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Review

Balancing Excellence and Well-being: An Occupational Perspective on Anxiety Among Elite Performers

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ABSTRACT

Background: Elite performers, such as business executives, athletes, and surgeons, face distinctive role demands that contribute to anxiety and psychological stress. Although prior research has explored anxiety within these groups individually, little is known about anxiety among high performers collectively or from an occupational lens.

Aims/Objectives: This narrative review synthesizes current evidence on how individuals in high-performance occupations experience anxiety and examines the impact on occupational engagement, role fulfillment, and well-being.

Methods: Twenty-nine peer-reviewed articles published between 2015 and 2025 were analyzed from CINAHL, PubMed, Google Scholar, Web of Science, and Business Source Ultimate, focusing on executives, elite athletes, and surgeons.

Key Findings: Across domains, anxiety emerged as a pervasive and consequential experience shaped by perfectionism, role imbalance, and continual evaluation inherent to high-stakes performance. Effective strategies identified include adaptive coping strategies, such as mindfulness and mastery coping, as well as supportive work environments and engagement in restorative or serious leisure occupations.

Conclusions: These findings highlight the potential for occupational therapy to address the contextual and role-based contributors to anxiety, promoting optimal performance and psychological well-being in high-demand professions.

Key Words: Anxiety, elite performers, elite athletes, business executives, surgeons, occupational therapy

INTRODUCTION

While elite performance roles provide meaning, purpose, and identity, they also expose individuals to unique occupational stressors that can generate significant anxiety. Research demonstrates that anxiety is both common and consequential among individuals in executive, athletic, and medical roles (Egbe & El Boghdady, 2024; Runacres & Marshall, 2024; Starner, 2024). Each field has performance-related pressures, including constant evaluation, high visibility, responsibility for outcomes, and perfectionistic self-standards that can trigger significant anxiety symptoms and potentially impact the ability to engage meaningfully in a chosen occupation.

Although anxiety has been examined within each of these professional domains, the existing literature remains siloed, discipline-specific, and conceptually fragmented. Despite the growing recognition of anxiety in these fields, research is uneven across disciplines and rarely considers anxiety from an occupational lens. As a result, similarities in how anxiety influences role balance, daily occupations, and occupational identity across elite performers remain poorly understood. Previous literature reviews on the mental health of elite performers have not evaluated multiple domains of elite performers in unison, nor have they evaluated the relationship between performance, well-being, and occupation in high-performance roles. Thus, opportunities for effective occupation-centered interventions to support resilience and participation in these populations remain underexplored.

The purpose of this literature review is to synthesize evidence on how individuals in high-performance occupations (e.g., business executives, elite athletes, and surgeons) experience anxiety and to examine its impact on occupational engagement, role fulfillment, and well-being. By synthesizing findings across disciplines, this review aims to uncover shared mechanisms and coping strategies that can inform occupation-centered approaches to supporting performance and well-being in high-stakes contexts. Rather than focusing solely on profession-specific outcomes, this review emphasizes the occupational consequences of anxiety that transcend disciplinary boundaries.

The Model of Human Occupation (MOHO) (Kielhofner & Burke, 1980) provides a lens for this review to understand how personal factors, such as motivation and identity, environmental expectations, and performance demands interact to influence occupational engagement and anxiety among high performers. In addition to MOHO (Kielhofner & Burke, 1980), the Person-Environment-Occupation (PEO) model (Law et al., 1996) offers a complementary framework for understanding anxiety among high performers. PEO emphasizes how congruence or misfit between individual characteristics, environmental demands, and occupational tasks influences performance and well-being. This model is particularly relevant for elite performers, whose anxiety may arise when increasing occupational demands or environmental pressures outpace available personal and contextual supports.

High performers are individuals who consistently achieve outcomes that are contextually valued and at the highest standard of excellence in their respective fields (Cleere, 2024; Hendricks et al., 2022). Professions such as executive leadership, elite athletics, and surgical medicine often involve individuals who operate under high demands and consistently demonstrate exceptional performance.

Thus, this review focuses on three elite performers: chief executive officers or business executives, elite professional athletes, and surgeons. First, chief executive officers (CEOs) are the highest-ranking executives within an organization. They are responsible for major corporate decisions, overseeing operations and resources, and serving as the primary link between the company's board, partnerships, and executive team (Dooley, 2024).

Second, elite professional athletes consistently perform at the highest competitive levels, often under intense public scrutiny and stringent performance standards. Although no consensus definition exists (McAuley et al., 2022), this review defines elite athletes as adults who compete at superior levels in their sport, achieving results that distinguish them from their peers. We limited this review to professional athletes because student athletes navigate a unique combination of academic, developmental, and sport-related demands that differ substantially from those of professionals. Researchers have specifically investigated how recent changes in National Collegiate Athletic Association (NCAA) regulations that allow student-athletes to pursue financial and branding opportunities under Name, Image, and Likeness (NIL) rules have impacted the mental health of student-athletes (Beckworth, 2025). Because of the added pressure with this specific rule change, a separate analysis is needed to adequately address the distinct occupational challenges inherent to the student-athlete role.

Third, surgeons exemplify high performance, working in high-stakes environments that demand technical precision, rapid decision-making, and sustained concentration (Otukoya et al., 2025). While these high-performing roles are often associated with success, mastery, and resilience, they can also be accompanied by significant anxiety that disrupts occupational engagement and well-being.

