Enhancing athlete engagement in sport psychology interventions using motivational interviewing: a case study

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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*

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Background and Context: Sport psychology interventions and orientations

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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   Strean, 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   (Poczwardowski, 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 Arkowtiz, 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**

5

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 themself

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 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 <div align="center">**Discussion**</div>

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   (Poczwardowski, 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 (Poczwardowski, 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 measureable 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) 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

558   **References**

559   Amrhein, P.C., Miller, W.R., Yahne, C.E., Palmer, M., & Fulcher, L. (2003). Client commitment
560   language during motivational interviewing predicts drug use outcomes. *Journal of Consulting and*
561   *Clinical Psychology,* 71, 862-878. DOI:10.1037/0022-006X.71.5.862.

562   Andersen, M. B., & Speed, H. D. (2010). Therapeutic relationships in applied sport psychology. In S. J.
563   Hanrahan & M. B. Andersen (Eds.), *Routledge Handbook of Applied Sport Psychology* (pp. 3–11).
564   London: Routledge. http://doi.org/10.4324/9780203851043.ch1

565   Apodaca, T. R., Jackson, K. M., Borsari, B., Magill, M., Longabaugh, R., Mastroleo, N. R., & Barnett, N.
566   P. (2016). Which Individual Therapist Behaviors Elicit Client Change Talk and Sustain Talk in
567   Motivational Interviewing? *Journal of Substance Abuse Treatment*, *61*, 60–65.
568   http://doi.org/10.1016/j.jsat.2015.09.001

569   Arvinen-Barrow, M., & Walker, N. (2013). *The psychology of sport injury and rehabilitation*. New York,
570   NY: Routledge.

571   Aviram, A. & Westra, H.A. (2011). The impact of motivational interviewing on resistance in cognitive
572   behavioral therapy for generalized anxiety disorder. *Psychotherapy Research*, 21(6), 698-708.
573   DOI:10.1080/10503307.2011.610832.

574   Baldwin, S.A., Wampold, B.E., & Imel, Z.E. (2007). Untangling the alliance-outcome correlation:
575   exploring the relative importance of therapist and patient variability in the alliance. *Journal of*
576   *Consulting and Clinical Psychology*, 75(6), 842–852. DOI:10.1037/0022-006X.75.6.842.

577   Behncke, L. (2004). Mental Skills Training For Sports : A Brief Review. *The Online Journal of Sport*
578   *Psychology*, 6(1), 1–19. ISSN 1536-0431.

579   Bellg, A.J., Borrelli, B., Resnick, B.,et al. (2004). Enhancing treatment fidelity in health behavior
580   change studies: best practices and recommendations from the NIH behavior change consortium.
581   *Health Psychology,* 23, 443–451. DOI:10.1037/0278-6133.23.5.443.

582   Breckon, J.D. (2015). Motivational Interviewing to promote physical activity and nutrition behavior
583   change. In*, Doing Exercise Psychology* (M. Anderson & S. Hanrahan, Eds.). Human Kinetics,
584   Champaign, Ill. ISBN: 9781450431842.#
585
586   Breckon, J.D., Johnston, L.H. & Hutchison, A. (2008). Physical activity counseling content and
587   competency: a systematic review. *Journal of Physical Activity and Health,* 5(3), 398-417. PMID:
588   18579918.

589   Britton, P.C., Patrick, H., Wenzel, A., & Williams, G.C. (2011). Integrating Motivational Interviewing
590   and Self-Determination Theory With Cognitive Behavioral Therapy to Prevent Suicide. *Cognitive and*
591   *Behavioral Practice*, 18, 16–27.
592
593   Brown, J.L. (2011). Cognitive-behavioral strategies. In J. K. Luiselli & D. D. Reed (Eds.), *Behavioral*
594   *sport psychology: Evidence-based approaches to performance enhancement* (pp. 113–126). New
595   York, NY: Springer.
596

597 Campbell, M.K., Carr, C., Devellis, B., Switzer, B., Biddle, A., Amamoo, M.A., … Sandler, R. (2009). A
598 randomized trial of tailoring and motivational interviewing to promote fruit and vegetable
599 consumption for cancer prevention and control. *Annals of Behavioral Medicine: A Publication of the*
600 *Society of Behavioral Medicine*, 38(2), 71–85. DOI: 10.1007/s12160-009-9140-5.

601 Corlett, J. (1996). Professional Practice Sophistry , Socrates , and Sport Psychology. *The Sport*
602 *Psychologist*, *10*, 84–94.

