may be based on stored  
 238 information about a particular hold, but this is not  
 239 always necessary (Humphreys & Riddoch, 2001).  
 240 Significant differences between expert and more  
 241 inexperienced climbers have been observed in the  
 242 recall of information. Experienced climbers are able  
 243 to recall more information, and clusters of infor-  
 244 mation, and tend to fixate on the functional aspects  
 245 of a climbing wall that are pertinent to a successful  
 246 ascents of a route, whilst inexperienced climbers  
 247 focus more on the holds themselves (Boschker,  
 248 Bakker, & Michaels, 2002). It was also found,  
 249 through the comparison of high and low traverse  
 250 conditions, that anxiety narrows attention and a  
 251 climber’s emotional state plays an important role in  
 252 the perception and realisation of affordances (Pijpers  
 253 et al., 2006). Difficulties with the visual perception of  
 254 climbing affordances may be compounded outdoors  
 255 by the reduction in distinction of holds, in  
 256 comparison to the typically coloured indoor holds,  
 257 although due to the use of chalk outdoors, this may  
 258 also vary (Luebben, 2004). Variation between rock  
 259 types may also provide additional psychological  
 260 difficulties with learning and perception of affor-  
 261 dances and would be an interesting line of enquiry for  
 262 future research.

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 265 *2.1.3. Competition climbing and climbing with an*  
 266 *audience.* Competition is a potent psychological  
 267 stimuli; a number of studies have examined  
 268 competition climbers’ precompetitive anxiety and  
 269 affective states (Aşçi, Demirhan, Koca, & Dinc,  
 270 2006; Sanchez, Boschker, & Llewellyn, 2010).  
 271 Climbing competitions, with few exceptions, take  
 272 place on routes that are unknown to the competitors  
 273 (International Federation of Sport Climbing [IFSC],  
 274 2007). Initial rounds of competitions allow those  
 275 taking part to observe each other, gaining potentially  
 276 useful information relating to the routes (Burbach,  
 277 2004). Climbers are placed into isolation in later  
 278 rounds, forcing them to complete the routes on-sight.  
 279 Emphasis is placed on climbing the routes without  
 280 falling in order to receive the most points (IFSC,  
 281 2007); this places competitors under a great deal of  
 282 pressure to perform optimally on their first attempt of  
 283 the route (Goddard & Neumann, 1993).

284 Climbing is rarely completed in isolation; an  
 285 audience, comprising of peers, spectators and/or

286 competition judges, is usually present. To the  
 287 authors’ knowledge, research examining the effects  
 288 of an audience on climbing performance has not yet  
 289 been conducted. However, in other contexts, the  
 290 performance of motor skills with audiences has been  
 291 shown to produce varying responses. Murray (1983)  
 292 demonstrated that executing a recently learnt motor  
 293 skill in front of an audience was more effective for  
 294 producing optimal performances than if it was  
 295 completed in isolation; conversely, Butki (1994)  
 296 demonstrated significantly inferior performance of a  
 297 simple motor skill when it was completed in front of  
 298 an audience. The issue is further complicated by the  
 299 findings of Weinberg and Gould (2011), who  
 300 demonstrated that the performance of new tasks  
 301 with an audience negatively affected difficult skills,  
 302 which had not yet been mastered, whereas for well-  
 303 known or simple skills it helped performance.  
 304 Climbing would provide an interesting medium in  
 305 which to examine the affects of an audience on  
 306 recently learnt and concrete motor skills.

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 309 *2.2. Manifestation of stress in response to stimuli and*  
 310 *climbers motivation*

311 The interpretation of anxiety by climbers, the  
 312 antecedents and benefits of optimal arousal and  
 313 motivation for taking part in the sport may help to  
 314 explain differences seen in individual’s psychophy-  
 315 siology and its influence on climbing performance.  
 316 This section will briefly outline several theories,  
 317 applied in a climbing context, which explain aspects  
 318 of the behaviour of climbers. Critically, climbing  
 319 psychophysiology research has not discussed the  
 320 results of studies in light of more general sport and  
 321 pure psychology research; this section does not aim  
 322 to present a comprehensive overview of theories, but  
 323 instead start a discussion that may be addressed in  
 324 future research.

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 328 *2.2.1. Reversal theory.* Climbers are required to  
 329 effectively manage and respond to the significant  
 330 risks associated with the climbing environment, in  
 331 order to ensure their own safety (British  
 332 Mountaineering Council, n.d.); an individual’s  
 333 response to risk depends on their ability to  
 334 interpret, organise and execute an appropriate  
 335 response. There are several theories that attempt to  
 336 explain the stimuli–performance relationship and  
 337 differences in the positive or negative affect  
 338 individuals’ experience, including Apter’s (1989)  
 339 reversal theory. Reversal theory is composed of  
 340 bistable, telic and paratelic states; the telic state is  
 341 characterised by planning and evaluating an activity  
 342 on where it may lead in the future, whilst the paratelic



343 state is spontaneous, evaluating an activity on the  
344 pleasure it gives at that moment (Apter, 1989).