Anxiety is an adaptive response to a threat that can produce physical, behavioral, and emotional symptoms (Arroll & Kendrick, 2018). It is characterized by tension, worry, and physical responses (American Psychological Association, 2023). Among high-performers, anxiety can manifest from experiences and pressures associated with the role, such as performance evaluation, perfectionism, responsibility for outcomes, and high levels of visibility. Some consequences of anxiety among high performers include impaired performance, decreased well-being, burnout, impaired decision-making, injuries, and disrupted participation in meaningful roles (Hotton & Chan, 2018; McLoughlin et al., 2021; Miller et al., 2022; Rook et al., 2016). Anxiety among individuals in high-performing occupations can not only affect personal well-being but also the outcomes of individuals, organizations, and societies surrounding the context of the high performer, making anxiety an essential factor to address among these high-performing roles.

Current research individually summarizes anxiety in each high-performing domain. Researchers in business or executive leadership, sports psychology, and surgical medicine each study anxiety in isolation, and there is limited evidence of the integration between anxiety and the various domains of high performers. This lack of cross-domain synthesis restricts the ability to identify shared occupational risk factors, adaptive strategies, and intervention targets. Understanding the occupational phenomenon of anxiety among high-performers in various

domains could promote a broader understanding of the concept and uncover cross-disciplinary solutions.

Occupational science literature consistently highlights how major life roles and performance demands can disrupt identity, occupational balance, and engagement (Chitiyo, 2025). Similar patterns may be observed among elite performers whose roles dominate daily life, leading to identity erosion. Because anxiety in high-performing occupations can disrupt engagement, performance, identity, and well-being, exploring this experience with an occupational therapy perspective could highlight the unique role demands, adaptation methods, and coping strategies across high-performing occupational domains.

This narrative review aims to examine how anxiety manifests in the daily occupations of business executives, athletes, and surgeons. It also seeks to identify the occupational risk factors, such as role imbalance, that contribute to anxiety. Additionally, this review aims to explore coping strategies and occupational adaptation methods among high performers in various domains. Lastly, this review aims to highlight the opportunities for occupational therapy to support the performance, resilience, and well-being of elite performers.

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Methods

This analysis draws on a review of scholarly articles focusing on anxiety among high performers, specifically business executives, elite athletes, and surgeons, from 2015 to 2025. Sources included peer-reviewed journals accessed through academic databases such as CINAHL, PubMed, Web of Science, Business Source Ultimate, and Google Scholar. Search terms included anxiety, stress, mental health, athletes, sports, athletics, corporate leadership, CEO, chief executive officers, executives, and surgeons. Boolean operators were also used in the search process (e.g., anxiety OR stress AND athletes OR sports OR athletics; mental health in corporate leadership OR CEOs OR executives OR chief executive officers; anxiety OR stress in CEOs OR chief executive officers OR corporate leadership OR executives; surgeons AND anxiety OR stress). Attention was given to publications that discussed the manifestations of anxiety and the coping and interventions associated with anxiety symptoms among adult high performers. Articles were also screened to ensure alignment with the research focus, population, and context of elite performers.

To uphold quality, included articles were peer-reviewed and demonstrated well-designed qualitative or quantitative methods. Articles were excluded from the review if they were not about the high performer's experience of anxiety, if they did not directly discuss anxiety as a primary or secondary outcome, or if they were about specific events or situations such as performing during the COVID-19 pandemic or within the context of an injury. Articles that focused on amateurs, students, or those with specific conditions such as paraplegia or disabilities were also excluded. These particular contexts and subjects were excluded because the unique developmental, physical, social, and role demands that accompany them would be more comprehensively addressed in a separate analysis. Additionally, opinion articles or those without qualitative or empirical support were excluded.

Results

Twenty-nine articles were identified to match the review's purpose. A final review of the

studies within the domains of high performers (business executives, elite athletes, and surgeons) revealed notable manifestations and patterns of anxiety and current interventions and coping strategies. 31% of the studies focused on business executives (n = 9), 48% on elite athletes (n = 14), and 20% on surgeons (n = 6). Figure 1 presents a flow diagram of the literature search process and results.

Executive leaders

Thirty-one percent of the articles focused on business executives. The studies included a variety of research methods, such as quantitative (Crespo-Ruiz et al., 2018; Keloharju et al., 2023; Cloutier & Barling, 2023; Mannor et al., 2016b), qualitative or conceptual (Rook et al., 2016; Barling & Cloutier, 2017; Bunea, 2020), and mixed-methods approaches (Mannor et al., 2016a; Rook et al., 2019).

Most studies (n = 5) sought to understand the manifestations and implications of mental health, including anxiety, among leaders or business executives (Barling & Cloutier, 2017; Crespo-Ruiz et al., 2018; Keloharju et al., 2023; Mannor et al., 2016a; Mannor et al., 2016b). Some aimed to introduce and evaluate protocols for evaluating senior executive stress (Rook et al., 2016; Rook et al., 2019). One study explored specific coping mechanisms for stress and anxiety among CEOs (Bunea, 2020), and one study examined the expectations that others hold on leaders' mental health (Cloutier & Barling, 2023). Collectively, the literature on business executives demonstrates diversity in methodology, with most focusing on the manifestations and consequences of anxiety and stress. In contrast, others explored stress evaluation protocols, coping strategies, and social expectations surrounding leaders' well-being.

