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**Enhancing Athlete Engagement in Sport Psychology Interventions using Motivational Interviewing:  
A Case Study**

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30 **Abstract**

31 The clear reporting of the counseling approach (and theoretical underpinning) applied by sport  
32 psychologists is often missing, with a tendency to focus on intervention content rather than  
33 therapeutic processes and relationship building. Well defined psychotherapies such as Motivational  
34 Interviewing (MI) can help fill this void and provide an underpinning counseling approach (in an  
35 athlete-centred manner) as a framework for delivering interventions such as psychological skills  
36 training (PST). This article describes the role of MI as a framework upon which PST sport psychology  
37 interventions can be mapped and delivered. The paper presents an athlete case study to explain the  
38 role of MI at each phase of the interaction. Robust, well-defined applications of MI in sport require  
39 further research although evidence from other psychological domains suggests that it can be  
40 successfully blended into sporting contexts.

41 *Keywords: motivational interviewing, athlete engagement, integration, sport psychology,*  
42 *intervention framework*

## 56                    **Background and Context: Sport psychology interventions and orientations**

57

58 Sport psychologists typically operate within one of three frameworks and orientations:  
59 psychophysiological; socio-psychological; or cognitive-behavioral (CB). The latter model has  
60 traditionally been most widely employed with athletes to inform the delivery of psychological skills  
61 training (PST; Lindsay, Breckon, Thomas, & Maynard, 2007; Murphy, 1995). Within this PST approach,  
62 self-control strategies such as positive self-talk and mental rehearsal are taught to build athletes'  
63 abilities to regulate internal processes, manage environmental conditions, and execute skills and  
64 strategies under pressure, through both cognitive and somatic techniques (Behncke, 2004). This  
65 application has tended to be in a problem-centred way, rather than an athlete-centred way (Holt &  
66 Streat, 2001), and perhaps consequently, in recent years there has been increased interest in  
67 applying other approaches from counseling and clinical psychologies with athletes. To date, these  
68 include cognitive behavioral therapy (CBT; McArdle & Moore, 2012) and derivatives of this approach  
69 (e.g., rational emotive behavior therapy, REBT; Turner & Barker, 2014), solution-focused therapy  
70 (SFT; Høigaard & Johansen, 2004), and third wave therapies such as acceptance and commitment  
71 therapy (ACT; Shortway, Wolanin, Block-Lerner & McDonald, 2018) and mindfulness-acceptance-  
72 commitment therapies (MAC; Gardner & Moore, 2004a).

73

74 This application of CB approaches is extremely dependent on the practitioner's ability to "*engage*  
75 *the client in any sort of dialogue about their problem and therefore the potential for a CB*  
76 *intervention*" (Leahy, 2006, p. 137). And yet, published sport psychology interventions appear to  
77 place more emphasis on content than on the processes of relationship-building and their delivery  
78 (Longstaff & Gervis, 2016), and there is a need to better understand the mechanisms of action or  
79 mechanisms of change (Gardner & Moore, 2012; Mack, Breckon, Butt & Maynard, 2017;  
80 Poczwardowski, Sherman & Henschen, 1998). It is clear that sport psychologists have the knowledge  
81 and ability, but it is often less clear how these are delivered in conversations with athletes. For

82 example, the specific communication strategies used (and not used), specific models and tools  
83 implemented, conscious processes in cultivating a therapeutic alliance, recognition of athlete  
84 readiness for an intervention, structures which guide practitioner decision-making during sessions,  
85 and processes for integrating two or more complimentary therapeutic methods are rarely described  
86 in detail. This makes it difficult not only to replicate reported interventions, but also difficult to  
87 identify the mechanisms which contribute to a successful intervention.

88

89 Given the growing number of therapeutic approaches and interventions being applied in sport  
90 psychology, there is an increasing need to precisely define intervention content and delivery,  
91 specifically in regards to the individual and professional philosophies of the practitioner  
92 (Poczwadowski, Sherman, & Ravizza, 2004) and the needs of the athlete (Gardner & Moore, 2004b).  
93 While this broadening of the discipline is encouraging - given that there is a tendency for neophyte  
94 practitioners to adopt the dominant approach in their field (Fishman, 1999) - to avoid uniformly  
95 applying PST based on the cognitive behavioral model, there is a need for practitioners to investigate  
96 other approaches, in case a situation arises where this is not appropriate (Corlett, 1996; Murphy,  
97 1995).