603 Cunliffe, M., & Hemmings, B. (2016). Case Study 4: A case study of cognitive behavior therapy in
604 tennis. *Sport and Exercise Psychology Review*, *12*(2), 51–63.

605 Cromarty, P. (2016). Improving access to psychological therapies (IAPT) in Australia: Evidence-based
606 cognitive-behavior therapy interventions for anxiety, depression and gambling addiction. In R. G.
607 Menzies, M. Kyrios, & N. Kazantzis (Eds.), *Innovations and Future Directions in the Behavioral and*
608 *Cognitive Therapies* (pp. 272–276). Samford Valley, QLD: Australian Academic Press.

609 Driessen, E. & Hollon, S.D. (2011). Motivational Interviewing from a cognitive behavioral perspective.
610 *Cognitive and Behavioral Practice*, 18, 70-73. DOI: 10.1016/j.cbpra.2010.02.007.

611 Engle, E.D. & Arkowitz, H. (2006). *Ambivalence in Psychotherapy: Facilitating Readiness to Change.*
612 New York: Guilford Press.
613
614 Ertem, M., & Duman, Z. Ç. (2016). Motivational Interviewing in a Patient With Schizophrenia to
615 Achieve Treatment Collaboration: A Case Study. *Archives of Psychiatric Nursing*, *30*(2), 150–154.
616 http://doi.org/10.1016/j.apnu.2015.08.003

617 Flückiger, C., Del Re, A.C., Wampold, B.E., Symonds, D., & Horvath, A.O. (2012). How central is the
618 alliance in psychotherapy? A multilevel longitudinal meta-analysis. *Journal of Counseling Psychology*,
619 59(1), 10. DOI:10.1037/a0025749.

620 Fishman, D. B. (1999). *The case for pragmatic psychology*. London: New York University Press.

621 Flynn, H.A. (2011). Setting the Stage for the Integration of Motivational Interviewing With Cognitive
622 Behavioral Therapy in the Treatment of Depression. *Cognitive and Behavioral Practice*, 18, 46–54.
623 DOI: org/10.1016/j.cbpra.2009.09.006.
624
625 Gardner, F.L. & Moore, Z.E. (2012). Mindfulness and acceptance models in sport psychology: A
626 decade of basic and applied scientific advancements. *Canadian Psychology/Psychologie Canadienne,*
627 Vol 53(4), 309-318. DOI: org/10.1037/a0030220.
628
629 Gardner, F.L., & Moore, Z.E. (2006). *Clinical Sport Psychology*. Champaign, IL: Human Kinetics.
630
631 Gardner, F.L., & Moore, Z.E. (2004a). A mindfulness-acceptance-commitment-based approach to
632 athletic performance enhancement: Theoretical considerations. *Behavior Therapy*, 35(4), 707–723.
633 DOI: 10.1123/jcsp.3.4.320.
634
635 Gardner, F. L., & Moore, Z. E. (2004b). The Multi-Level Classification System for Sport Psychology
636 (MCS-SP). *The Sport Psychologist*, 18, 89–109. DOI:org/10.1123/tsp.18.1.89.
637
638 Geller, J., & Dunn, E. C. (2011). Integrating Motivational Interviewing and Cognitive Behavioral
639 Therapy in the Treatment of Eating Disorders: Tailoring Interventions to Patient Readiness for
640 Change. *Cognitive and Behavioral Practice*, 18, 5–15. DOI: 10.1016/j.cbpra.2009.05.005.

641

642 Hays, K., Thomas, O., Butt, J., & Maynard, I.W. (2010). The development of confidence profiling for
643 sport. *The Sport Psychologist*, 18, 373–392.

644

645 Herzog, T., & Hays, K. F. (2012). Therapist or Mental Skills Coach ? How to Decide. *The Sport*
646 *Psychologist*, 26, 486–499. DOI: org/10.1123/tsp.26.4.486.

647

648 Hettema, J.E. & Hendricks, P.S. (2010). Motivational Interviewing for Smoking Cessation: A Meta-
649 Analytic Review. *Journal of Consulting and Clinical Psychology.* 78(6), 868–884. DOI:
650 10.1037/a0021498.

651 Høigaard, R., & Johansen, B.T. (2004). The Solution-Focused Approach in Sport Psychology. *The Sport*
652 *Psychologist*, 18, 218–228. DOI: org/10.1123/tsp.18.2.218.