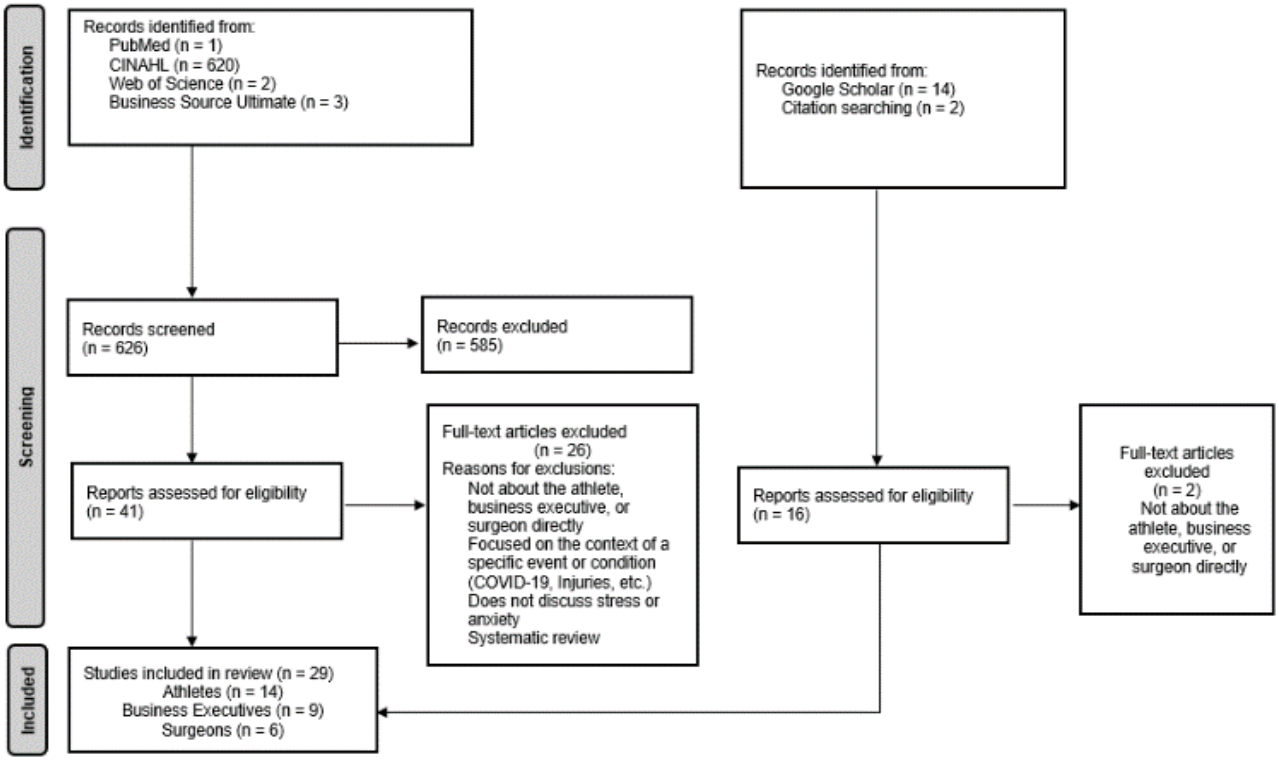

Figure 1: PRISMA flow diagram

Many studies described anxiety manifestations among business leaders. Bunea (2020) explored how CEOs of large, high-revenue companies (annual revenue between $1 billion and $137 billion, with a median revenue of $4.3 billion) perceive their roles and found that, according to the executives, the CEO job is all-consuming, with constant pressure from multiple stakeholders who have contradictory demands. Rook et al. (2016) evaluated senior executive stress at a leading international business school and found that anxiety can manifest through physiological and psychological symptoms in these roles. Specifically, senior executives under stress may experience reduced concentration, memory lapses, indecisiveness, impaired innovation, irritability, and emotional dysregulation (Rook et al., 2016). Anxiety in leaders had other implications. According to Barling & Cloutier (2017), anxious leaders may provide lower-quality supervision to subordinates because they may have weakened physical, cognitive, and emotional resistance to stress.

Some articles explored how stress and anxiety impact recovery and business behavior. Crespo-Ruiz et al. (2018) utilized high-performance sports technology to assess the physiological load of stress and the quality of recovery in executives during and after their workday. The researchers found that stress generated or experienced during the workday persisted outside of working hours, negatively impacting their quality of recovery (Crespo-Ruiz et al., 2018). Others found that anxiety drives executives to adopt a threat-avoidance strategy when leading their companies (Mannor et al., 2016a). Specifically, executives who experience higher job anxiety may be more likely to reduce their strategic risk taking and buffer themselves by surrounding their decision-making with close supporters (Mannor et al., 2016a). However, when faced with potential losses, business executives may be more likely to make riskier decisions or strategic bets to recuperate losses (Mannor et al., 2016b). While researchers have found that anxiety, described as paranoia in some contexts, can be helpful in business when monitoring a potentially volatile business market, too much anxiety and paranoia could prevent business executives from making larger strategic decisions that could yield significant success (Mannor et al., 2016b).

Despite the evidence of high work demands and the impact on mental health, researchers have found that people expect leaders to experience greater psychological well-being, fewer anxiety symptoms, and better mental health than their employees (Cloutier & Barling, 2023). Some have discovered that people believe leaders have greater access to job resources, which are assumed to facilitate mental health (Cloutier & Barling, 2023). While researchers have found that CEOs are generally in better health compared to the general population and other high-skill professionals (Keloharju et al., 2023), executives who experience mental health challenges, like anxiety, might face significant consequences in their work performance. For CEOs of smaller companies, a single standard deviation decline in mental health has been associated with a 6% reduction in job performance (Keloharju et al., 2023).