98

99 The CB approach is arguably dominant in mental health, as the premier choice for treatment of a  
100 large number of different forms of distress (Cromarty, 2016; Holmes, 2002; Moloney & Kelly, 2004).  
101 Nevertheless, it is not without its critics, and these limitations are relevant for sport psychology as  
102 the CB approach and its derivatives continue to be applied with athletes. Examples include a focus  
103 on fixing athlete 'problems' (e.g., Cunliffe & Hemmings, 2016), perhaps at the expense of identifying  
104 and reinforcing athlete strengths; the risk of appearing critical or disrespectful in dissecting and  
105 assessing irrational, distorted or faulty thinking patterns (Ryle, 2012); a recognition that cognitive  
106 behavioral therapy (CBT) will be ineffective in one third of cases, and a readiness to attribute this to  
107 the client's lack of motivation or insight (Moloney & Kelly, 2004). Further, in CBT, if an intervention is

108 evaluated and deemed unsuccessful in terms of the intervention goals, the initial formulation is  
109 questioned (McArdle & Moore, 2012, p.307). An alternative may be to evaluate the strategies used  
110 to deliver the intervention, including the therapeutic alliance (Baldwin, Wampold, & Imel, 2007). For  
111 example, what if the formulation was accurate and the content of the intervention was pertinent,  
112 but the intervention was not delivered in an athlete-centred, empathetic, collaborative, autonomy-  
113 supportive manner? Or, what if the athlete simply didn't 'buy in' to the strategies being proposed by  
114 the practitioner, or was not ready for them, and so disengaged from the applied work? Finally,  
115 Brown (2011) indicates that athletes can struggle to initiate, practice and maintain CB restructuring  
116 or self-regulation strategies, while Massey, Gnacinski and Meyer (2015) identified the largest portion  
117 (37%) of sampled NCAA athletes as 'pre-contemplators' regarding engagement in a PST programme.  
118 Taken together, these assertions indicate that prematurely focussing on intervention content (at the  
119 expense of the therapeutic processes) could be detrimental to that intervention.

120

121 Research (e.g., Aviram & Westra, 2011; Driessen & Hollon, 2011; Naar & Safren, 2017; Westra &  
122 Arkowitz, 2011) has suggested that clinical interventions such as CBT can be enhanced by applying  
123 an underpinning/adjunct approach such as Motivational Interviewing (MI; Miller & Rollnick, 2013) in  
124 order to form an integrative MI-CBT (athlete-centred) therapy. While this integrative approach is  
125 becoming well understood and commonly applied in health settings, there is little, if any, awareness  
126 of its potential in sport psychology settings and this particular counseling approach has all the tenets  
127 to enhance current practice in sport psychology. Therefore the aim of this article is to provide a  
128 contemporary perspective of MI and describe its use in sport psychology as a blended framework  
129 upon which CB and other interventions might be delivered and their effectiveness enhanced. A case  
130 study approach is employed to provide a context and examples of the processes and technical and  
131 relational components of MI, to underpin both the therapeutic alliance and PST interventions,  
132 before making recommendations for its use in practice and research.

133 **Motivational Interviewing**

134 Motivational Interviewing is an evidence-based collaborative psychotherapy with roots in Rogerian  
135 person-centred counseling (Rogers, 1959). MI seeks to engender an autonomy-supportive  
136 relationship, and has been demonstrated to be effective in exploring and managing individual's  
137 ambivalence about changing behavior (Miller & Rollnick, 2013). The approach includes: the  
138 relational component (spirit of MI); technical or micro-skills (OARS); and four processes (Breckon,  
139 2015).The application of MI is now widespread across both behavior cessation (i.e., addictions) and  
140 behavior adoption (i.e., physical activity and diet change) contexts, and as an adjunct to other  
141 therapeutic interventions. Its popularity is evidenced by the volume of MI controlled trials having  
142 been published (over 700 to date) and reviews of studies (e.g., Hettema & Hendricks, 2010; Knight,  
143 McGowan, Dickens & Bundy, 2006; Lundahl et al., 2013), with reviews generally finding MI to have  
144 significant positive effects, particularly when combined with treatment as usual. For example,  
145 Marker and Norton (2018) examined 12 trials using an MI + CBT approach to treat anxiety disorders,  
146 and determined that MI as an adjunct to CBT was more effective in in reducing symptoms of anxiety  
147 than was CBT alone. Similarly, Soderlund (2017) reviewed nine studies to determine the  
148 effectiveness of using MI to self-manage physical activity levels in patients with diabetes mellitus  
149 type 2. While it was concluded that using MI did show promise for this when applied by proficient  
150 counselors, this review highlighted a key difficulty in reviewing the effectiveness of MI: it is often  
151 difficult to make comparisons between studies reporting the use of MI, because the competency of  
152 those administering the treatment is often not measured, and the quantity and standard of training  
153 they have received in the approach is often not reported. This makes it difficult to say with certainty  
154 that the MI approach is being applied competently and faithfully.

155

### 156 **The Spirit of MI**

157 The spirit (or relational component) of MI is its guiding principle and has been described as *a way of*  
158 *being* and thinking that is most common in MI practitioners (Westra, 2012). It is perhaps best  
159 illustrated as four components: Partnership; Acceptance; Compassion; and Evocation (Miller &

160 Rollnick, 2013). These components contain within them many of the humanistic principles of Carl  
161 Rogers, including collaboration between practitioner and client; practitioner attempts to  
162 demonstrate accurate empathy; practitioner attempts to be non-judgemental in hearing the client's  
163 story; and practitioner makes effort to be supportive of client autonomy and self-direction.

