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

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

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Abstract

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

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

This application of CB approaches is extremely dependent on the practitioner’s ability to "engage the client in any sort of dialogue about their problem and therefore the potential for a CB intervention" (Leahy, 2006, p. 137). And yet, published sport psychology interventions appear to place more emphasis on content than on the processes of relationship-building and their delivery (Longstaff & Gervis, 2016), and there is a need to better understand the mechanisms of action or mechanisms of change (Gardner & Moore, 2012; Mack, Breckon, Butt & Maynard, 2017; Poczwardowski, Sherman & Henschen, 1998). It is clear that sport psychologists have the knowledge and ability, but it is often less clear how these are delivered in conversations with athletes. For
example, the specific communication strategies used (and not used), specific models and tools implemented, conscious processes in cultivating a therapeutic alliance, recognition of athlete readiness for an intervention, structures which guide practitioner decision-making during sessions, and processes for integrating two or more complimentary therapeutic methods are rarely described in detail. This makes it difficult not only to replicate reported interventions, but also difficult to identify the mechanisms which contribute to a successful intervention.

Given the growing number of therapeutic approaches and interventions being applied in sport psychology, there is an increasing need to precisely define intervention content and delivery, specifically in regards to the individual and professional philosophies of the practitioner (Poczwardowski, Sherman, & Ravizza, 2004) and the needs of the athlete (Gardner & Moore, 2004b).

While this broadening of the discipline is encouraging - given that there is a tendency for neophyte practitioners to adopt the dominant approach in their field (Fishman, 1999) - to avoid uniformly applying PST based on the cognitive behavioral model, there is a need for practitioners to investigate other approaches, in case a situation arises where this is not appropriate (Corlett, 1996; Murphy, 1995).

The CB approach is arguably dominant in mental health, as the premier choice for treatment of a large number of different forms of distress (Cromarty, 2016; Holmes, 2002; Moloney & Kelly, 2004). Nevertheless, it is not without its critics, and these limitations are relevant for sport psychology as the CB approach and its derivatives continue to be applied with athletes. Examples include a focus on fixing athlete 'problems' (e.g., Cunliffe & Hemmings, 2016), perhaps at the expense of identifying and reinforcing athlete strengths; the risk of appearing critical or disrespectful in dissecting and assessing irrational, distorted or faulty thinking patterns (Ryle, 2012); a recognition that cognitive behavioral therapy (CBT) will be ineffective in one third of cases, and a readiness to attribute this to the client's lack of motivation or insight (Moloney & Kelly, 2004). Further, in CBT, if an intervention is
evaluated and deemed unsuccessful in terms of the intervention goals, the initial formulation is
questioned (McArdle & Moore, 2012, p.307). An alternative may be to evaluate the strategies used
to deliver the intervention, including the therapeutic alliance (Baldwin, Wampold, & Imel, 2007). For
example, what if the formulation was accurate and the content of the intervention was pertinent,
but the intervention was not delivered in an athlete-centred, empathetic, collaborative, autonomy-
supportive manner? Or, what if the athlete simply didn’t ‘buy in’ to the strategies being proposed by
the practitioner, or was not ready for them, and so disengaged from the applied work? Finally,
Brown (2011) indicates that athletes can struggle to initiate, practice and maintain CB restructuring
or self-regulation strategies, while Massey, Gnacinski and Meyer (2015) identified the largest portion
(37%) of sampled NCAA athletes as ‘pre-contemplators’ regarding engagement in a PST programme.
Taken together, these assertions indicate that prematurely focussing on intervention content (at the
expense of the therapeutic processes) could be detrimental to that intervention.

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

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

The Spirit of MI

The spirit (or relational component) of MI is its guiding principle and has been described as a way of being and thinking that is most common in MI practitioners (Westra, 2012). It is perhaps best illustrated as four components: Partnership; Acceptance; Compassion; and Evocation (Miller &
These components contain within them many of the humanistic principles of Carl Rogers, including collaboration between practitioner and client; practitioner attempts to demonstrate accurate empathy; practitioner attempts to be non-judgemental in hearing the client’s story; and practitioner makes effort to be supportive of client autonomy and self-direction.