Only one study investigated potential coping skills for business executives. Bunea (2020) found that serious leisure occupations, or the dedicated and methodical pursuit of meaningful and rewarding activities, are an effective coping strategy for the demands of the CEO role. In a qualitative analysis of how CEOs perceive the role of their passionate

non-work interests, Bunea (2020) found that serious leisure provides freedom from the CEO role and promotes personal resources, including joy, pride, creativity, mental agility, resilience, and confidence. According to the study participants, serious leisure enhanced their ability to lead under extreme pressure (Bunea, 2020).

Athletes

Fifty percent of the articles focused on elite athletes. Most studies (n = 6) aimed to identify factors that contribute to or explain anxiety, stress, or mental health outcomes in elite athletes (Drew et al., 2025; McLoughlin et al., 2021; Urwin et al., 2021; Van Landeghem & Jakobson, 2025; Chadha et al., 2024; Köyağasıoğlu & Şenışık, 2023). Other studies explored the relationship between anxiety, performance, and psychological factors (Lee & Kang, 2024; Lyon & Plisco, 2020; McNeil et al., 2024; Wolf & Utesch, 2024; Forsberg et al., 2025). Some studies tested or evaluated specific interventions for anxiety or mental performance (Khojastefar et al., 2021; Zeljka, 2021). One study aimed to develop, validate, and use a tool to measure anxiety responses in sports contexts (Kelly et al., 2022). Across most of the studies, anxiety was often present among elite athletes; however, some studies presented contradictory findings in which anxiety negatively affected performance, while in others, it improved performance.

In this review, researchers investigated the manifestations of anxiety among professional golfers, soccer players, swimmers, cricket players, ultramarathon runners, National Hockey League (NHL) players, handball players, sky divers, esports players, and other elite athletes. Internal contributors to anxiety among elite athletes included performance, balancing life commitments, the meaning of the sport, irrational beliefs, personality, childhood exposure to emotional abuse, fear of failure, and cumulative lifetime stress (Chadha et al., 2024; Drew et al., 2025; Köyağasıoğlu & Şenışık, 2023; Lee & Kang, 2024; McLoughlin, et al., 2021; Van Landeghem & Jakobson, 2025). External contributors included role changes or disruption, life-threatening situations, other relationships, humiliation, pressure of competition, pre-competition stress, emotionally abusive coaching, physical demands, coping resources, teammate communication, and mistakes (Drew et al., 2025; Kelly et al., 2022; Köyağasıoğlu & Şenışık, 2023; McLoughlin, et al., 2021; Van Landeghem & Jakobson, 2025).

Notably, the role of sport for the individual and the level of competition influenced the types of stressors athletes experienced. Köyağasıoğlu and Şenışık (2023) found that athletes' psychological states, coping abilities, and social support resources differed between amateur and professional American football players in Turkey. The professional football players had higher anxiety, while American football players had higher support and coping resources (Köyağasıoğlu & Şenışık, 2023).

In some studies, anxiety or stress was found to negatively affect athletes' performance in their sport (Lee & Kang, 2024; Urwin et al., 2021), while in others, anxiety did not negatively affect performance. Kelly et al. (2022) utilized a virtual reality simulator to investigate the impact of pressure and competition anxiety on batting performance in cricket, finding that despite anxiety levels significantly increasing in high-pressure conditions, there were no significant negative changes to batting performance; instead, performance improved. Researchers attributed this

association to perceptions of control, in which athletes who feel in control when performing under pressure tend to manage their anxiety effectively and perform better (Kelly et al., 2022). In a longitudinal study, examining the reciprocal relationship between psychological states and performance among NHL players, researchers found that psychological states had only a small effect on performance, whereas the players' performance during a game was more likely to influence their psychological states the following day (Forsberg et al., 2025).

In other sports, anxiety contributed to somatic symptoms and mental states, which influenced performance. For example, in ultramarathon running, pre-competition psychological states or anxiety may have contributed to gastrointestinal symptoms and impacted performance (Urwin et al., 2021). Specifically, acute and chronic anxiety and chronic stress were found to be linked to gastrointestinal symptoms in endurance competition (Urwin et al., 2021). In golf, researchers found anxiety to be highly correlated with fear of failure during competition, and feelings of anxiety may interfere with flow (a psychological state in which an individual becomes fully immersed and absorbed in an activity), which is a contributor to optimal performance (Lee & Kang, 2024).

Ways to manage anxiety in elite sports differed among studies. Researchers reported that coping with competition anxiety, fear of failure, and the pressure demands that accompany the role of an elite athlete involved integrated psychological skills training and mindfulness interventions (Zeljka, 2021), self-compassion training (Lyon & Plisco, 2020), increased experience and confidence (McNeil et al., 2024), being a part of a team (Wolf & Utesch, 2024), challenging irrational beliefs (Chadha et al., 2024), and incorporating mastery coping and internal regulation strategies (Drew et al., 2025).

Other interventions for managing anxiety among elite athletes included acupuncture (Khojastefar et al., 2021). Researchers found that acupuncture might decrease cognitive anxiety, but might not affect somatic anxiety (Khojastefar et al., 2021). In some studies, experience was found to reduce anxiety because it influenced risk perception and self-confidence (McNeil et al., 2024). Other ways to manage anxiety included working on a team, which handball athletes reported helped alleviate anxiety in high-pressure competition (Wolf & Utesch, 2024). Additionally, Rational Emotive Behavioral Therapy (REBT) could be a solution to target irrational beliefs and prevent increases in threat evaluation that lead to anxiety (Chadha et al., 2024). Other anxiety management techniques used by athletes included mastery coping strategies (planning and exerting effort to overcome a challenge), internal regulation (managing emotions and employing calming strategies), and goal withdrawal strategies (disengagement and avoidance) (Drew et al., 2025).