164

#### 165 **Technical (micro skills) components of MI: OARS**

166 The technical skills, or OARS: Open questions that encourage elaboration and exploration;  
167 Affirmations offered from the practitioner that reflect the athlete's autonomy, attitudes and  
168 behaviors toward change (as opposed to praise which is laden with practitioner judgements of  
169 performance); Reflections that demonstrate that the listener (in this case the sport psychologist) has  
170 accurately heard the athlete's perspective and attempts to clarify deeper understanding of meaning;  
171 Summaries that extend the reflections to provide a composite and consolidation of key points  
172 presenting them back with varying levels of reflection. These technical skills are extremely helpful in  
173 building rapport, gaining a deeper understanding of athlete issues, facilitating discussions, avoiding  
174 discord in the relationship, reframing topics to more useful considerations of change and eliciting  
175 and strengthening athlete commitment toward change behaviors (Wagner & Ingersoll, 2013). For  
176 more detail on both the spirit and micro skills (technical components) of MI see Miller & Rollnick  
177 (2013), Breckon (2015) and Rosengren (2009).

178

#### 179 **The four ('+') processes of MI**

180 The four processes of MI are: Engaging; Focussing, Evoking; and Planning (Figure 1). This is not a  
181 linear process (engagement is clearly a fundamental facet of the interaction) but rather the four  
182 processes are a Meta framework which underpin the MI therapeutic approach (Miller & Rollnick,  
183 2013).

184 **\*\*\*\*INSERT FIGURE 1 HERE\*\*\*\***

185



186 **Figure 1** – The four ('+') processes of MI (Adapted from: Breckon, 2015).

187

### 188 **The language of change**

189 MI has traditionally been employed when working with clients who are experiencing ambivalence or  
190 resistance towards behavioral change, and are perhaps disengaging from treatment services. By  
191 being particularly sensitive to the language clients use regarding change, MI practitioners work to  
192 elicit self-expressed arguments in favour of change from the client themselves (referred to as change  
193 talk; Miller & Rollnick, 2013). This guiding style and evocative strategy is generally preferred to other  
194 more directive, practitioner-led strategies, such as educating, advising or convincing, which can have  
195 the opposite of the desired effect, where client resistance is increased and the client finds themselves  
196 in the position of arguing for the status quo (referred to as sustain talk; Miller & Rollnick, 2013;  
197 Rollnick et al., 2005). Research is beginning to better understand how MI practitioners initiate  
198 change through their use of language (e.g., Apodaca et al., 2016), and this may be beneficial for  
199 sport psychologists to consider when working with athletes, particularly those who appear to be  
200 reluctant, resistant, disengaging or unmotivated.

### 201 **Using Motivational Interviewing to build the athlete-psychologist relationship**

202 The salience of the athlete-psychologist relationship in sport has been repeatedly emphasised  
203 (Andersen & Speed, 2010; Petitpas, Giges, & Danish, 1999; Sharp, Hodge, & Danish, 2015),  
204 particularly regarding counseling skills and the 'working alliance', yet trainee sport psychologists are  
205 often less clear on *how* to develop these engagement skills (Katz & Hemmings, 2009). While  
206 measuring the influence of the professional relationship on outcomes, 'therapeutic alliance' has  
207 emerged as a consistent predictor of outcomes and is an essential component of any talking therapy  
208 (Baldwin, Wampold, & Imel, 2007; Flückiger, Del Re, Wampold, Symonds, & Horvath, 2012; Norcross,  
209 2002). A collaborative and empathic consultation style is critical for building rapport (Leach, 2005),  
210 and managing ruptures in the alliance (Moyers, Miller, & Hendrickson, 2005). MI is one approach  
211 which seeks to maximise this working alliance, in order to 'gain access', through its underpinning

212 philosophy and inherent four processes, mobilised through overt verbal communication skills which  
213 may be missing from early sport psychology training. Motivational Interviewing can be viewed as an  
214 effective method for communicating with athletes, a framework for delivering PST and other  
215 interventions, and for offering support for non-performance related issues, due to its evocative and  
216 collaborative nature. An athlete's ability to use psychological skills is determined by their level of  
217 self-awareness, which in turn enables self-regulation (Behncke, 2004). The exploratory, client-  
218 centred nature of MI aims to increase self-awareness, potentially leading to increased effectiveness  
219 of PST and self-regulation. In addition to providing a framework or roadmap for relationship building,  
220 MI may also contribute to an underpinning theoretical framework in the intervention process, which  
221 is important in providing a cohesive structure against which progress toward change can be  
222 measured (Markland et al., 2005) as well as ensuring validity, reliability and evidence-based practice.  
223 Athlete concerns about performance should not be viewed narrowly in the context initially  
224 presented by the athlete, but rather take a holistic perspective on a broader scale incorporating the  
225 athlete's entire life (Gardner & Moore, 2006). This may include "... transitional, developmental,  
226 interpersonal, intrapersonal and more serious psychological issues..." (Gardner & Moore, 2006, p.11).  
227 This is in keeping with the need for a holistic approach for enhancing athletic performance (Simons  
228 & Andersen, 1995), an approach inherent in the 'relational ethos' of counseling psychology (Owen,  
229 2010). Motivational Interviewing, with its exploratory tools and collaborative empathic nature, is  
230 one approach which may be effective for investigating the fundamental causes of underperformance,  
231 while also developing the personal and psychological wellbeing of the athlete.

