

Athlete-counselling competencies of applied sport psychology practitioners and the role of mindfulness in athlete-centred service delivery

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DECLARATIONS

I, Julius Jooste, herewith declare that the language (set to UK English) of this research report which is presented in article format has been edited by Mrs Eileen Pearse, freelance editor and translator, employed at Unisa Language Services from 1982 to 2011, member of the Professional Editors' Group and of ZaLang.

I, Julius Jooste, also hereby declare that this research for the degree, Doctor of Philosophy (Human Movement Sciences) at the North-West University, has not previously been submitted by me for the degree at this or any other university, that it is my own work in design and execution, and that all materials from published sources contained herein have been duly acknowledged.



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The co-authors of the three articles, which form part of the thesis, Profs Ankebé Kruger (Promoter), Ben Steyn (Co-promotor) and Dr David Edwards (Co-promotor), hereby give permission to the candidate, Mr Julius Jooste to include the three articles as part of a PhD thesis. The co-authors' contribution (advisory and supportive) was within reasonable limits, thereby enabling the candidate to submit this thesis for examination purposes. This thesis, therefore, is submitted in fulfilment of the requirements for the degree Doctor Philosophiae in Human Movement Science within the School for Biokinetics, Recreation and Sport Sciences in the Faculty of Health Sciences at the North-West University (Potchefstroom Campus).

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FOREWORD

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“I am because you are”
(African Proverb)



ABSTRACT

Athlete-counselling competencies of applied sport psychology practitioners and the role of mindfulness in athlete-centred service delivery

Enquiry into the competencies associated with modern-day sport psychology practice is vital to inform and safeguard the emergent (professional) status of applied sport psychology (ASP) practitioners, especially in terms of questioning the relevance of training, education and regulation standards (Fletcher & Maher, 2013:266). Despite the efficacy of mindfulness as a means of fostering therapeutic endeavours or a proven intervention in performance enhancement in the sporting environment (Aherne *et al.*, 2011:177; Bernier *et al.*, 2009:329; Gardner & Moore, 2007:67; Hall, 2013:233), it has not yet been verified as an underlying competency in effective sport psychology practice.

The overriding aim of this study was to identify the essential competencies in contemporary sport psychology practice within a developed context (regulated, as in the UK) and a developing context (unregulated, as in SA). Subsidiary aims were to: (1) extrapolate and contextualise the parallels between Eastern meditation-derived mindfulness and Rogers's humanistic person-centred (PC) approach; (2) determine the significance of mindfulness processes in contemporary sport psychology practice, and; (3) determine the relationship between ASP practitioners' dispositional mindfulness and the quality of the consulting relationship (athlete-centred service delivery). These tributary aims were intentionally formulated in an attempt to substantiate the underlying meaning and relevance of mindfulness regarding what is considered as competent practice in modern-day sport psychology. Consequently, the study adopted an exploratory sequential mixed-methods research approach.

Parallels between meditation-derived mindfulness and Rogers's humanistic PC approach were contextualised by means of a conceptual and evaluative literature review of the PC framework's theoretical underpinnings in relation to definitive descriptions of mindfulness (see chapter 3). In this way, the fundamentals of mindfulness within the core conditions of PC therapy were explored and verified.

Nine expert ASP practitioners (N=4 from SA; N=5 from UK), who were purposefully selected, participated in semi-structured interviews (in person) relating to the identification of essential

competencies in modern-day sport psychology practice (qualitative phase of the study - see chapter 4). Two participants were female and seven were male, of which four were registered with the Health Professions Council of South Africa (HPCSA), four with the United Kingdom's Health Care Professions Council (HCPC) and one with the British Association of Sport and Exercise Science (BASES). The interview recordings were transcribed verbatim and analysed according to Tesch's (1990:142-145) eight-step thematic content analysis method.

ASP practitioners' estimations on the worth of mindfulness in sport psychology practice (see chapter 5) were distilled from the data generated by the qualitative interviews which originally explored the essential competencies in contemporary practice (primary aim). An explorative interpretative paradigm was considered for reflecting participants' contextualised responses exposed through their personal perception and subjective meaning. The transcribed data were subjected to a thematic content analysis (steered by the phases outlined by Braun & Clarke, 2006) in which the primary investigator adopted a realist method (with the intent of examining the semantic meaning of participants' responses).