345 Key to reversal theory is an individual’s interpret-  
346 ation of stimuli as benign, stressful or positive.  
347 Reversal theory allows for individuals to display  
348 different personalities at different times depending  
349 on their interpretation (Apter, 1989). If the needs of  
350 the particular state, which the individual is experien-  
351 cing, are fulfilled, then positive affect will result;  
352 conversely, if the needs are frustrated, then negative  
353 affect will result (Shepherd, Lee, & Kerr, 2006). The  
354 individual may also reverse back to a previous state at  
355 any given time if ‘triggered’ by an environmental  
356 event. In order to reduce anxiety, negative affect may  
357 be overcome not only by reducing arousal but also by  
358 inducing a reversal so that pleasant excitement is  
359 experienced instead. In a climbing context, climbers  
360 needlessly confront themselves with risk in order to  
361 achieve high arousal, this high arousal may be  
362 experienced as anxiety, but if the danger or challenge  
363 is overcome there may be a switch to the paratelic  
364 curve, resulting in excitement as intense as the  
365 anxiety (Shepherd, Lee, & Kerr, 2006). More  
366 generally, it has been found that those who are  
367 paratelic-dominant tend to choose and participate in  
368 risky and explosive sports, whereas a telic-dominant  
369 prefers safe and endurance sports (Chirivella &  
370 Martinez, 1994).

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373 2.2.2. *Flow experience.* The potential for achieving a  
374 positive ‘optimal experience’, synonymous with a  
375 ‘flow’ state, resulting from successfully overcoming a  
376 challenge, provides a possible explanation for  
377 climbers motivation and their propensity for risk  
378 taking. Flow is defined as a state of optimal  
379 functioning and is characterised by deep  
380 involvement in an activity, feelings of immersion,  
381 loss of perspective of time and effortless ease and  
382 fluency of movement (Csikszentmihalyi, 1990). It is  
383 speculated that climbers may be motivated by flow,  
384 rather than directly by the risk that they take, although  
385 risk is still an integral part of the experience (Schüler &  
386 Nakamura, 2013). Flow is more likely to be  
387 experienced when there are clear goals, which are  
388 focused on aspects of their performance other than  
389 purely the outcome of the climb, a balance between  
390 challenge and skill and the possibility of immediate  
391 feedback (Delle Fave, Massimini, & Bassi, 2011;  
392 Hooper, Collins, & Eklund, 1998).

393 The importance of climbers’ experience, for the  
394 correct appraisal of risk and their own competence,  
395 has been highlighted by Schüler and Nakamura  
396 (2013). Behind the ‘lighter’ optimal emotional state  
397 they describe a ‘darker’ side. In this darker state the  
398 individual is so involved in the activity that nothing  
399 else matters, they will complete the activity even if it

400 results in great personal loss, they are addicted to the  
401 activity and may endanger their own physical  
402 integrity for the sake of experiencing flow (Schüler  
& Nakamura, 2013). Fear may be an emotional pre-  
403 requisite for flow in beginner climbers, it has been  
404 found that flow experiences lead to the lowering of  
405 risk awareness and inappropriate risk taking, result-  
406 ing in climbers ‘letting-go’ and ‘just going for it’  
407 (Hooper et al., 1998; Schüler & Nakamura, 2013),  
408 whereas experience protects climbers from risk-  
409 taking behaviour, providing them with a more  
410 accurate appraisal of the correct balance between  
411 challenge and skill, which is influenced by past  
412 performances and their own perception and control  
413 of emotional arousal (Hooper et al., 1998; Schüler &  
414 Nakamura, 2013). Interestingly it was also found  
415 that climbers on traditional routes, in comparison to  
416 outdoor sport climbs, also experienced the same  
417 perceptions of danger and presented the same  
418 tensions as beginner climbers did when they were  
419 compared to their more experienced counterparts  
420 (Hooper et al., 1998).

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424 2.2.3. *General motivation.* High achievement in  
425 climbing, with few exceptions, does not offer any  
426 extrinsic material rewards (Robinson, 1985).  
427 Climbers take part in the sport under their own  
428 volition, making choices that may increase the risk,  
429 including the style, difficulty, risk and exposure of  
430 ascents. Climbers’ enjoyment of the sport appears to be  
431 unrelated to the associated fear, pain and strenuous  
432 muscular effort required (Hooper et al., 1998). With  
433 this in mind, climbers of all abilities take part,  
434 by choice, in riskier ascents, where the consequences  
435 of mistakes are more severe, likely motivated by  
436 the opportunity for optimal experiences, rather  
437 than the risk itself (Schüler & Nakamura, 2013).  
438 Climbers draw enjoyment from overcoming intense  
439 effort and through their own personal improvement  
440 (Papaioannou, Kourtesopoulou, & Konstandakou,  
441 2005). It is believed that competence, combined with  
442 hard effort, is a decisively important factor that leads to  
443 both successful ascents and the development of self-  
444 confidence in climbers (Papaioannou et al., 2005).

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447 2.3. *Neurophysiological response*

448 The neurophysiological mechanisms and processes  
449 responsible for the cognitive, somatic and beha-  
450 vioural responses to stressors are complex (Gray &  
451 McNaughton, 2003). A brief outline of the response  
452 to a stressor, as described by Steimer (2002)  
453 begins with basolateral complex of the amygdala  
454 receiving the external stimuli, which is relayed by the  
455 thalamus, along with contextual information from  
456 the hippocampal formation and more elaborate

457 cognitive information from the prefrontal cortex.  
 458 The prefrontal cortex modulates the physiological,  
 459 neuroendocrine and behavioural response, as well as  
 460 being responsible for anxiety conditioned responses.  
 461 The emotional stimuli received by the basolateral  
 462 complex of the amygdala are processed, before the  
 463 central nucleus of the amygdala activates different  
 464 midbrain regions and nuclei, which provide the  
 465 response to the initial anxiety stimulus. The central  
 466 nucleus of the amygdala activates the locus ceruleus,  
 467 the central and peripheral noradrenaline systems and  
 468 the hypothalamus, activating the hypothalamo-  
 469 pituitary-adrenocortical (HPA) axis, and sympath-  
 470 etic activation resulting in increases in respiratory  
 471 rate, heart rate and blood pressure. Additionally, the  
 472 central nucleus of the amygdala also directly activates  
 473 midbrain regions responsible for ‘fight or flight’  
 474 responses. Activation of the HPA axis is responsible  
 475 for neuroendocrine stress response and the release of  
 476 glucocorticoids, including cortisol.