Surgeons

Twenty-one percent of the articles focused on anxiety in high-performance medical roles, specifically, surgeons. Most studies on surgeons (n = 4) employed quantitative methods, utilizing surveys or physiological data to quantify anxiety levels and their correlations (Budden et al., 2024; Dupley et al., 2020; Miller et al., 2022; Jones et al., 2015). One study tested an intervention (Alam et al., 2016), while another was a narrative commentary (Hotton & Chan, 2018).

Across the studies, anxiety among surgeons was found to be widespread across specialties, genders, and levels of experience. Some researchers identified technical complexity, level of risk involved in procedures, and colleague dynamics as primary triggers for anxiety (Miller et al., 2022). While a lack of experience or training contributed to anxiety in some studies (Miller et al., 2022; Budden et al., 2024), others found that anxiety persisted regardless of experience level (Dupley et al., 2022). Notably, stress appraisal, or the ability to evaluate a stressful event, differed based on experience, responsibility, and procedure type (Budden et al., 2024). Stress experienced during surgery was often greater than anticipated, and both primary surgeons and residents were more likely to experience anxiety compared to assistants or other supporting surgeons (Budden et al., 2024). Even routine surgeries could elicit increased sympathetic activity and perceived stress (Jones et al., 2015).

Perfectionism also appeared to relate to anxiety. Miller et al. (2022) found a significant correlation between surgical perfectionism and surgical performance anxiety, noting that while perfectionism can enhance surgeons' performance, it may simultaneously increase anxiety (Miller et al., 2022). The impacts of anxiety among surgeons were also well-documented. In a study of 631 surgeons, 100% of the participants believed surgical performance anxiety affected surgeons, with 87% reporting personal experiences of it (Miller et al., 2022). Those who experienced surgical performance anxiety reported significantly worse well-being compared to those who did not (Miller et al., 2022).

The literature on interventions to reduce anxiety among surgeons was limited. One study in the review tested an intervention initially intended for patients that also demonstrated benefits for surgeons (Alam et al., 2016). In this study, guided imagery recordings and relaxation music played through headphones for patients during surgery significantly reduced the surgeons' anxiety during the procedure (Alam et al., 2016). Having patients distracted by calming audio reduced the pressure on surgeons to ensure patient calmness during the operation (Alam et al., 2016). Other researchers suggested that supportive environments and open acknowledgment of anxiety among surgeons could help mitigate anxiety in this population (Miller et al., 2022).

In summary, across all three domains, anxiety emerged as a prevalent experience directly associated with the demands of high-performing roles, with effects that extend beyond the workplace into daily life. However, anxiety differs in its manifestations and contributing factors across groups of high performers, as summarized in Table 1.

Table 1: Manifestations and contributors to anxiety across domains

Domain	Author(s), Year	Common Manifestations	Common Contributors
Executives	Barling & Cloutier (2017)	Decreased quality of supervision; emotional exhaustion	Anxiety weakens leaders' physical, cognitive, and emotional resistance to stress
	Bunea (2020)	Feelings of overwhelm; emotional exhaustion	All-consuming role; pressure from multiple stakeholders; internal perfectionism
	Cloutier & Barling (2023)	Heightened expectations of well-being; discrepancy between perception and reality	Societal belief that leaders are psychologically resilient and resource-rich
	Crespo-Ruiz et al. (2018)	Persistent stress beyond work hours; poor recovery	High workload intensity; limited work-life separation
	Keloharju et al. (2023)	Decline in mental health linked to weaker performance	Occupational stress; leadership pressure
	Mannor et al. (2016a)	Threat-avoidant decision making; reduced strategic risk-taking	High responsibility; perceived lack of control
	Rook et al. (2016)	Sleep problems, low energy, reduced concentration, irritability, impaired innovation	Long hours; increasing managerial demands; interpersonal strain
	Rook et al. (2019)	Cognitive and physiological stress indicators; emotional dysregulation	Senior executive role strain; limited recovery opportunities
Athletes	Chadha et al. (2024)	Increased cognitive and somatic anxiety	Irrational beliefs; perceived threat
	Drew et al. (2025)	Elevated anxiety during performance	Teammate mistakes; communication challenges; pressure of competition
	Forsberg et al. (2025)	No performance decline	Game outcomes influence psychological state the following day
	Kelly et al. (2022)	Increased anxiety under pressure; no performance decline	High-pressure competition; virtual simulation stressors
	Köyağasıoğlu & Şenışık (2023)	Somatic tension; anxiety related to performance meaning	Sport as income; physical demands of sport
	Lee & Kang (2024)	Fear of failure; reduced flow during performance	Competition pressure; performance expectations
	McLoughlin et al. (2021)	Heightened anxiety and stress symptoms	Role changes; cumulative stress; humiliation; life disruption
	Urwin et al. (2021)	Gastrointestinal symptoms; reduced performance	Pre-competition anxiety; endurance stress
	Van Landeghem & Jakobson (2025)	Heightened anxiety sensitivity	Emotional abuse from coaches; sensory processing sensitivity
Surgeons	Alam et al. (2016)	Multitasking fatigue; reduced situational awareness	Cognitive load during procedures
	Budden et al. (2024)	Heightened stress response; physiological anxiety	Surgical responsibility level; procedural difficulty
	Dupley et al. (2020)	Burnout; increased anxiety	Gender differences; dexterous and cognitive demands
	Hotton & Chan (2018)	Performance anxiety under observation	Public scrutiny; technical precision demands
	Jones et al. (2015)	Sustained sympathetic hyperactivity; impaired decision-making	Chronic stress; high-stakes performance
	Miller et al. (2022)	Psychological distress; impaired performance	Perfectionism; case complexity; colleague dynamics

Across business executives, elite athletes, and surgeons, anxiety was consistently reported as a cognitive, emotional, and physiological experience associated with the demands of high-performance roles. Common manifestations included impaired concentration, emotional dysregulation, heightened physiological arousal, and reduced recovery. Contributors to anxiety across domains frequently included role overload, high responsibility for outcomes, perfectionism, and ongoing performance evaluation, though the specific triggers varied by professional context.