Technical (micro skills) components of MI: OARS

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

The four (‘+’) processes of MI

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

****INSERT FIGURE 1 HERE****
Figure 1 – The four (‘+’) processes of MI (Adapted from: Breckon, 2015).

The language of change

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

Using Motivational Interviewing to build the athlete-psychologist relationship

The salience of the athlete-psychologist relationship in sport has been repeatedly emphasised (Andersen & Speed, 2010; Petitpas, Giges, & Danish, 1999; Sharp, Hodge, & Danish, 2015), particularly regarding counseling skills and the ‘working alliance’, yet trainee sport psychologists are often less clear on how to develop these engagement skills (Katz & Hemmings, 2009). While measuring the influence of the professional relationship on outcomes, ‘therapeutic alliance’ has emerged as a consistent predictor of outcomes and is an essential component of any talking therapy (Baldwin, Wampold, & Imel, 2007; Flückiger, Del Re, Wampold, Symonds, & Horvath, 2012; Norcross, 2002). A collaborative and empathic consultation style is critical for building rapport (Leach, 2005), and managing ruptures in the alliance (Moyers, Miller, & Hendrickson, 2005). MI is one approach which seeks to maximise this working alliance, in order to ‘gain access’, through its underpinning
philosophy and inherent four processes, mobilised through overt verbal communication skills which may be missing from early sport psychology training. Motivational Interviewing can be viewed as an effective method for communicating with athletes, a framework for delivering PST and other interventions, and for offering support for non-performance related issues, due to its evocative and collaborative nature. An athlete’s ability to use psychological skills is determined by their level of self-awareness, which in turn enables self-regulation (Behncke, 2004). The exploratory, client-centred nature of MI aims to increase self-awareness, potentially leading to increased effectiveness of PST and self-regulation. In addition to providing a framework or roadmap for relationship building, MI may also contribute to an underpinning theoretical framework in the intervention process, which is important in providing a cohesive structure against which progress toward change can be measured (Markland et al., 2005) as well as ensuring validity, reliability and evidence-based practice.

Athlete concerns about performance should not be viewed narrowly in the context initially presented by the athlete, but rather take a holistic perspective on a broader scale incorporating the athlete’s entire life (Gardner & Moore, 2006). This may include “… transitional, developmental, interpersonal, intrapersonal and more serious psychological issues…” (Gardner & Moore, 2006, p.11). This is in keeping with the need for a holistic approach for enhancing athletic performance (Simons & Andersen, 1995), an approach inherent in the ‘relational ethos’ of counseling psychology (Owen, 2010). Motivational Interviewing, with its exploratory tools and collaborative empathic nature, is one approach which may be effective for investigating the fundamental causes of underperformance, while also developing the personal and psychological wellbeing of the athlete.

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

A useful analogy of MI in sport psychology settings is to consider a garden trellis. Here, MI provides a framework or trellis (Figure 2) upon which other interventions and techniques can be grown and can thrive. Each intervention (plant) can be clearly identified as a unique contributor to the overall ‘crop’ which can be measured in terms of athlete performances, outcomes, and wellbeing. Obviously the
types of ‘plants’ or interventions that can be grown on the trellis (e.g., integrating MI with traditional CB and PST) can vary depending on the athlete, the situation or the context and agreed in collaboration between all stakeholders (ideally the athlete and sport psychologist).

****INSERT FIGURE 2 HERE****

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

The role of a sport psychologist is a multifaceted one, for “our athletes have many needs, are of many personalities, and are embedded in organisations and settings of varying complexities” (Gardner & Moore, 2006, p. ix). A sport psychologist may also be required to work with other stakeholders, such as coaches and parents, each with their own values and priorities. There may be an element of discord between parties, and MI could prove a valuable approach for mediation, through reflective listening, values exploration, building discrepancy and triangulation of perspectives. Athletes may harbour ambivalence towards engaging with sport psychology support, which the practitioner would need to recognise and address if any practical work is to be successful. MI is one potential strategy for doing this (although is not limited to those athletes presenting as ambivalent or resistant to change). Often a sport psychologist forms part of a multi-discipline scientific support team, where other practitioners may be utilising the principles of sport psychology or MI to increase adherence to target behaviors, for example, injury rehabilitation (Arvinen-Barrow & Walker, 2013), strength and conditioning (Radcliffe, Comfort, & Fawcett, 2013), nutrition (Campbell et al., 2009), lifestyle behaviors (e.g., balancing training, competition, social and personal demands) (Jones, Hanton, & Connaughton, 2002), and anti-doping (Morse, 2013).