477  
 478 **3. Measures of anxiety in current climbing**  
 479 **literature**  
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481 Through quantifying the neurophysiological and  
 482 psychophysiological responses to climbing stimuli,  
 483 it is possible to gain an insight into climbers’  
 484 psychological performance. Research into psycho-  
 485 physiology, within climbing, has used a number of  
 486 scales measuring arousal, anxiety and the direction of  
 487 responses, including the Competitive State Anxiety  
 488 Inventory and revisions (CSAI-2: Martens, Burton,  
 489 Vealey, Bump, & Smith, 1990; CSAI-2R: Cox,  
 490 Martens, & Russell, 2003), the Rock Climbing  
 491 Anxiety Inventory (RCAI: Hardy & Hutchinson,  
 492 2007), the Profile of Mood States (POMS: McNair,  
 493 Lorr, & Droppleman, 1981) and the Positive and  
 494 Negative Affect Schedule (PANAS: Watson, Clark, &  
 495 Tellegen, 1988). Further to this, the steroid hormone  
 496 ‘cortisol’ has been used as an objective marker,  
 497 through the comparison of basal and activated levels  
 498 in response to climbing stimuli (Wittert, Livesey,  
 499 Espiner, & Donald, 1996).

500  
 501 *3.1. Self report tools*  
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503 *3.1.1. The Competitive State Anxiety Inventory.* The  
 504 CSAI was developed as a valid and reliable self-  
 505 report tool for anxiety by Martens et al. (1990). The  
 506 refined CSAI-2R (Cox et al., 2003) has been the  
 507 instrument of choice for the measurement of anxiety  
 508 in climbing (Aras & Akalan, 2011; Dickson, Fryer,  
 509 Blackwell, et al., 2012; Draper et al., 2008, 2012;  
 510 Draper, Dickson, Fryer, & Blackwell, 2011; Draper,  
 511 Jones, Fryer, Hodgson, & Blackwell, 2010; Fryer,  
 512 Dickson, Draper, Blackwell, et al, 2012; Fryer,  
 513 Dickson, Draper, Eltom, et al., 2012; Hodgson et al.,

2009; Maynard, MacDonald, & Warwick-Evans, 514  
 1997; Sanchez et al., 2010). It provides insight into 515  
 the anxiety subcomponents of cognitive anxiety (e.g. 516  
 I am concerned about losing), somatic anxiety 517  
 (e.g. My body feels tense) and self-confidence 518  
 (e.g. I’m confident about performing well), and the 519  
 relationship between these three components and 520  
 performance. Confirmatory factor analysis by Cox 521  
 et al. (2003) and Raudsepp and Kais (2008) found a 522  
 good fit of the collected data to the model with 523  
 comparative fit index (CFI) values of 0.95 and 0.96, 524  
 non-normed fit index (NNFI) of 0.94 and root mean 525  
 squared error of approximation (RMSEA) of 0.054 526  
 and 0.046, respectively. 527

528  
 529 *3.1.2. The Rock Climbing Anxiety Inventory.* The  
 RCAI is a development of Hardy and Whitehead’s 530  
 (1984) inventory, by Hardy and Hutchinson (2007). 531  
 It measures cognitive anxiety, somatic anxiety and 532  
 activation. To date, as far as the authors are aware, 533  
 the RCAI has only been used in the initial study by 534  
 Hardy and Whitehead (1984) and the more recent 535  
 study by Hardy and Hutchinson (2007). It is likely 536  
 that the limited use of the RCAI is due to the 537  
 prevalence of the CSAI-2R within climbing research. 538  
 Principal components analysis by Hardy and 539  
 Hutchinson (2007) revealed three factors with 540  
 eigenvalues greater than 1.00, accounting for 72% 541  
 of the variance in the data. Cronbach’s alphas for the 542  
 final subscales were reported as acceptable with 543  
 cognitive anxiety ( $\alpha = 0.71$ ), somatic anxiety 544  
 ( $\alpha = 0.92$ ) and activation ( $\alpha = 0.80$ ). 545

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 548 *3.1.3. Profile of Mood State.* The POMS  
 questionnaire (McNair et al., 1981) is reasonably 549  
 common in climbing psychophysiology literature 550  
 (Draper et al., 2010; Draper, Dickson, et al., 2011; 551  
 Fryer, Dickson, Draper, Blackwell, et al., 2012). The 552  
 POMS measures individuals’ perception of fatigue, 553  
 vigour, anger, depression and tension. Research 554  
 evidence suggests that mood state can influence 555  
 physiological performance, and thus have an affect 556  
 on climbing performance (Beedie, Terry, & Lane, 2000; 557  
 McMorris et al., 2006). The reliability of the POMS 558  
 has been confirmed by Grove and Prapavessis (1992), 559  
 through comparing the mood states of winners and 560  
 losers; it was found that all subscales, except fatigue, 561  
 produced significant differences between these 562  
 groups. Cronbach’s alphas for the POMS subscales 563  
 were largely satisfactory, with  $\alpha$  values ranging from 564  
 0.664 to 0.954, with a mean of 0.798. 565

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 568 *3.1.4. Positive and Negative Affect Schedule.* Finally,  
 the PANAS (Watson et al., 1988) is based on a bi- 569  
 570

[AQ7]  
 [AQ8]

[AQ9]

571 dimensional theory of emotion, which hypothesises  
 572 that individuals can experience a mixture of positive  
 573 and negative affect during a specific time period.  
 574 Participants rate the extent to which they are  
 575 experiencing each emotion just before performing;  
 576 PANAS has found limited use in climbing research  
 577 (Aşçi et al., 2006; Sanchez et al., 2010). PANAS  
 578 internal consistency for the measurement of both  
 579 positive and negative affect has been reported as  
 580 adequate, with  $\alpha$  values between 0.84 and 0.90  
 581 (Watson et al., 1988).