232

### 233 **The role of MI in sport psychology from an integrative perspective: The Trellis analogy**

234 A useful analogy of MI in sport psychology settings is to consider a garden trellis. Here, MI provides a  
235 framework or trellis (Figure 2) upon which other interventions and techniques can be grown and can  
236 thrive. Each intervention (plant) can be clearly identified as a unique contributor to the overall 'crop'  
237 which can be measured in terms of athlete performances, outcomes, and wellbeing. Obviously the

238 types of 'plants' or interventions that can be grown on the trellis (e.g., integrating MI with traditional  
239 CB and PST) can vary depending on the athlete, the situation or the context and agreed in  
240 collaboration between all stakeholders (ideally the athlete and sport psychologist).

241

242 **\*\*\*\*INSERT FIGURE 2 HERE\*\*\*\***

243

244 Figure 2 – Motivational Interviewing as a framework for delivering sport psychology interventions.

245

246 The role of a sport psychologist is a multifaceted one, for “our athletes have many needs, are of  
247 many personalities, and are embedded in organisations and settings of varying complexities”

248 (Gardner & Moore, 2006, p. ix). A sport psychologist may also be required to work with other

249 stakeholders, such as coaches and parents, each with their own values and priorities. There may be

250 an element of discord between parties, and MI could prove a valuable approach for mediation,

251 through reflective listening, values exploration, building discrepancy and triangulation of

252 perspectives. Athletes may harbour ambivalence towards engaging with sport psychology support,

253 which the practitioner would need to recognise and address if any practical work is to be successful.

254 MI is one potential strategy for doing this (although is not limited to those athletes presenting as

255 ambivalent or resistant to change). Often a sport psychologist forms part of a multi-discipline

256 scientific support team, where other practitioners may be utilising the principles of sport psychology

257 or MI to increase adherence to target behaviors, for example, injury rehabilitation (Arvinen-Barrow

258 & Walker, 2013), strength and conditioning (Radcliffe, Comfort, & Fawcett, 2013), nutrition

259 (Campbell et al., 2009), lifestyle behaviors (e.g., balancing training, competition, social and personal

260 demands) (Jones, Hanton, & Connaughton, 2002), and anti-doping (Morse, 2013).

261

262

### **Case Study**

263 Case study methodology can provide a valuable platform for practitioners to help bridge the gap  
264 between theory and practice (Kuntz & Hessler, 1998; McArdle & Moore, 2012). Case studies have  
265 previously been used to demonstrate the effectiveness of using MI with a single patient to increase  
266 healthy behaviors during cardiac episode rehabilitation (Pietrabissa et al., 2015); to show increased  
267 adherence to medication for a patient with schizophrenia (Ertem & Duman, 2016); and to illustrate  
268 how MI can be integrated into career counseling interventions (Rochat & Rossier, 2016). The case  
269 study method is also now commonplace in sport psychology research (e.g., Thompson & Andersen,  
270 2012; Wood, Barker & Turner, 2017). The following case example (a single session) is therefore  
271 employed to provide an example of the use of MI with an ambivalent athlete and will explicitly  
272 highlight the application of MI with regards to: the four processes; the spirit and relational  
273 components; the technical components (OARS); and, common tools (e.g., scaling rulers). We  
274 acknowledge the limitations of presenting a single session, but this example illustrates the potential  
275 for using MI to build an alliance with an athlete prior to developing intervention strategies. It will  
276 showcase the theoretical underpinning, and applied techniques of MI described earlier, and are  
277 based on a real client of the third author. The practitioner was registered in Australia at the time of  
278 the case and operated according to the Australian Psychological Society (APS) code of practice. The  
279 individual engaged in supervision which ensured that any ethical issues arising in practice were  
280 addressed in an appropriate manner, and to maintain the athlete's anonymity details including name  
281 and age have been changed.

282

283 The Client: John (pseudonym), a 25-year old central defender who at the time of the sessions was  
284 playing for a football (soccer) club in a state league in Australia. He had played for the national under  
285 21 team and been touted as a future representative in the national senior team. As the team's  
286 consultant sport psychologist, John was sent to me by the manager on account of his lack of  
287 discipline and excessive (unhelpful) aggression on the pitch. John had developed a reputation for

288 giving away free kicks and receiving frequent yellow cards. He had been sent off twice in the  
289 previous season and had been suspended six times over the last 3 years.