Across domains, interventions for anxiety among high performers can be grouped into several occupational therapy-relevant categories: mindfulness and psychological skills training, engagement in meaningful or serious leisure activities, mastery coping strategies, environmental and ergonomic adaptations, role renegotiation, and occupational balance training.

Table 2 summarizes these intervention types across the three domains. Interventions across the three domains aligned with several occupational therapy-relevant strategies. Mindfulness and psychological skills training were most common in athletes, serious leisure activities were documented in executives, and environmental adaptations were applied in surgical contexts. Mastery coping, role renegotiation, and occupational balance strategies were observed across multiple domains, highlighting potential cross-domain occupational therapy applications.

Table 2: Occupational therapy interventions for anxiety among high performers

OT Intervention Category	Example Studies	Population	Description / Application	Outcomes
Mindfulness/ Psychological Skills Training	Zeljka (2021); Lyon & Plisco (2020)	Ice hockey, swimming	Systematic use of mental tools (imagery, self-talk, goal setting, arousal control, concentration, and performance routines) or mindful observation to reduce anxiety and enhance self-regulation	Reduced anxiety; improved self-regulation; Perceived benefits on performance and other life aspects
Serious Leisure/ Meaningful Occupation	Bunea (2020)	Executives	Dedicated engagement in meaningful, rewarding activities to promote recovery, resilience, and personal resources	Offered freedom and recovery and generated personal resources (energy, creativity, resilience, and confidence)
Mastery Coping/ Internal Regulation	McNeil et al. (2024)	Skydivers, Esports athletes	Planning, skill-building, and emotional regulation to manage stress and enhance confidence	Reduced anxiety; increased confidence; adjusted risk perception
Environmental/ Ergonomic Adaptation	Alam et al. (2016); Miller et al. (2022)	Surgeons	Modifications to the physical or social environment to reduce anxiety and support occupational performance	Reduced anxiety
Role Renegotiation/ Team Support	Wolf & Utesch (2024)	Handball athletes	Leveraging team cohesion and social support to mitigate stress	Reduced anxiety; team cohesion and social support
Occupational Balance Training	Bunea (2020)	Executives	Promoting balance across work, leisure, and self-care occupations	Reduced anxiety and burnout

DISCUSSION

Anxiety manifestations in business, sports, and surgery

High-performing individuals experiencing anxiety may have challenges in their everyday occupations beyond those in their specialized fields. While anxiety has been known to impact the occupational performance of non-high-performers negatively (Gunnarsson et al., 2021), anxiety experienced through a high-demand and high-stakes occupation can have even more significant implications. However, interpretation of these findings should consider that the literature reviewed was not evenly distributed across the three professional domains, with substantially greater representation of elite athletes compared to business executives and surgeons. Executives, including CEOs and leaders in business and large organizations, as well as elite athletes and surgeons, face unique challenges due to the demands of their roles. Evidence from this review suggests that high performers experience disruptions in occupational balance, which is the dynamic relationship between the different dimensions of occupations in one's life (Yazdani et al., 2018).

The all-consuming aspects of high-performing roles contributed to occupational imbalances and anxiety across all three occupations. For CEOs, the constant pressure from multiple stakeholders, including the employees, the corporate partners, customers, and regulatory agencies, adds unique demands to their occupational tasks (Bunea, 2020). The demands of a CEO are often all-consuming, limiting the individual's mental and physical space for other life occupations. The demands of a leader's role may be more likely to impact other areas of self-care and occupation, such as sleep, which in turn can foster anxiety, poor mental health, and negatively impact performance (Barling & Cloutier, 2017). Similarly, in elite athletics, balancing life commitments and experiencing changes in their roles was found to be a primary stressor (Drew et al., 2025). The elite athlete role demands specific lifestyle activities to support performance, such as self-care, healthy leisure, personal training, and preparation outside of the sport, which may further shift the balance an elite athlete has between their occupations (Matuszak, 2020). The level of competition and the meaning of the sport to the individual can also undermine occupational balance among athletes, as Köyağasıoğlu and Şenışık (2023) found that anxiety levels and support differ between amateurs and professionals. In surgical medicine, the imbalance inherent in a surgeon's role could contribute to anxiety while they are performing. For example, some surgeons have felt pressure to multitask during surgery to ensure the patient remains calm and distracted, thereby limiting their capacity to devote their full energy to the technical aspects of their occupation (Alam et al., 2016).

The detrimental consequences of negative performance in high-performing roles could also contribute to anxiety. Specifically, if a CEO makes a mistake, their company could lose significant amounts of revenue, employees could be impacted, and corporate business partnerships could be at risk. Similarly, if a surgeon makes a mistake, there could be life-threatening health implications. For some elite and professional athletes, their occupation in sport supports their livelihood and that of their family, and poor performance can have significant implications for their daily life (Köyağasıoğlu & Şenışık, 2023). The demands on these high-performing roles extend beyond that of the single occupation to impact the daily life of the individual and those around them.