583 3.2. Physiological and biochemical measures

584  
 585 3.2.1. Sampling and assay of cortisol. The most  
 586 commonly used biochemical marker of stress is the  
 587 steroid hormone cortisol (hydrocortisone; Wittert  
 588 et al., 1996). Cortisol is secreted by the adrenal  
 589 cortex under the influence of the HPA axis in  
 590 response to psychological and/or physiological stress  
 591 (Wittert et al., 1996). Within climbing  
 592 psychophysiology research, cortisol has been  
 593 extensively used as a marker of stress (Aras &  
 594 Akalan, 2011; Dickson, Fryer, Blackwell, et al.,  
 595 2012; Draper, Dickson, et al., 2011; Fryer, Dickson,  
 596 Draper, Blackwell, et al., 2012; Fryer, Dickson,  
 597 Draper, Eltom, et al., 2012; Hodgson et al., 2009).  
 598 The sampling and assay of cortisol is normally  
 599 conducted on either salivary or plasma samples.  
 600 Salivary cortisol is often used when the invasive  
 601 collection of blood samples is not practical, or  
 602 possible; however, saliva cortisol assay is less  
 603 desirable, and its reliability may be questioned, due  
 604 to the large degree of day-to-day intra-individual and  
 605 inter-individual variation that is present (Hayes,  
 606 Grace, Kilgore, Young, & Baker, 2012). However,  
 607 plasma sampling is more invasive than saliva samples;  
 608 Dickson, Fryer, Draper, et al. (2012) provide an  
 609 overview of the sampling of plasma cortisol in a  
 610 climbing context, suggesting the first toe as valid  
 611 alternative sampling site for plasma cortisol, as the  
 612 commonly used fingertip is inconvenient for climbers.

613 There are several issues with the assay of cortisol,  
 614 beyond the difference between saliva and plasma  
 615 sampling. Cortisol exhibits diurnal variation, with  
 616 peak concentrations seen in the morning and  
 617 reduced concentrations in the evening and overnight  
 618 (Touitou & Haus, 2000). Hayes et al. (2012) found  
 619 large inter-individual variation. Furthermore, corti-  
 620 sol reactivity in response to stimuli has been shown to  
 621 differ between individuals (Smyth et al., 1998).  
 622 Research has also questioned the emotions that  
 623 cortisol measures, with Pollard (1995) suggesting  
 624 that increased cortisol concentration might be  
 625 indicative of arousal rather than just stress or anxiety.  
 626 Pollard (1995) reviewed studies which have used  
 627 cortisol as a stress marker, suggesting that although

laboratory studies of acute stress have shown  
 increases in cortisol concentrations, there was  
 evidence that strong emotional arousal of any type  
 may increase cortisol levels. Similarly, Brown, Sirota,  
 Niaura, and Engebretson (1993) indicated that  
 strong positive emotions might also elicit an increase  
 in cortisol concentration. Further research is  
 necessary to assess the impact of individual and  
 diurnal variation in cortisol, responses to climbing  
 specific stressors and the investigation of alternative  
 biochemical markers.

4. Climbing psychophysiology

A number of studies have used psychophysiological  
 techniques to examine the effects of climbing stimuli  
 on climbers. A comprehensive literature search was  
 conducted using PubMed, psycINFO and Google  
 Scholar, using the following combinations of key-  
 words: ~~“Rock Climbing” or “Climbing” with each of~~  
~~the following terms “Psychophysiology”, “Anxiety”,~~  
~~“Plasma Cortisol”, “Cortisol” “CSAI 2R”, “Physi-~~  
~~ology” and “Psychology”.~~ Results, from the search,  
 were included based on the following criteria: (1)  
 directly related to climbing, either indoors or  
 outdoors, and (2) discussed climbing psychophysiol-  
 ogy explicitly in the title or text, and or (3) discussed  
 variables pertaining to psychophysiology, and or (4)  
 used climbing tasks designed to elicit variations in  
 stress. A summary of the 12 papers found using this  
 search are presented in Table I.

4.1. Outline of climbing psychophysiology literature

Within climbing psychophysiology (Table I)  
 researchers have assessed style of ascent (e.g.  
 Dickson, Fryer, Blackwell, et al., 2012), differences  
 between on-sight and red-point climbs (e.g. Draper  
 et al., 2008), variation between successful and  
 unsuccessful climbers (e.g. Draper, Dickson, et al.  
 2011) and the affect of competition (e.g. Sanchez  
 et al., 2010). This research will be discussed in the  
 following section.

4.1.1. Style of ascent. The style of ascent, with lead  
 and/or top-rope conditions, is widely used as a  
 stimulus and potential stressor in climbing literature  
 (Dickson, Fryer, Blackwell, et al., 2012; Draper  
 et al., 2010, 2012; Draper, Dickson, et al., 2011;  
 Fryer, Dickson, Draper, Blackwell, et al., 2012;  
 Hardy & Hutchinson, 2007). In further two studies,  
 a more contrived top-rope with a trailing lead rope  
 has been used (Aras & Akalan, 2011; Hodgson et al.,  
 2009). Alternatively, Pijpers et al. (2003) used a high  
 and low traverse protected by a top-rope. Within  
 these studies climbing experience varied (Table I),



Table I. Overview of current climbing psychophysiology research.