290

291 **Engaging phase:**

292 The first thing that struck me about John was the level of discord between us. Speaking with John I  
293 got a very clear sense that he was reluctant to work with me (or any other sport psychologist for that  
294 matter) - he was there because he had been sent. This '*mandated attendance*' presented a  
295 substantial barrier to our working relationship and I therefore focussed in the opening exchanges on  
296 the core MI process of engagement (Breckon, 2015). It was essential to explore the discord that John  
297 was exhibiting through the combination of predominantly simple reflections (using John's own  
298 words) and open ended questions to increase engagement and demonstrate empathy and a non-  
299 judgemental approach (Rosengren, 2009). I explored his ambivalence and it emerged that he had  
300 been "sent" to the team's previous sport psychologist about this very issue last season and the  
301 psychologist suggested that John needed to calm down in order to approach the game in a more  
302 relaxed state. He then proceeded to try and engage John in some anger management training  
303 (cognitive-behavioral) and taught John a relaxation technique (PST) and asked him to keep a record  
304 of his thoughts associated with this anger (record keeping: CBT; Kennerley, Kirk & Westbrook, 2016).  
305 John responded very negatively to this previous strategy as he liked to play 'angry' and consequently  
306 did not return to see the psychologist about this or any other matter last season. Through a  
307 combination of simple and complex reflections (offering John a deeper level interpretation of his  
308 comments) and use of reflective summaries (several reflective statements combined to capture the  
309 previous few dialogue exchanges) I conveyed to John that I understood that he feels that he  
310 performs best when he plays angry and it is important for him to be in this state (empathy as  
311 opposed to sympathy). I then concluded the opening phase with an amplified reflection (an  
312 overstatement to gently challenge John's absolute view and status quo) in which I stated "you play  
313 best when you're angry and what you're doing now is working for you". John responded that his lack

314 of discipline was typically in retaliation to disparaging personal comments from his opponents –  
315 directed to *fire him up*. He also acknowledged that he had developed a reputation for *losing it* and  
316 that he now realised that players had begun to target him because of this. This moving forward and  
317 building upon the practitioner's reflection is typical of an effective complex reflection in MI (Naar-  
318 King et al., 2013). Here, I used a double-sided reflection (offer two sides of an argument): “on the  
319 one hand you feel a need to retaliate to the comments of opponents and on the other hand you  
320 don’t like the reputation you are developing because of this”. John again expanded on both the  
321 content and emotion behind his perspective and elaborated on how he wanted to distance himself  
322 from this reputation. This was accompanied by a considerable change in his body language, where  
323 he appeared less tense. It was clear that this empathic approach had begun to reduce the level of  
324 discord between us with John relaxing more, smiling and beginning to ask questions. Now that there  
325 were very clear signs of engagement and the absence of discord, it was considered appropriate to  
326 begin the process of focusing.

327

328 **Focusing phase:**

329 Having begun to develop a shared understanding in the opening (engagement) phase, focusing  
330 began with an exploration of what (if anything) he would like to change. Through the appropriate  
331 use of reflection, affirmations (reflective statements which acknowledge strengths, values or self-  
332 efficacy) and open ended questions I was able to ascertain that John would like to play angry but in a  
333 way that advantaged the team; a way that was within the rules. A form of ambivalence was clearly  
334 evident in regard to how he would like to play, but unsure of how he might do this without  
335 impacting negatively on the team. Ambivalence is normative in the early phases (Engle & Arkowitz,  
336 2006). John wanted to change his reputation of being a player that would *lose it* quickly and that  
337 other teams would target. Instead he wanted to: run hard, pressure and harass opponents, tackle  
338 hard but within the rules and not react to the negative comments of opponents. In response to this I  
339 used a combination of complex reflections and affirmations. For example, I noted that “You are very

340 much a team player that likes to play tough but in a way that benefits the rest of the team and you  
341 are the kind of person who wants to set a good example for your younger teammates.” John reacted  
342 in a positive way in terms of both his body language (he sat up straighter and began to smile more)  
343 and produced some more discussion around what he wanted to achieve specifically for both himself  
344 and the team. It was clear that engagement was still underpinning our relationship and that change  
345 talk (CT; Amrhein et al., 2003) was beginning to emerge. Given that we now had an agreed focus for  
346 what John would like to modify, our next goal was to actively promote dialogue from John that was  
347 consistent with this change plan. Change talk is important because it positively correlates with  
348 change outcomes (Amrhein et al., 2003; Magill et al., 2014) and this phase enabled me to move  
349 toward evoking from John his own thoughts and beliefs about why this change would be useful, how  
350 confident he is about achieving this and how he might go about it.