Another similar theme across disciplines is the stigma associated with high-performance occupations. For example, people may expect high-level business executives to be healthier, more resilient, and have more resources to support their health and occupational well-being (Barling & Cloutier, 2017).

Similarly, despite the high prevalence and challenges of anxiety among surgeons, there is a lack of an open culture of sharing and discussing anxiety among these performers (Miller et al., 2022). While mental health stigma among elite athletes was rarely mentioned in the articles included in the review, researchers have found that stigma is one of the primary barriers preventing an athlete from seeking help for mental health issues (Poucher et al., 2019). Occupational therapists are well-positioned to implement self-advocacy interventions with their clients, as self-advocacy is a primary client factor encompassed within the occupational therapy domain and process (Guzaldo et al., 2021). Uncovering the mental health stigma associated with high-performing occupations can prompt occupational therapists to facilitate self-advocacy for mental health care among their high-performing clients to prevent and address some of these challenges.

From a PEO perspective, anxiety among high performers may be understood as arising from misalignment between personal capacities (e.g., stress tolerance and coping resources), environmental conditions (e.g., scrutiny, time pressure, and organisational culture), and occupational demands (e.g., high-stakes decision-making and performance precision). Across domains, the literature reviewed suggests that anxiety intensifies when environmental expectations exceed opportunities for recovery, adaptation, or role balance. An occupational therapist is one of the few, if not only, professions that are trained in and equipped to align personal factors, environmental conditions, and occupational demands to maximize the fit between the high-performer and their elite occupations.

Occupational adaptations to support elite performers

Across the three domains of high performers, there were patterns of occupational identity erosion, or an experience in which an occupational role becomes disproportionately central and can dominate self-identity. While this construct is emerging in current occupational science, it could explain the occurrence in which one's identity becomes consumed by a singular, high-performance role.

Disruption in occupational identity, or the loss of who one had been or what one could do (Hansson et al., 2022), is related to the idea of identity erosion; however, erosion better describes how a singular role becomes so dominant that it may consume other aspects of occupational identity. For elite performers, self-work may be tied to productivity, success, perfectionism, or leadership expectations and threats to performance could impact core identity. Recognizing occupational identity erosion helps explain why anxiety presents acutely in these groups and highlights a key area where occupational therapy could intervene by supporting identity diversification and occupational balance.

There are opportunities for occupational therapists to address role imbalance, occupational demands, and holistic well-being among business executives, elite athletes, and surgeons. Although occupational therapy is traditionally situated within clinical and rehabilitation settings, its core expertise in occupation, performance, and adaptation

positions the profession to contribute meaningfully within non-clinical, high-performance environments. Occupational therapists can integrate strategies across domains while incorporating occupation-based, environmental, and role-level adaptations to support mental health and performance sustainability, ultimately mitigating anxiety in this population.

Business executives

Occupational therapy has traditionally been associated with the rehabilitation of individuals living with physical or mental health challenges (Hawthorne, n.d.). However, occupational therapy's foundational focus on occupational balance, role performance, and environmental fit makes it highly relevant to corporate and organizational contexts. Occupational therapists can enhance executive health and productivity by holistically assessing and intervening in the physical, environmental, cognitive, and psychosocial domains of leadership roles (Hawthorne, n.d.). Coping with the stress and anxiety associated with executive leadership often requires external support, intentional strategies, and balanced occupational engagement beyond work tasks alone.

Grounded in the Model of Human Occupation (Kielhofner & Burke, 1980), occupational therapists can address the complex interaction between an executive's volition (motivation and values), habituation (routines and role patterns), performance capacity, and environmental demands. In non-clinical corporate settings, this may involve consultation-based services rather than traditional therapy delivery. For example, an occupational therapist could conduct a workplace and role analysis to identify areas of conflict, maladaptive habits, and environmental barriers, then develop a personalized occupational balance plan incorporating restorative routines, mindfulness, and graded delegation of tasks to promote occupational adaptation and restore self-efficacy.

Additionally, occupational therapists can facilitate engagement in meaningful occupations outside of work, such as serious leisure pursuits, that counterbalance the cognitive and emotional demands of the executive role (Bunea, 2020). By supporting sustainable role engagement rather than focusing solely on symptom reduction, occupational therapy offers a proactive, preventive approach well-suited to executive populations.

Elite athletes

The demands of an elite athlete's role vary depending on the sport, level of competition, and the personal meaning attributed to performance. However, most elite athletes, particularly those in top-level sport, often face intense physical and psychological demands that can lead to stress and anxiety. These pressures frequently stem from constant evaluation, perfectionistic standards, the risk of injury, and the need to sustain performance excellence under public scrutiny.

Using the Model of Human Occupation (Kielhofner & Burke, 1980), occupational therapists can view an athlete's sport as their primary occupation and address the dynamic interaction between the athlete's volition and goals, their training routines and role identity, their performance capacity, and environmental expectations. Unlike traditional rehabilitation models that focus on injury recovery, occupational therapy in elite sport can operate in performance, wellness, and preventative capacities. For example, an occupational therapist might work with an athlete experiencing anxiety related to performance expectations by helping them identify volitional

conflicts and by supporting the development of adaptive habits that promote recovery and self-regulation.

Occupational therapists can also intervene by optimizing the transactional relationship between an elite athlete's sport and their daily life (Neurolaunch Editorial Team, 2024). Unlike physical therapists or athletic trainers, occupational therapists examine how training, competition, travel, rest, and non-sport roles interact to influence mental health and performance. Integrating psychological skills training, mindfulness, mastery coping, and engagement in meaningful non-sport occupations represents a uniquely occupational approach to supporting elite athletes' mental health.