Author (publishing date)	Participants (male♂ female♀)	Ability (Ewbank-converted)	Ability (Draper et al., 2011)	Context
Draper et al. (2012)	13♂ 6♀	RP 19–23 OS 18–19	Intermediate	LC or TR; OS
Fryer, Dickson, Draper, Eltom, et al. (2012)	18♂ 3♀	RP 23–25 OS 21–22	Intermediate/ advanced	LC or TR; OS
Dickson, Fryer, Blackwell, et al. (2012)	14♂ 1♀	OS 26.1 RP 28.7	Advanced	LC or TR; OS
Aras and Akalan (2011)	22♂ 4♀	15–17	Lower grade	LC and LCTR; 50% OS, 50% RP; randomised order
Draper, Dickson, et al. (2011)	12♂ 6♀	OS 18.4 RP 20.7	Intermediate	LC or TR; OS; success or failure
Draper et al. (2010)	9♂	19–23	Intermediate	LC and TR; 50% OS, 50% RP; randomized order
Sanchez et al. (2010)	19♂	26–31	Advanced/elite	Belgian climbing competition
Hodgson et al. (2009)	12♂	?	Intermediate - <i>as stated by paper</i>	LC, TR and LCTR; RP
Draper et al. (2008)	10♂	14–15	Lower grade	LC and repeat LC of same route
Hardy and Hutchinson (2007)	54♂	15–23	Lower grade/ Intermediate	Traditional outdoor LC and TR
Aşçi et al (2006)	37♂ 10♀	?	Intermediate - <i>taken from route grades</i>	Speed and difficulty climbs under competition conditions; OS
Pijpers et al. (2003)	16♂ 14♀	Non-climber	Lower grade	Low and high traverse

Notes: LC, lead climb; TR, top rope; LCTR, lead climb with TR; OS, on-sight; RP, red point.

with non-climbers (Pijpers et al., 2003), lower-grade climbers (Aras & Akalan, 2011; Draper et al., 2008; Hardy & Hutchinson, 2007), intermediate climbers (Draper et al., 2010, 2012) and advanced level climbers (Dickson, Fryer, Blackwell, et al., 2012; Fryer, Dickson, Draper, Blackwell, et al., 2012). The experience stated above, may differ from the experiences given in the original papers, as the abilities have been standardised, for ease of comparison, using the grading charts set out by Draper, Canalejo, et al. (2011). It should also be noted that no indication of climbing grades were given by Hodgson et al. (2009), other than the vague description of 'intermediate'; as with other papers, it is likely that the ability of participants according to Draper et al.'s grade tables were lower.

Significant differences in psychophysiological responses, between potentially anxiety inducing conditions, in non-climbers have been found by Pijpers et al. (2003), in lower-grade climbers by Hardy and Hutchinson (2007) and in intermediate climbers by Hodgson et al. (2009). Pijpers et al. (2003) found significantly greater heart rate (HR), movement entropy and blood lactate in high over low traverse conditions. Hardy and Hutchinson's (2007) first study demonstrated significantly greater Rating of Perceived Exertion (RPE), HR and RCAI measures of cognitive and somatic anxiety and activation, between an outdoor lead at a climbers limit minus two grades and at their on-sight limit; whilst Hardy and Hutchinson's (2007) third study showed significant elevation of cognitive anxiety and

effort and reduction in activation and performance between a top-rope then top-rope climb and a lead then top-rope climb. Finally, Hodgson et al. (2009) demonstrated significantly increased somatic anxiety and decreased self-confidence, as reported by the CSAI-2R, and increased plasma cortisol concentration between a top-rope and lead climb.

Conversely, no significant differences between potentially anxiety inducing conditions, for intermediate climbers (Draper et al., 2012) and advanced climbers (Dickson, Fryer, Blackwell, et al., 2012; Fryer, Dickson, Draper, Blackwell, et al., 2012), have been demonstrated. Draper et al. (2012) did not report any significant alterations in the three components of the CSAI-2R of cognitive anxiety, somatic anxiety or self-confidence and no difference in measures of capillary cortisol, between top-rope and lead conditions. Draper, Dickson, et al. (2011) showed no significant differences in subjective mood state as measured by POMS, with alterations in style of ascent, between a lead and top-rope climbs, although no further details were given. Dickson, Fryer, Blackwell, et al. (2012) observed similar measures between a lead and top-rope condition of cognitive and somatic anxiety, all components of the NASA-TLX, VO<sub>2</sub> and HR; however, the CSAI-2R did report significantly lower self-confidence for the lead condition. Fryer, Dickson, Draper, Blackwell, et al. (2012) found a significant difference in climb time and HR at select points, but no difference in any components of the CSAI-2R, blood lactate or VO<sub>2</sub>, between either an on-sight top-rope or lead climb.

799 To summarise the outcomes of previous climbing  
800 psychophysiology research, a relationship between  
801 high and low stress conditions and climbers’  
802 experience may be inferred. It would appear that as  
803 ability and/or experience increases, the difference in  
804 psychological anxiety in response to climbing stimuli  
805 decreases. Specifically, all climbers at or beyond an  
806 intermediate level, climbing at grades greater than  
807 approximately French 5 or Ewbank 18, showed no  
808 significant difference in measures of anxiety. This is  
809 an unexpectedly low grade, it is speculated that a  
810 reasonably fit non-climber would be able to climb at,  
811 or exceed, a grade of French 5. This draws into  
812 question the sensitivity of the measures used,  
813 particularly the commonly used CSAI-2R and the  
814 stress hormone cortisol.