351

352 **Evoking phase:**

353 Given that the production of CT is a primary goal of MI, I decided to focus on a combination of  
354 simple and complex reflections and open ended questions that are specifically designed to promote  
355 this self-generated language in clients (Rosengren, 2009). These open ended questions can be  
356 represented by the DARN-CAT acronym - that is, questions that evoke CT related to people's desire,  
357 abilities, reasons, need, commitment, activation and taking steps toward change (Amrhein et al.,  
358 2003). Using a directional open question to evoke further CT, based on his desire to change, I asked  
359 John how things would be different if he was implementing the change strategies (i.e., PST). John  
360 responded that he would enjoy his football more, would gain greater respect amongst his  
361 teammates, and would improve his chances of selection in the national team. I followed up with an  
362 'ability' question to elicit some further change talk; specifically I asked “How might you achieve  
363 this?”. John stated that he would like to play the game like some of the players he admired most in  
364 the league – hard yet legal and relatively unaffected by what others say. I asked him if he could  
365 visualise (integrating PST techniques) what this might look like and he responded positively, noting

366 that he had a particular player in mind. After asking how John might use this image to his advantage  
367 (using the client as the resource), he came up with the idea of using imagery before games to  
368 visualise how he would like to play. Whilst he seemed quite engaged with this idea I got a sense from  
369 his body language he may not have been particularly confident about following through with this. I  
370 therefore decided to follow up with a further ability-based question in which I asked John about how  
371 confident he was about being able to engage in this visualisation before games. A very useful  
372 strategy for evoking change talk related to areas such as confidence and importance is the use of  
373 rulers (i.e., 0-10 rating scales). Specifically, I asked John to rate his level of confidence using a scale  
374 where 0 = not at all confident to 10 = extreme confidence. John's initial response was 5 out of 10. I  
375 asked what made it a 5 and with the evocation of more preparatory CT (Amrhein et al., 2003) and  
376 use of reflection when John told me about the fact that he is the type of person who will tend to  
377 follow through with things once he sets his mind to it, he was able to shift quite quickly to an 8/10 in  
378 terms of confidence. John was now displaying most of the core signs that he was ready to commit to  
379 change (Miller & Rollnick, 2013). He was producing substantially increased CT, there was little (if any)  
380 resistance to change (or sustain talk; Miller & Rollnick, 2013), and he was starting to talk about how  
381 much more he would enjoy his football once these things had changed. I therefore decided that it  
382 was appropriate to move to planning.

383

#### 384 **Action planning phase:**

385 Given John was clearly committed we began planning by discussing when he would begin, and how  
386 he would do it. John was quite clear that he was committed to spending at least 15 minutes every  
387 night before a game visualising opponents trying to agitate him and then seeing himself respond in  
388 the way he would like to play. I then spent some time checking with John about how he might use  
389 visualisation (collaboration) and how it has worked for him in the past, and we then discussed  
390 strategies that can be followed to facilitate the effectiveness of this technique. This was a clear  
391 example of the integration of PST within an MI framework. Consistent with MI, I thought it



392 important to incorporate some *troubleshooting* in order to prepare for times when things become  
393 challenging for John, therefore facilitating maintenance. Here John discussed occasions when he  
394 might struggle with this, such as when extremely tired, and certain opponents that agitated him the  
395 most. We really focused on imagining these scenarios and how he would respond to these situations  
396 with his new philosophy of how he would like to play the game. John also came up with the idea of  
397 visualising momentary lapses in which he lost control and then regained it. This evocation from the  
398 athlete maintained a sense of engagement and trust between both parties and valued their  
399 resourcefulness and autonomy toward change (Resnicow & McMaster, 2012) in an efficient and  
400 non-judgemental manner.

401

#### 402 **Outcomes**

403 *Immediate:* John reported very positive results in terms of his ability to play how he would like for  
404 the next two games. In order to try and build in some maintenance, we scheduled in a further two  
405 fortnightly sessions and then a monthly booster session in which we reviewed his successes and any  
406 challenges he faced.

407 *Longer term:* John gave away substantially fewer free kicks, the number of yellow cards he received  
408 was reduced by 85% and he went 4 seasons without being suspended. His form substantially  
409 improved and he enjoyed his football more. While the application of MI alone cannot be claimed to  
410 achieve these outcomes, it was clear to me that the increased engagement and collaborative  
411 working that MI provided created the opportunity for the interventions to be delivered and  
412 accepted by the athlete - something that had not been achieved with previous approaches.