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

The Client: John (pseudonym), a 25-year old central defender who at the time of the sessions was playing for a football (soccer) club in a state league in Australia. He had played for the national under 21 team and been touted as a future representative in the national senior team. As the team’s consultant sport psychologist, John was sent to me by the manager on account of his lack of discipline and excessive (unhelpful) aggression on the pitch. John had developed a reputation for
giving away free kicks and receiving frequent yellow cards. He had been sent off twice in the previous season and had been suspended six times over the last 3 years.

Engaging phase:

The first thing that struck me about John was the level of discord between us. Speaking with John I got a very clear sense that he was reluctant to work with me (or any other sport psychologist for that matter) - he was there because he had been sent. This 'mandated attendance' presented a substantial barrier to our working relationship and I therefore focussed in the opening exchanges on the core MI process of engagement (Breckon, 2015). It was essential to explore the discord that John was exhibiting through the combination of predominantly simple reflections (using John's own words) and open ended questions to increase engagement and demonstrate empathy and a non-judgemental approach (Rosengren, 2009). I explored his ambivalence and it emerged that he had been “sent” to the team's previous sport psychologist about this very issue last season and the psychologist suggested that John needed to calm down in order to approach the game in a more relaxed state. He then proceeded to try and engage John in some anger management training (cognitive-behavioral) and taught John a relaxation technique (PST) and asked him to keep a record of his thoughts associated with this anger (record keeping: CBT; Kennerley, Kirk & Westbrook, 2016). John responded very negatively to this previous strategy as he liked to play 'angry' and consequently did not return to see the psychologist about this or any other matter last season. Through a combination of simple and complex reflections (offering John a deeper level interpretation of his comments) and use of reflective summaries (several reflective statements combined to capture the previous few dialogue exchanges) I conveyed to John that I understood that he feels that he performs best when he plays angry and it is important for him to be in this state (empathy as opposed to sympathy). I then concluded the opening phase with an amplified reflection (an overstatement to gently challenge John’s absolute view and status quo) in which I stated “you play best when you’re angry and what you’re doing now is working for you”. John responded that his lack
of discipline was typically in retaliation to disparaging personal comments from his opponents – directed to fire him up. He also acknowledged that he had developed a reputation for losing it and that he now realised that players had begun to target him because of this. This moving forward and building upon the practitioner's reflection is typical of an effective complex reflection in MI (Naar-King et al., 2013). Here, I used a double-sided reflection (offer two sides of an argument): “on the one hand you feel a need to retaliate to the comments of opponents and on the other hand you don’t like the reputation you are developing because of this”. John again expanded on both the content and emotion behind his perspective and elaborated on how he wanted to distance himself from this reputation. This was accompanied by a considerable change in his body language, where he appeared less tense. It was clear that this empathic approach had begun to reduce the level of discord between us with John relaxing more, smiling and beginning to ask questions. Now that there were very clear signs of engagement and the absence of discord, it was considered appropriate to begin the process of focusing.

**Focusing phase:**

Having begun to develop a shared understanding in the opening (engagement) phase, focusing began with an exploration of what (if anything) he would like to change. Through the appropriate use of reflection, affirmations (reflective statements which acknowledge strengths, values or self-efficacy) and open ended questions I was able to ascertain that John would like to play angry but in a way that advantaged the team; a way that was within the rules. A form of ambivalence was clearly evident in regard to how he would like to play, but unsure of how he might do this without impacting negatively on the team. Ambivalence is normative in the early phases (Engle & Arkowitz, 2006). John wanted to change his reputation of being a player that would lose it quickly and that other teams would target. Instead he wanted to: run hard, pressure and harass opponents, tackle hard but within the rules and not react to the negative comments of opponents. In response to this I used a combination of complex reflections and affirmations. For example, I noted that “You are very
much a team player that likes to play tough but in a way that benefits the rest of the team and you
are the kind of person who wants to set a good example for your younger teammates.” John reacted
in a positive way in terms of both his body language (he sat up straighter and began to smile more)
and produced some more discussion around what he wanted to achieve specifically for both himself
and the team. It was clear that engagement was still underpinning our relationship and that change
talk (CT; Amrhein et al., 2003) was beginning to emerge. Given that we now had an agreed focus for
what John would like to modify, our next goal was to actively promote dialogue from John that was
consistent with this change plan. Change talk is important because it positively correlates with
change outcomes (Amrhein et al., 2003; Magill et al., 2014) and this phase enabled me to move
toward evoking from John his own thoughts and beliefs about why this change would useful, how
confident he is about achieving this and how he might go about it.