815 Anecdotal evidence, cited by Dickson, Fryer,  
816 Blackwell, et al. (2012), supports the experience–  
817 anxiety relationship, reporting that climbing coaches  
818 do not see any change in the mind-set of experienced  
819 climbers with different forms of ascent. It is likely  
820 that this is due to experienced climbers being more  
821 accustomed to leader falls through habituation, as  
822 lead climbing and falling are often incorporated into  
823 their training (Fryer, Dickson, Draper, Blackwell,  
824 et al., 2012). Their habituation allows them to  
825 recognise the disparity between inflated perceived  
826 levels of risk that a lead condition provides and the  
827 actual level of risk that they are exposed to (Fryer,  
828 Dickson, Draper, Blackwell, et al., 2012; Dickson,  
829 Fryer, Blackwell, et al., 2012). Furthermore, it is  
830 possible that climbers have learnt to execute move-  
831 ments whilst still under the influence of elevated  
832 levels of anxiety, suggesting that more experienced  
833 climbers are still anxious, but that the anxiety does  
834 not impair their performance to the same degree  
835 (Pijpers et al., 2003).

837 To date, published research on the style of ascent in  
838 climbing, with the exception of Hardy and Hutch-  
839 inson (2007), has been conducted exclusively on  
840 artificial walls. It is likely that this is due to the ease of  
841 data collection, potential safety issues and, possibly,  
842 the assumption that there are no physiological or  
843 psychological differences between indoor and out-  
844 door climbing. In more general climbing research,  
845 only four other papers have collected data on natural  
846 rock (Booth, Marino, Hill, & Gwinn, 1999; Bunting,  
847 Little, Tolson, & Jessup, 1986; Bunting, Tolson,  
848 Kuhn, Suarez, & Williams, 2000; Williams, Taggart,  
849 & Carruthers, 1978). Further research is necessary in  
850 this area, as outdoor traditional and sport climbing  
851 affords unique opportunities for the study of  
852 psychophysiology and climbing performance, includ-  
853 ing decisions about the objective dangers, route  
854 finding and learning on real rock, which are not  
855 present indoors (Lewis & Cauthorn, 2002).

4.1.2. *Route knowledge.* Alterations in climbers’ 856  
route knowledge, with either on-sight or red-point 857  
ascents, have been used to manipulate the amount of 858  
stress experienced. Draper et al. (2008) and Hardy 859  
and Hutchinson’s (2007) third study both 860  
investigated the difference between an initial on- 861  
sight and a repeat ascent of the same route. Draper 862  
et al. (2008) found an on-sight lead climb condition 863  
more stressful and anxiety inducing than a 864  
subsequent red-point climb of the same route, with 865  
greater climbing time, cognitive and somatic anxiety 866  
as measured by the CSAI-2R and elevated HR and 867  
VO<sub>2</sub>, in lower-grade climbers. This supports 868  
the earlier findings of Hardy and Hutchinson (2007), 869  
who established that cognitive anxiety, as reported by 870  
the RCAI, was equally elevated in an on-sight ascent 871  
in comparison to a subsequent repeat red-point top- 872  
rope ascent, regardless the style of ascent of the initial 873  
route; they theorise that the reduction in anxiety, 874  
with a repeat ascent, is due to both a reduction in the 875  
effort required and a learning effect, which 876  
subsequently reduces physiological and 877  
psychological load. It is also possible that 878  
experienced climbers have become conditioned to 879  
increasing their effort for on-sight climbs in 880  
comparison to those completed as a red-point, in 881  
order to ensure success, rather than anxiety-induced 882  
effort (Hardy & Hutchinson, 2007). 883

884 Whilst not entirely supporting the findings of the 884  
studies cited previously, Hodgson et al. (2009) 885  
speculate that, following an initial on-sight ascent, a 886  
repeat ascent of a route is open to interpretation by 887  
the climber. The repeat ascent of the route may either 888  
be perceived as inducing somatic and cognitive 889  
anxiety, resulting in greater markers of anxiety, or, 890  
conversely, be perceived more positively and result in 891  
feelings of higher self-confidence, whilst still eliciting 892  
relatively higher cortisol concentrations (Hodgson 893  
et al., 2009). This may depend on the difficulty of the 894  
climb and the initial amount of anxiety experienced 895  
on the first ascent. This would be an interesting line 896  
of enquiry for future research. It would also be of 897  
interest to investigate the dynamics of change in 898  
psychophysiology, over further repetitions of the 899  
same climb. Repetition of a route has previously been 900  
used to elicit a greater physical response in climbers, 901  
but data were not collected on each individual 902  
repetition of the route (Sherk, Sherk, Kim, Young, & 903  
Bemben, 2011). This will allow a better under- 904  
standing of the relationship between anxiety and 905  
performance, how these factors are mediated by the 906  
experience of the route and how learning affects 907  
psychophysiological responses to stressors. 908

909 Differences in the psychophysiological response 909  
provoked by repeat ascents exposes potential issues 910  
with the methodology of three studies by Aras and 911  
Akan (2011), Draper et al. (2010) and the second 912



913 study in Hardy and Hutchinson (2007). These studies  
 914 investigated anxiety in randomised conditions of lead,  
 915 and a subsequent ascent of either a top-rope or a top-  
 916 rope with a trailing lead rope; however, unlike Hodgson  
 917 et al. (2009), no familiarisation trial was used in any of  
 918 these studies. Thus, participants climbed either the lead  
 919 or top-rope condition on-sight, before randomly  
 920 repeating the same route in the alternative condition,  
 921 as a red-point. As previously discussed, from the  
 922 findings of Draper et al. (2008) and Hardy and  
 923 Hutchinson’s (2007) third study, it is known that an on-  
 924 sight condition affects the physiological and psycho-  
 925 logical response of climbers differently to a red-point  
 926 ascent. It is speculated that the lack of familiarisation, or  
 927 a paired sample methodology, may have obscured  
 928 trends that may otherwise have been found. As such, the  
 929 findings of the research should be treated with caution;  
 930 these studies were excluded from the earlier analysis in  
 931 Section 4.1.1.