653 Holmes, J. (2002). All you need is cognitive behavior therapy? *British Medical Journal*, *324*(7332),
654 288–294.

655 Holt, N.L., & Strean, W.B. (2001). Reflecting on initiating sport psychology consultation: A self-
656 narrative of neophyte practice. *The Sport Psychologist,* 15*,* 188-204. DOI: org/10.1123/tsp.15.2.188.

657 Jones, G., Hanton, S., & Connaughton, D. (2002). What Is This Thing Called Mental Toughness? An
658 Investigation of Elite Sport Performers. *Journal of Applied Sport Psychology*, 14, 205–218. DOI:
659 org/10.1080/10413200290103509.

660

661 Katz, J., & Hemmings, B. (2009). *Counseling Skills Handbook for the Sport Psychologist*. The British
662 Psychological Society.

663 Kennerley,H., Kirk, J. & Westbrook, D. (2016). An introduction to cognitive behavior therapy: Skills
664 and applications (3rd Edition). Sage: Los Angeles.

665 Knight, K.M., McGowan, L., Dickens, C. & Bundy, C. (2006). A systematic review of motivational
666 interviewing in physical health care settings. *British Journal of Health Psychology,* 11, 319–332.
667 DOI:10.1348/135910705X52516.

668 Kuntz & Hessler, (1998). Bridging the Gap between Theory and Practice: Fostering Active Learning
669 through the Case Method. ERIC.

670 Leach, M.J. (2005). Rapport: a key to treatment success. *Complementary Therapies in Clinical*
671 *Practice*, 11(4), 262–5. DOI:10.1016/j.ctcp.2005.05.005.

672 Leahy, R.L. (2006). *Roadblocks in Cognitive-Behavioral Therapy: Transforming Challenges Into*
673 *Opportunities for Change.* Guilford: London.

674

675 Lindsay, P., Breckon, J.D., Thomas, O., & Maynard, I.W. (2007). In Pursuit of Congruence : A Personal
676 Reflection on Methods and Philosophy in Applied Practice. *The Sport Psychologist*, 21, 335–352. DOI:
677 org/10.1123/tsp.21.3.335.

678

679 Longstaff, F. & Gervis, M. (2016). The use of counseling principles and skills to develop practitioner-
680 athlete relationships by practitioners who provide sport psychology support. *The Sport Psychologist.*
681 30, 276-289. DOI: 10.1123/tsp.2015-0029.

683 Lundahl, B., Moleni, T., Burke, B.L., Butters, R., Tollefson, D., Butler, C., & Rollnick, S. (2013).
684 Motivational interviewing in medical care settings: a systematic review and meta-analysis of
685 randomized controlled trials. *Patient Education and Counseling,* 93(2), 157–168. DOI:
686 10.1016/j.pec.2013.07.012.

687 Mack, R., Breckon, J., Butt, J., & Maynard, I. (2017). Exploring the Understanding and Application of
688 Motivational Interviewing in Applied Sport Psychology. *The Sport Psychologist*, (31), 396–409.
689 http://doi.org/10.1123/tsp.2016-0125

690 Madson, M.B., Mohn, R.S., Zuckoff, A., Schumacher, J.A., Kogan, J., Hutchison, S., … Stein, B. (2013).
691 Measuring client perceptions of motivational interviewing : factor analysis of the Client Evaluation of
692 Motivational Interviewing scale. *Journal of Substance Abuse Treatment,* 44, 330–335. DOI:
693 10.1016/j.jsat.2012.08.015.

695 Magill, M., Gaume, J., Apodaca, T.R., Walthers, J., Mastroleo, N.R., Borsari, B. & Longabaugh, R.
696 (2014). The technical hypothesis of motivational interviewing: A meta-analysis of MI's key causal
697 model. *Journal of Consulting and Clinical Psychology*, 82(6), 973-983. DOI: 10.1037/a0036833.

698 Marker, I., & Norton, P. J. (2018). The efficacy of incorporating motivational interviewing to cognitive
699 behavior therapy for anxiety disorders: A review and meta-analysis. *Clinical Psychology Review*, *62*,
700 1–10. DOI: 10.1016/j.cpr.2018.04.004

701 Markland, D., Ryan, R.M., Tobin, V.J. & Rollnick, S.R. (2005). Motivational Interviewing and self-
702 determination theory. *Journal of Social and Clinical Psychology*, 24(6), 811-831. DOI:
703 org/10.1521/jscp.2005.24.6.811

704 Massey, W. V., Gnacinski, S. L., & Meyer, B. B. (2015). Psychological Skills Training in NCAA Division I
705 Athletics: Are Athletes Ready for Change? *Journal of Clinical Sport Psychology*, *9*(4), 317–334.
706 http://doi.org/10.1123/jcsp.2014-0042

707 McArdle, S., & Moore, P. (2012). Applying Evidence-Based Principles From CBT to Sport Psychology.
708 *The Sport Psychologist,* 26, 299–310. DOI: org/10.1123/tsp.26.2.299.