Elite athletes often work with sports psychologists and mental performance coaches to optimize performance and manage anxiety. For instance, some professional teams hire former players as performance coaches to leverage their firsthand understanding of team culture and athletic demands. Julius Thomas, a former NFL player and NSU graduate with a degree in psychology, now supports athletes' mental health and performance (Choulet, 2024). Similarly, elite golfers and other professional athletes sometimes engage sports psychologists to address anxiety, goal setting, and focus strategies (McCarthy, 2023). These roles illustrate the existing landscape of performance-focused mental health interventions, highlighting both opportunities and competition for occupational therapists seeking to enter the high-performance mental health space. Occupational therapists can differentiate themselves by offering holistic, occupation-centered interventions that integrate environmental adaptations, role analysis, and meaningful activity engagement alongside psychosocial strategies.

Surgeons

Surgeons operate within high-stakes environments that demand precision, rapid decision-making, sustained concentration, and emotional composure. These occupational demands can contribute to significant anxiety and stress. Guided by the Model of Human Occupation (Kielhofner & Burke, 1980), occupational therapists can support surgeons by addressing the interaction between their volition (values, motivation, and commitment), routines and professional roles, performance capacity, and environmental conditions. Importantly, occupational therapy involvement in surgical settings need not be limited to patient care roles but can extend to provider wellness, performance sustainability, and systems-level adaptation.

For example, occupational therapists could assess how environmental stressors, such as prolonged standing, limited recovery time, or high sensory stimulation in the operating room, interfere with focus and regulation. Interventions could include ergonomic adaptations, structured restorative routines between procedures, and strategies to enhance team communication, situational awareness, and cognitive load management. Such interventions align with occupational therapy's emerging role in workforce well-being and burnout prevention within healthcare systems.

Across all three high-performance domains, executive leadership, elite athletics, and surgery, occupational therapists are uniquely positioned to promote performance, resilience, and well-being through occupation-based and holistic interventions. These findings suggest that occupational therapy's

scope can extend beyond traditional clinical boundaries into consultative, preventive, and performance-enhancement roles within high-demand professions. By recognizing and addressing role imbalance, environmental demands, and the psychosocial contributors to anxiety, occupational therapy can play a transformative role in supporting elite performers' mental health and long-term occupational sustainability.

Limitations

This review has some notable limitations. First, as a narrative review, this study did not employ a systematic search or an inclusion and exclusion protocol. Therefore, some relevant studies may have been inadvertently omitted, and the findings are subject to selection bias. Second, the included studies varied in quality, methodology, and sample size. This heterogeneity limits the ability to draw firm conclusions or generalize findings across high-performance populations. Third, there was an imbalance in the volume of literature across professional groups. Research examining anxiety in elite athletes was more prevalent than research focused on corporate executives and surgeons. This disparity may reflect greater public and academic attention to athlete mental health, more established research infrastructures in sport psychology, and increased accessibility to athlete populations compared to executives and surgeons, who may face greater time constraints, privacy concerns, and organizational barriers to participation. This uneven representation limits the ability to make direct cross-domain comparisons or to identify fully generalizable patterns across high-performance occupations. Fourth, the occupational roles and contexts of business executives, athletes, and surgeons differ significantly in terms of culture, environment, and performance demands. While comparing them in one review provides valuable insight, it may oversimplify the nuanced experiences of anxiety and coping in each profession. This may introduce bias based on culture and region, which may not apply to all elite performers.

Recommendations for future research

Because few of the studies examined specific interventions or occupational therapy-based approaches to anxiety among high-performers, there is a need for future research to evaluate these types of interventions on this population. Additionally, since most studies were cross-sectional, there is a need for future studies to investigate how anxiety and coping strategies evolve within high-performance careers and the lasting impacts of occupation-based interventions in these roles. Studies that employ longitudinal methods, test interventions in a randomized controlled design, and incorporate mixed-methods approaches would be essential additions to the research on this subject. Further, no studies explicitly addressed the role of occupational therapy within elite performers, which highlights a significant gap in the literature. Future studies should explore, examine, and evaluate the unique role of occupational therapy in high-performance occupations.

Conclusion

This narrative review synthesized literature on how anxiety manifests among business executives, elite athletes, and surgeons; three high-performance groups characterized by intense occupational demands and elevated expectations. Across domains, anxiety emerged as a common and consequential experience shaped by factors including perfectionism, role imbalance, and constant evaluation inherent to high-stakes performance. These findings suggest that while

anxiety may at times motivate performance, persistent or unmanaged anxiety can compromise occupational engagement, decision-making, and well-being.

Anxiety in high performers can disrupt the balance between meaningful engagement, role expectations, and personal well-being. This review highlights that executives, athletes, and surgeons all benefit from adaptive coping strategies, such as mindfulness, mastery coping, and engagement in restorative or serious leisure occupations that promote recovery and resilience. However, few studies have tested these strategies using randomized controlled trials or with larger sample sizes.

Occupational therapists are uniquely positioned to contribute to the health and sustainability of elite performers by addressing the transactional relationships between the individual, their occupations, and their environments. Through occupation-based interventions, environmental adaptation, and facilitation of balance and meaning, occupational therapy can play a transformative role in supporting high performers to achieve optimal performance while protecting health and well-being. Future research should empirically examine how occupational therapy frameworks can be applied to optimize both performance and psychological well-being in high-demand professions.

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