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 934 *4.1.3. Competition and successful versus unsuccessful*  
 935 *ascents.* Performance differences between those who  
 936 successfully complete an ascent and those who fall en  
 937 route have been investigated by both Draper,  
 938 Dickson, et al. (2011) and Sanchez et al. (2010).  
 939 In both studies, significant differences between  
 940 successful and unsuccessful climbers were found in  
 941 climbing time, experience and pre-climb CSAI-2R  
 942 measures of anxiety. Draper, Dickson, et al. (2011)  
 943 reported that unsuccessful climbers climbed slower,  
 944 taking longer to reach each bolt, than those who  
 945 successfully completed the route; successful  
 946 participants climbed faster and more efficiently,  
 947 rather than in a more conservative considered  
 948 approach (Draper, Dickson, et al., 2011).  
 949 In contrast, Sanchez et al. (2010) found that  
 950 successful competition climbers completed the  
 951 most difficult part of the route significantly slower  
 952 than their unsuccessful counterparts. Thus, expert  
 953 climbers, in comparison to Draper et al.’s  
 954 intermediate climbers, chose to climb slower and  
 955 more carefully to control their equilibrium, although  
 956 they were not necessarily more fluent than those who  
 957 were unsuccessful. It was also shown, as previously  
 958 established with differences in the style of ascent, that  
 959 successful climbers were significantly more  
 960 experienced, in terms of years participating in the  
 961 sport and years lead climbing (Draper, Dickson, et al.,  
 962 2011). It is likely that the more experienced climbers  
 963 had reached an autonomous stage of learning, which  
 964 had a stress-proofing effect, thereby increasing the  
 965 likelihood of a successful ascent (Draper, Dickson,  
 966 et al., 2011). Aşçi et al. (2006) highlighted further  
 967 differences in psychological states preceding a  
 968 climbing competition between male and female  
 969 climbers: female climbers experienced significantly

970 greater negative affect in comparison to male 970  
 971 climbers, before both a speed and difficulty 971  
 972 competition; additionally, a difference between the 972  
 973 two competition types was also apparent. 973

974 In addition to differences in climbing time and 974  
 975 experience, both Sanchez et al. (2010) and Draper, 975  
 976 Dickson, et al. (2011) examined the psychological 976  
 977 states preceding an on-sight ascent. Sanchez et al. 977  
 978 (2010) discovered that, even when differences in 978  
 979 baseline ability were accounted for, successful 979  
 980 climbers reported higher levels of pre-performance 980  
 981 somatic anxiety, which correlated positively with the 981  
 982 final route scores. In addition to these findings, pre- 982  
 983 performance emotions were also significantly associ- 983  
 984 ated with the participants’ movement behaviour, as 984  
 985 shown by increases in entropy (Sanchez et al., 2010). 985  
 986 It has previously been stated that successful athletes 986  
 987 are able to maintain a more positive affective state 987  
 988 prior to competition than those who are less 988  
 989 successful (Treasure, Monson, & Lox, 1996). This 989  
 990 is supported by Sanchez et al., (2010), who observed 990  
 991 that superior performers were climbers who experi- 991  
 992 enced simultaneously high levels of somatic anxiety 992  
 993 and positive affect. Similarly, Draper, Dickson, et al. 993  
 994 (2011) found that whilst there were no significant 994  
 995 differences in the subjective feelings of somatic or 995  
 996 cognitive anxiety, as reported by the CSAI-2R, there 996  
 997 were significant differences in reported self-confi- 997  
 998 dence. Successful climbers reported much greater 998  
 999 feelings of self-confidence before completing a climb, 999  
 1000 which may have improved route-planning decisions 1000  
 1001 and the choice of technique and tactics employed, 1001  
 1002 and, as a result, directly improved their performance 1002  
 1003 (Draper, Dickson, et al., 2011). 1003  
 1004

1005  
 1006 *4.2. Alterations in movement performance*

1007 Inappropriately high levels of anxiety have been 1007  
 1008 shown to increase movement time, visual fixation, 1008  
 1009 decrease visual search rate (Nieuwenhuys et al., 1009  
 1010 2008) and increase muscle tension (Pijpers et al., 1010  
 1011 2003). Approaches to quantify movement quality 1011  
 1012 include measurement of the fluency of participants 1012  
 1013 climbing movements by calculating the geometric index 1013  
 1014 of entropy of the climber’s trajectory (Cordier, France, 1014  
 1015 Bolon, & Pailhous, 1993) and observing the proportion 1015  
 1016 of time spent moving and maintaining static positions 1016  
 1017 (Fryer, Dickson, Draper, Blackwell, et al., 2012). It is 1017  
 1018 thought that alterations in physical behaviour from 1018  
 1019 anxiety are caused by a reduction in information 1019  
 1020 processing efficiency and regression to an earlier stage 1020  
 1021 of motor learning, negatively influencing a climber’s 1021  
 1022 movement behaviour (Nieuwenhuys et al., 2008; 1022  
 1023 Pijpers et al., 2003). Pijpers et al. (2003) suggested 1023  
 1024 that under pressure an inward focus of attention occurs, 1024  
 1025 resulting in more conscious control of the execution of 1025  
 1026 well-learnt motor skills. Pijpers et al. (2003), as with 1026

1027 Dickson, Fryer, Blackwell, et al. (2012) and Draper  
 1028 et al. (2012), conclude that practice reduces the effects  
 1029 of motor learning regression, through a combination of  
 1030 habituation and learning to perform the task under the  
 1031 influence of higher levels of anxiety. These findings  
 1032 further support the benefits of experience: through  
 1033 becoming habituated with taking lead falls and the  
 1034 automation and stress proofing of movement skills,  
 1035 more advanced climbers are able to make tactical  
 1036 decisions regarding the route, holds and rests, mini-  
 1037 mising the physiological and psychological stress of a  
 1038 given climb.