709 Miller, W.R., Moyers, T.B., Ernst, D. & Amrhein, P. (2008) Manual for the Motivational Skill Code
710 (MISC). Version 2.1. Available from http://casaa.unm.edu/download/misc.pdf

712 Miller, W.R., & Rollnick, S. (2013). *Motivational Interviewing: Preparing people for change (3rd*
713 *edition)*. London, England: Guilford Press.

715 Moloney, P., & Kelly, P. (2004). Beck never lived in Birmingham: Why CBT may be a less useful
716 treatment for psychological distress than is often supposed. *Clinical Psychology*, *34*, 4–9.

717 Morse, E.D. (2013). Substance Use in Athletes. In D. A. Baron, C. L. Reardon, & S. H. Baron (Eds.),
718 *Clinical Sports Psychiatry: An International Perspective* (pp. 3–12). Wiley-Blackwell.

720 Moyers, T.B., Manuel, J.K., & Ernst, D. (2014). *Motivational Interviewing Treatment Integrity Coding*
721 *Manual 4.1*. Unpublished manual.

722

723 Moyers, T.B., Miller, W.R., & Hendrickson, S.M.L. (2005). How does motivational interviewing work?
724 Therapist interpersonal skill predicts client involvement within motivational interviewing sessions.
725 *Journal of Consulting and Clinical Psychology*, 73(4), 590–598. DOI: 10.1037/0022-006X.73.4.590.

726 Murphy, S. M. (Ed.). (1995). *Sport Psychology Interventions*. Champaign, IL: Human Kinetics.

727 Naar, S. & Safren, S. (2017). *Motivational Interviewing and CBT: Combining Strategies for*
728 *Maximum Effectiveness*. New York, Guilford Press.

729 Naar-King, S., Earnshaw, P. & Breckon, J. (2013). Towards a Universal Maintenance Intervention:
730 Integrating Motivational Interviewing with Cognitive-Behavioral Strategies for Maintenance of
731 Behavior Change. *Cognitive and Behavioral Practice*, 27(2), pp.126-137. DOI: org/10.1891/0889-
732 8391.27.2.126.

733 Norcross, J.C. (2002). *Psychotherapy relationships that work: Therapist contributions and*
734 *responsiveness to patients*. Oxford University Press.

735 Norcross, J. C., Karpiak, C. P., & Lister, K. M. (2005). What's an integrationist? A study of self-
736 identified integrative and (occasionally) eclectic psychologists. *Journal of Clinical Psychology*, *61*(12),
737 1587–1594. http://doi.org/10.1002/jclp.20203

738 Owen, J. (2010). Working with sport and exercise psychologists - A winning combination. In M.
739 Milton (Ed.), *Therapy and Beyond: Counseling Psychology Contributions to Therapeutic and Social*
740 *Issues* (pp. 213–228). West Sussex: Wiley & Sons.
741
742 Petitpas, A.J., Giges, B., & Danish, S.J. (1999). The sport psychologist-athlete relationship -
743 implications for training. *The Sport Psychologist*, 13, 344–357. DOI: org/10.1123/tsp.13.3.344.

744 Pietrabissa, G., Ceccarini, M., Borrello, M., Manzoni, G. M., Titon, A., Nibbio, F., … Castelnuovo, G.
745 (2015). Enhancing behavioral change with motivational interviewing: A case study in a Cardiac
746 rehabilitation unit. *Frontiers in Psychology*, *6*(298), 1–9. http://doi.org/10.3389/fpsyg.2015.00298

747 Poczwardowski, A., Sherman, C.P., & Henschen, K.P. (1998). A Sport Psychology Service Delivery
748 Heuristic: Building on Theory and Practice. *The Sport Psychologist*, 12, 191–207. DOI:
749 org/10.1123/tsp.12.2.191.
750
751 Poczwardowski, A., Sherman, C.P., & Ravizza, K. (2004). Professional philosophy in the sport
752 psychology service delivery: Building on theory and practice. *The Sport Psychologist,* 18*,* 445-463.
753 DOI: org/10.1123/tsp.18.4.445.