413

#### 414 **Discussion**

415 It has previously been stated that the athlete-psychologist relationship is akin to the client-counselor  
416 relationship (Petitpas, Giges, & Danish, 1999). While factors which should be present during the  
417 design, implementation and evaluation of psychological services with athletes have been identified

418 (Poczwadowski, Sherman, & Henschen, 1998), there are still limited descriptions of the therapeutic  
419 content, structure and style of consultations and interventions in sport psychology. One  
420 consequence of this has been a dearth of research into the minutia of sport psychology  
421 interventions beyond describing headline content such as the type of PST delivered (e.g., mental  
422 rehearsal and goal setting). Moreover, a lack of understanding of the mechanisms which influence  
423 the therapeutic alliance and relationship between the athlete and psychologist, including aspects  
424 such as building empathy and utilising athletes as an autonomous resource, often means we do not  
425 fully understand the influential mediators of success in these sessions. Sport psychology support is  
426 concomitant with the therapeutic relationship within which it was delivered. It is through this  
427 relationship that the practitioner facilitates change in the athlete, and the success of an intervention  
428 should not be assessed independently of the relationship that fostered it (Poczwadowski, Sherman  
429 & Henschen, 1998). As the case study clearly illustrated, there is real potential for future  
430 collaboration once engagement has been achieved and resistance or ambivalence from the athlete  
431 has been managed. The case example also demonstrated the value of applying technical (and  
432 therefore measurable) skills such as the use of appropriate reflections and an emphasis on evoking  
433 change talk from clients, in order to have the athlete take greater responsibility for change in an  
434 empathetic relationship.

435

436 With MI the inclination to confront, convince or persuade athletes is replaced by evoking their own  
437 reasons for change and adapting behaviors, which minimises athlete resistance (Lundahl et al., 2013).  
438 MI even explores the subtleties of language about change (Amrhein et al., 2003) providing clear  
439 frameworks for appropriate responses (Miller & Rollnick, 2013). Since MI is a clearly-defined  
440 approach with clear and measurable technical and relational components, it appears well placed to  
441 provide a basis for sport psychology interventions and a framework (or trellis) upon which  
442 intervention components can be mapped and delivered in a holistic way that respects the athlete's  
443 own motives and needs. This is illustrated by the sport psychologist in the case study who, following

444 a process of engagement, worked in partnership with the athlete to develop an intervention  
445 (visualisation) that he could use to play football the way he wanted to.

446

447 A further benefit of applying MI is the clear structure (engagement, focusing, evoking, planning) and  
448 direction that the approach offers - which can be readily tailored to the athlete's needs - with  
449 adaptable and bespoke responses avoiding 'off the shelf' inflexible interventions (Rosengren, 2009)  
450 or a 'cookbook' (Poczwardowski, Sherman & Henschen, 1998) approach which often fails to  
451 acknowledge the wide variety of factors which can influence an athlete's performance. These  
452 flexible, non-linear four processes can guide the practitioner in supporting athletes on a session-by-  
453 session basis (as in this case study), or globally for the duration of a professional relationship, by  
454 providing a conscious awareness of where the athlete is in the change process, and facilitating the  
455 practitioner in moving fluidly with the athlete throughout.

456

457 After investigating the use of MI by expert practitioners in applied sport contexts, it may be possible  
458 to make recommendations for the use of MI in sport, and to develop coherent and evidence-based  
459 training curricula for neophyte practitioners.

460

#### 461 **Implications for applied practice**

462 The case study has shown MI to be a valuable approach for practitioners to consider adopting when  
463 working with an athlete who has been forced to attend, and/or presents initially as sceptical or  
464 resistant to engaging, in order to begin building a professional relationship and get the athlete to the  
465 point of being ready for some sport psychology work. Further, it is a valuable approach to slip into as  
466 and when ambivalence or resistance arises over the course of the professional relationship, perhaps  
467 during the intervention phase of the relationship which athletes may find particularly challenging.

468

469 It has been shown here that MI can be successfully integrated with at least one dominant  
470 intervention in sport psychology (PST), which raises considerations regarding which other  
471 interventions MI might integrate with and enhance, and how practitioners are integrating different  
472 approaches in their work (Norcross, Karpiak & Lister, 2005), which could potentially lead to a more  
473 holistic and athlete-centred delivery of service. It has been identified that some elements of MI are  
474 being used already by sport psychologists in their applied work, both explicitly and implicitly, but it  
475 appears that elements of MI are being 'cherry picked' rather than embraced holistically (Mack et al.,  
476 2017), which is in keeping with previous research (e.g., scaling rulers; Hays, Thomas, Butt & Maynard,  
477 2010). As illustrated in this case study, there are benefits to a more comprehensive application of an  
478 MI framework as part of athlete conversations.

479

480 MI has the potential to greatly enhance the ongoing reflective processes and professional  
481 development of sport psychology practitioners through the use of a range of validated competency  
482 and fidelity coding instruments. The clear identification of components of MI enables practitioners  
483 to be assessed in their use of the approach in conversations with athletes. These tools include the  
484 Motivational Interviewing Skills Checklist (MISC; Miller et al., 2008) which assesses both the  
485 technical and relational components of MI, including both practitioner behavior counts and client  
486 responses. Such assessment should enable practitioners to be considerate of how they are  
487 responding to ambivalence and resistance, how they use technical skills to form effective working  
488 alliances, and whether or not they are able to initiate change in their clients, among other things.  
489 Importantly, practitioners can also begin to understand athlete perceptions of practitioner behaviors  
490 during consultations, how their MI work is being received and their professional relationships in  
491 general using the Client Evaluation of Motivational Interviewing scale (CEMI; Madson et al., 2013).