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

Action planning phase:

Given John was clearly committed we began planning by discussing when he would begin, and how he would do it. John was quite clear that he was committed to spending at least 15 minutes every night before a game visualising opponents trying to agitate him and then seeing himself respond in the way he would like to play. I then spent some time checking with John about how he might use visualisation (collaboration) and how it has worked for him in the past, and we then discussed strategies that can be followed to facilitate the effectiveness of this technique. This was a clear example of the integration of PST within an MI framework. Consistent with MI, I thought it
important to incorporate some *troubleshooting* in order to prepare for times when things become challenging for John, therefore facilitating maintenance. Here John discussed occasions when he might struggle with this, such as when extremely tired, and certain opponents that agitated him the most. We really focused on imagining these scenarios and how he would respond to these situations with his new philosophy of how he would like to play the game. John also came up with the idea of visualising momentary lapses in which he lost control and then regained it. This evocation from the athlete maintained a sense of engagement and trust between both parties and valued their resourcefulness and autonomy toward change (Resnicow & McMaster, 2012) in an efficient and non-judgemental manner.

**Outcomes**

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

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

**Discussion**

It has previously been stated that the athlete-psychologist relationship is akin to the client-counselor relationship (Petitpas, Giges, & Danish, 1999). While factors which should be present during the design, implementation and evaluation of psychological services with athletes have been identified
(Poczwardowski, Sherman, & Henschen, 1998), there are still limited descriptions of the therapeutic content, structure and style of consultations and interventions in sport psychology. One consequence of this has been a dearth of research into the minutia of sport psychology interventions beyond describing headline content such as the type of PST delivered (e.g., mental rehearsal and goal setting). Moreover, a lack of understanding of the mechanisms which influence the therapeutic alliance and relationship between the athlete and psychologist, including aspects such as building empathy and utilising athletes as an autonomous resource, often means we do not fully understand the influential mediators of success in these sessions. Sport psychology support is concomitant with the therapeutic relationship within which it was delivered. It is through this relationship that the practitioner facilitates change in the athlete, and the success of an intervention should not be assessed independently of the relationship that fostered it (Poczwardowski, Sherman & Henschen, 1998). As the case study clearly illustrated, there is real potential for future collaboration once engagement has been achieved and resistance or ambivalence from the athlete has been managed. The case example also demonstrated the value of applying technical (and therefore measurable) skills such as the use of appropriate reflections and an emphasis on evoking change talk from clients, in order to have the athlete take greater responsibility for change in an empathetic relationship.

With MI the inclination to confront, convince or persuade athletes is replaced by evoking their own reasons for change and adapting behaviors, which minimises athlete resistance (Lundahl et al., 2013). MI even explores the subtleties of language about change (Amrhein et al., 2003) providing clear frameworks for appropriate responses (Miller & Rollnick, 2013). Since MI is a clearly-defined approach with clear and measureable technical and relational components, it appears well placed to provide a basis for sport psychology interventions and a framework (or trellis) upon which intervention components can be mapped and delivered in a holistic way that respects the athlete’s own motives and needs. This is illustrated by the sport psychologist in the case study who, following
a process of engagement, worked in partnership with the athlete to develop an intervention (visualisation) that he could use to play football the way he wanted to.