754 Radcliffe, J.N., Comfort, P., & Fawcett, T. (2013). The Perception of Psychology and the Frequency of
755 Psychological Strategies used by Strength and Conditioning Practitioners. *Journal of Strength and*
756 *Conditioning Research*, 27(4), 1136–1146. DOI: 10.1519/JSC.0b013e3182606ddc.
757
758 Resnicow, K. & McMaster, F. (2012). Motivational Interviewing: moving from why to how with
759 autonomy support. *International Journal of Behavioral Nutrition and Physical Activity,* 9(19), 2-9. DOI:
760 10.1186/1479-5868-9-19.
761 Rochat, S., & Rossier, J. (2016). Integrating motivational interviewing in career counseling: A case
762 study. *Journal of Vocational Behavior*, *93*, 150–162. http://doi.org/10.1016/j.jvb.2016.02.003

763   Rogers, C. (1959). *Psychology: A Study of a Science*. Study 1, Volume 3: *Formulations of the Person*
764   *and the Social Context*, edited by Sigmund Koch. (McGraw-Hill, 1959, pages 184-256).
765
766   Rollnick, S., Butler, C. C., McCambridge, J., Kinnersley, P., Elwyn, G., & Resnicow, K. (2005).
767   Consultations about changing behavior. *British Medical Journal*, *331*(7522), 961–963.
768   http://doi.org/10.1136/bmj.331.7522.961
769   Rosengren, D. (2009). *Building motivational interviewing skills: A practitioner workbook*. London:
770   Guilford Press.
771
772   Ryle, A. (2012). Critique of CBT and CAT. In E. McCormack (Ed.), *Change for the Better* (Vol. 4, pp. 1–
773   8). New York, NY: Sage.
774   Sharp, L.A., Hodge, K., & Danish, S. (2015). Ultimately It Comes Down to the Relationship:
775   Experienced Consultants? Views of Effective Sport Psychology Consulting. *The Sport Psychologist*,
776   *29*(4), 358–370. http://doi.org/10.1123/tsp.2014-0130
777   Shortway, K. M., Wolanin, A., Block-Lerner, J., & Marks, D. (2018). Acceptance and Commitment
778   Therapy for Injured Athletes: Development and Preliminary Feasibility of the Return to ACTion
779   Protocol. *Journal of Clinical Sport Psychology*, *12*, 4–26. http://doi.org/10.1123/jcsp.2017-0033
780   Simons, J.P. & Andersen, M.B. (1995). The Development of Consulting Practice in Applied Sport
781   Psychology: Some Personal Perspectives. *The Sport Psychologist*, 9(4), 449-468. DOI:
782   10.1123/tsp.9.4.449
783   Soderlund, P. D. (2018). Effectiveness of motivational interviewing for improving physical activity
784   self-management for adults with type 2 diabetes: A review. *Chronic Illness*, *14*(1), 54–68.
785   http://doi.org/10.1177/1742395317699449
786   Thompson, C., & Andersen, M. B. (2012). Moving Toward Buddhist Psychotherapy in Sport: A Case
787   Study. *The Sport Psychologist*, *26*(4), 624–643. http://doi.org/10.1123/tsp.26.4.624
788   Turner, M.J., & Barker, J.B. (2014). Using Rational Emotive Behavior Therapy With Athletes. *The*
789   *Sport Psychologist*, *28*(1), 75–90. DOI: org/10.1123/tsp.2013-0012.
790   Wagner, C.C & Ingersoll, K.S. (2012). *Motivational Interviewing in groups*. London: Guilford Press.
791
792   Weinberg, R.S. & Gould, D. (2012). *Foundations of Sport and Exercise Psychology*, 6th Edition.
793   Champaign, ILL.: Human Kinetics.
794
795   Westra, H. (2012). Motivational interviewing in the treatment of anxiety. London: Guilford Press.
796
797   Westra, H.A., & Arkowitz, H. (2011). SPECIAL SERIES: Integrating Motivational Interviewing With
798   Cognitive Behavioral Therapy for a Range of Mental Health Problems. Introduction. *Cognitive and*
799   *Behavioral Practice*, 18, 1–4. DOI: 10.1037/ccp0000098.
800   Wood, A. G., Barker, J. B., & Turner, M. J. (2017). Developing Performance Using Rational Emotive
801   Behavior Therapy (REBT): A Case Study with an Elite Archer. *The Sport Psychologist*, *31*(1), 78–87.
802   http://doi.org/10.1123/tsp.2015-0083