492

493 MI looks easy, but is difficult to do well – it is important that the integrity of MI delivery is assessed  
494 in order to determine that it is actually MI that is being implemented with athletes. Fidelity checks

495 (Bellg et al., 2004; Breckon, Johnston & Hutchison, 2008) of MI in sport settings could be applied to  
496 ensure reliability and integrity. This also avoids reliance on athlete performance and competition  
497 outcomes as the sole measure of successful sport psychology interventions. Clearly reporting the  
498 content, frequency and delivery of MI and integrative therapy components, including an evaluation  
499 of the therapeutic alliance (Fluckiger et al., 2012) is becoming widespread in many randomised  
500 controlled trials and clinical intervention settings, and applied sport psychology could potentially  
501 learn and benefit from such practices.

502

### 503 **Implications for future research and training**

504 In considering these implications for applied practice, there are also implications for future research.  
505 These centre on the need to further explore how practitioners with extensive training and  
506 knowledge in the MI approach are applying it in their daily work in sport settings, to determine best  
507 practice guidelines for practitioners wishing to add this approach to their repertoire. Given that  
508 several approaches from within the broader discipline of psychology (e.g., REBT, CBT, MAC, solution-  
509 focused) are becoming popular for working with athletes, future research should seek to identify  
510 and delineate the processes and efficacy of integrating MI with these different interventions. This  
511 may be achieved through production of case studies which provide in-depth explanations of an  
512 integrated model. For example, a case study outlining the use of CBT underpinned by MI (and vice  
513 versa - MI applying CB intervention components) to support an athlete who is experiencing a drop in  
514 performance due to irrational or intrusive thoughts. Such a case study could outline the processes of  
515 integrating CBT with MI, the impact of this on the therapeutic alliance, and impact on the athlete's  
516 wellbeing and sport performance. While it is believed that MI can underpin delivery of many  
517 interventions because of the technical and relational aspects, it may be more compatible with some  
518 interventions than others. For example, greater emphasis may be placed on challenging illogical and  
519 irrational thinking than on collaborating and building an alliance with an athlete when using a  
520 traditional REBT approach, when compared with more traditional CBT (Brown, 2011).

521

522 Research of this nature will require not only in-depth interviews or focus groups, but also analysis  
523 using previously mentioned coding instruments and client evaluations of their work, to understand  
524 the mechanisms of action by which they are being effective, and even identify strategies proving  
525 ineffective. This knowledge would be invaluable for the training of current and neophyte  
526 practitioners, given that *“There is now a greater emphasis on counseling and clinical training in sport*  
527 *psychology”* (Weinberg & Gould, 2012, p.18). These findings would also add to the wealth of  
528 material already used to train practitioners in the MI approach, and could be considered for  
529 inclusion in university degree curricula, to give students a foundation in relational and technical skills  
530 prior to introducing intervention skills and strategies.

531

532 From a curricula and training perspective the training of MI is a mature approach with over 1300  
533 trainers worldwide ([www.motivationalinterviewing.net](http://www.motivationalinterviewing.net)) and the content of existing training would  
534 offer a valuable foundation for trainee sport psychologists in an aspect of their work that currently  
535 receives scant attention. While MI training is being delivered extensively to groups such as  
536 physiotherapists, physicians, physical activity professionals and dieticians, there is a lack of training  
537 for neophyte and practising sport psychologists. It is important that research also begins exploring  
538 sport-specific uses or adaptations to the MI model and develops sport-specific training materials, to  
539 fill this previously-identified gap (Mack et al., 2017).

540

541 Regardless of these specific suggestions and recommendations, moving forward it is essential that  
542 applied practice, research and practitioner training in this area continue to inform each other in  
543 order to narrow the gap between the science and the service.

544

### **Conclusion**

545 While it has been suggested that sport psychologists must be competent in both PST and  
546 therapeutic counseling (Herzog & Hays, 2012) this suggests they are exclusive of one another,

547 whereas the delivery of PST within a counseling framework appears to be a more efficient and  
548 effective approach. MI has been shown to increase treatment engagement and improve treatment  
549 outcomes (Britton, Patrick, Wenzel, & Williams, 2011), particularly when combined with other  
550 treatments such as CBT (Flynn, 2011; Geller & Dunn, 2011; Leahy, 2006; Westra & Arkowitz, 2011).  
551 As the case study illustrated, it is delivering PST within an evidence-based framework which has the  
552 potential to enhance the efficacy of treatments, through working in partnership with athletes,  
553 respecting their autonomy and evoking ideas about techniques from the athlete. MI is not being  
554 proposed as a panacea here but rather we are proposing this evidence-based approach, used  
555 extensively in other psychological domains, can complement and enhance current sport psychology  
556 interventions through enhanced therapeutic engagement.  
557

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