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

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

**Implications for applied practice**

The case study has shown MI to be a valuable approach for practitioners to consider adopting when working with an athlete who has been forced to attend, and/or presents initially as sceptical or resistant to engaging, in order to begin building a professional relationship and get the athlete to the point of being ready for some sport psychology work. Further, it is a valuable approach to slip into as and when ambivalence or resistance arises over the course of the professional relationship, perhaps during the intervention phase of the relationship which athletes may find particularly challenging.
It has been shown here that MI can be successfully integrated with at least one dominant intervention in sport psychology (PST), which raises considerations regarding which other interventions MI might integrate with and enhance, and how practitioners are integrating different approaches in their work (Norcross, Karpia, Karpiak & Lister, 2005), which could potentially lead to a more holistic and athlete-centred delivery of service. It has been identified that some elements of MI are being used already by sport psychologists in their applied work, both explicitly and implicitly, but it appears that elements of MI are being 'cherry picked' rather than embraced holistically (Mack et al., 2017), which is in keeping with previous research (e.g., scaling rulers; Hays, Thomas, Butt & Maynard, 2010). As illustrated in this case study, there are benefits to a more comprehensive application of an MI framework as part of athlete conversations.

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

MI looks easy, but is difficult to do well – it is important that the integrity of MI delivery is assessed in order to determine that it is actually MI that is being implemented with athletes. Fidelity checks
(Bellg et al., 2004; Breckon, Johnston & Hutchison, 2008) of MI in sport settings could be applied to ensure reliability and integrity. This also avoids reliance on athlete performance and competition outcomes as the sole measure of successful sport psychology interventions. Clearly reporting the content, frequency and delivery of MI and integrative therapy components, including an evaluation of the therapeutic alliance (Fluckiger et al., 2012) is becoming widespread in many randomised controlled trials and clinical intervention settings, and applied sport psychology could potentially learn and benefit from such practices.

Implications for future research and training

In considering these implications for applied practice, there are also implications for future research. These centre on the need to further explore how practitioners with extensive training and knowledge in the MI approach are applying it in their daily work in sport settings, to determine best practice guidelines for practitioners wishing to add this approach to their repertoire. Given that several approaches from within the broader discipline of psychology (e.g., REBT, CBT, MAC, solution-focused) are becoming popular for working with athletes, future research should seek to identify and delineate the processes and efficacy of integrating MI with these different interventions. This may be achieved through production of case studies which provide in-depth explanations of an integrated model. For example, a case study outlining the use of CBT underpinned by MI (and vice versa - MI applying CB intervention components) to support an athlete who is experiencing a drop in performance due to irrational or intrusive thoughts. Such a case study could outline the processes of integrating CBT with MI, the impact of this on the therapeutic alliance, and impact on the athlete’s wellbeing and sport performance. While it is believed that MI can underpin delivery of many interventions because of the technical and relational aspects, it may be more compatible with some interventions than others. For example, greater emphasis may be placed on challenging illogical and irrational thinking than on collaborating and building an alliance with an athlete when using a traditional REBT approach, when compared with more traditional CBT (Brown, 2011).
Research of this nature will require not only in-depth interviews or focus groups, but also analysis using previously mentioned coding instruments and client evaluations of their work, to understand the mechanisms of action by which they are being effective, and even identify strategies proving ineffective. This knowledge would be invaluable for the training of current and neophyte practitioners, given that “There is now a greater emphasis on counseling and clinical training in sport psychology” (Weinberg & Gould, 2012, p.18). These findings would also add to the wealth of material already used to train practitioners in the MI approach, and could be considered for inclusion in university degree curricula, to give students a foundation in relational and technical skills prior to introducing intervention skills and strategies.

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

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

Conclusion

While it has been suggested that sport psychologists must be competent in both PST and therapeutic counseling (Herzog & Hays, 2012) this suggests they are exclusive of one another,
whereas the delivery of PST within a counseling framework appears to be a more efficient and effective approach. MI has been shown to increase treatment engagement and improve treatment outcomes (Britton, Patrick, Wenzel, & Williams, 2011), particularly when combined with other treatments such as CBT (Flynn, 2011; Geller & Dunn, 2011; Leahy, 2006; Westra & Arkowitz, 2011). As the case study illustrated, it is delivering PST within an evidence-based framework which has the potential to enhance the efficacy of treatments, through working in partnership with athletes, respecting their autonomy and evoking ideas about techniques from the athlete. MI is not being proposed as a panacea here but rather we are proposing this evidence-based approach, used extensively in other psychological domains, can complement and enhance current sport psychology interventions through enhanced therapeutic engagement.
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