1040 **5. Summary of future research directions**

1042 Climbing psychophysiology has emerged as a signifi-  
 1043 cant and distinct area of research over recent years.  
 1044 Further investigation of the effects of climbing specific  
 1045 psychological stimuli on performance will help us to  
 1046 further understand the relationship between individual  
 1047 climbers' experience and their ability to appropriately  
 1048 respond to stimuli. Importantly, it will also inform how  
 1049 climbers with less experience may improve their  
 1050 climbing performance. There are several areas of  
 1051 climbing psychophysiology research that would benefit  
 1052 from attention, both concerning climbing specific  
 1053 questions and more general psychophysiological  
 1054 methodologies.

1055 Psychophysiology methodologies will benefit from  
 1056 research and refinement, especially concerning their  
 1057 sensitivity to differences between anxiety and  
 1058 arousal. In particular, assessing the sensitivity of the  
 1059 hormone cortisol and its ability to quantify stress  
 1060 responses in climbing; along with considering more  
 1061 sensitive alternatives, such as Leukocyte Coping  
 1062 Capacity (Shelton-Rayner, Mian, Chandler, Robert-  
 1063 son, & Macdonald, 2012). Similarly, the investi-  
 1064 gation of potential alternative anxiety inventories to  
 1065 the CSAI-2R may help to clarify responses;  
 1066 alternatives may include the recently developed  
 1067 Three-Factor Anxiety Inventory (Cheng, Hardy, &  
 1068 Markland, 2011).

1069 Several climbing-specific psychophysiology issues  
 1070 would benefit from further investigation: one area in  
 1071 particular, is the affect of the outdoor climbing  
 1072 environment on performance. Whilst only five papers  
 1073 (Booth et al., 1999; Bunting et al., 1986, 2000; Hardy  
 1074 & Hutchinson, 2007; Williams et al., 1978) have  
 1075 looked at climbing outside, only Hardy and Hutch-  
 1076 inson (2007) have examined climbing psychophysiol-  
 1077 ogy. Furthermore, to our knowledge, as yet there has  
 1078 not been any research conducted comparing climbing  
 1079 indoors and outdoors. Similarly, differences in route  
 1080 finding, the perception of affordances and learning  
 1081 between indoor and outdoor climbing would be of  
 1082 interest. Finally, improving our understanding of the  
 1083 process by which climbers become habituated to

taking lead falls indoors, and how/if this habituation  
 transfers to other environments, would be of benefit to  
 both climbers and coaches.

1089 **6. Conclusion**

1090 To conclude, the affects of climbing stimuli on an  
 1091 individual's performance appear to be conditional on  
 1092 their experience, with more experienced climbers  
 1093 suffering less anxiety and fewer decrements in  
 1094 performance. It is likely that the experience–stressor  
 1095 relationship is due to advanced climbers' greater  
 1096 understanding, and rationalisation of the risks  
 1097 associated with the sport, habituation to the stressors  
 1098 gained through practice and an ability to perform with  
 1099 higher levels of anxiety. However, it is speculated that  
 1100 individuals' responses to stimuli are more complex  
 1101 than those reported by the CSAI-2R anxiety inventory  
 1102 and the psychophysiological stress marker cortisol.  
 1103 Beyond an intermediate level of climbing ability  
 1104 (French 5 or Ewbank 18) no significant differences  
 1105 between lead and top-rope conditions have been  
 1106 found using these measures, with the exception of  
 1107 Hodgson et al. (2009). The lack of significance  
 1108 beyond an intermediate level is unexpected, given the  
 1109 low cut-off grade between lower-grade and inter-  
 1110 mediate climbers, drawing into question the sensi-  
 1111 tivity of the measures used. It appears that these  
 1112 measures are not subtle enough to differentiate  
 1113 between climbing groups and experience on a single  
 1114 climb and that they are also unable to explain all of the  
 1115 intra- and inter-individual variation seen in responses.  
 1116 Assessment of the viability of more subtle anxiety  
 1117 indices and psychophysiological markers is necessary,  
 1118 as previously discussed.

1119 The findings of climbing psychophysiology  
 1120 research hold significant implications for coaching  
 1121 climbers: through seeking to reduce the disparity  
 1122 between individuals' expectation and the reality of  
 1123 climbing stimuli and promote a balance between  
 1124 anxiety and self-confidence, it will be possible to  
 1125 evoke positive emotions towards the task and  
 1126 enhance performance. For researchers, whilst several  
 1127 areas have been highlighted for further study, it is  
 1128 likely that research will also need to return to  
 1129 mainstream anxiety research to explore and  
 1130 develop more subtle, sensitive measures, beyond  
 1131 those that are currently in use. It is hoped that this  
 1132 will allow us to gain further understanding of the  
 1133 subtlety and complexity of psychophysiological  
 1134 responses to climbing stimuli.

1137 **Acknowledgements**

1138 No funding was received for the purposes of this  
 1139 study. The authors declare no conflicts of interest.

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