A total of one hundred and thirty ASP practitioners in SA and UK from a compiled list were individually contacted (via emails and telephone) with a request to participate in the assessment of the relationship between ASP practitioners' dispositional mindfulness and the quality of the consulting relationship (person-centred service delivery) (quantitative phase of study - see chapter 5). Initially, practitioners were prompted to solicit the participation of three distinct members of their clientele in an attempt to measure the quality of the consulting relationship from the viewpoints of both the practitioners and their respective clients (practitioner-client dyads). Ultimately twenty-five ASP practitioners successfully completed the online demographic sheet and relevant online questionnaires (FFMQ-SF & WAI-SRT) after separate consultations with three distinct clients (N=75). Participants (practitioners) were reluctant to solicit or grant the researcher access to any of the considered clients. Consequently, the investigation was restricted to reporting the practitioners' viewpoints on the consulting relationship. The collected quantitative measurements were captured on a computer and analysed using the IBM SPSS version 22.0. Correlations between the total scores and the subscale scores of the two questionnaires were determined by means of Spearman's rank-order correlation. The Mann-Whitney U-test was employed to determine significant differences between practitioners who participate in mindfulness practices (for at least six months) and those who do not. Reliability coefficients for the employed measures were determined and generally high scores were recorded with Cronbach's Alpha ranging between .56 and .89.

Results of the investigation identified a marked overlap between meditation-derived mindfulness approach and the humanistic PC approach of Rogers. Based on the shared ideology of the two phenomena, mindfulness was proposed as an ultimate mechanism to cultivate, harmonise and deepen essential therapist qualities associated with PC therapy. Furthermore, results have emphasised the importance of practitioners' character (relational and dependable), a client-centred focus during consultation, an accomplished counselling skills-set (restorative and facilitative skills), and multidisciplinary expertise (within the fields of psychology, sport and sport science) in contemporary practice. The value of mindfulness in present-day ASP was verified by practitioners who claimed its positive impact on their ability to accurately attune to present-moment experiences with clients, and demonstrate empathetic understanding of their clients' unique needs during consultation. An additional discovery was that practitioner mindfulness promotes the establishment of strong consulting relationships with clients. The latter was inferred from a significant positive relationship ($p \leq 0.05$) which was noted between practitioners' dispositional mindfulness and summated scores on their perceptions of the quality of the consulting-relationship (with three of their clients in mind). Interscale correlations ($p \leq 0.05$) also revealed that the ability of sport psychology practitioners to observe, label (describe) and not react (objective indifference to thoughts and feelings) were positively associated with the quality of the therapeutic bond, agreement on goals, as well as agreement on task and goals, with clients during consultation respectively.

It can be concluded from the results of this study that certain skills prerequisites (such as experience in and knowledge of sport) along with identifiable behavioural indicators (personal character) form a noticeable quota of the endorsed criteria for accepting applicants into ASP training and practice. An interdisciplinary training model in ASP, with acquired competence in both kinesiology and psychology-based training, should become the recognised standard in the training and development of practitioners, especially in honing the inclusive ability geared to client-centred service delivery. An additional conclusion established that meditation-derived mindfulness forms not only a cornerstone, but also acts as the process guide which promotes the core conditions for effective PC (client-centred) therapy. Moreover, is an increased consideration of – or dedication to – the development of ASP practitioners' mindfulness levels merited, since it heralds the capacity to deliver effective sport psychology services and stimulate the formation of constructive consulting relationships with clients.

Keywords: Applied sport psychology (ASP), competencies, consulting relationship, contemporary practice, mindfulness, person-centred approach, practitioners.

Atleet beradingsvaardighede van toegepaste sportsielkunde praktisyns en die rol van bewustheid in atleetgesentreerde dienslewering

Ondersoek na die bevoegdhede wat verband hou met hedendaagse sportsielkunde praktyk is noodsaaklik om ingelig te bly sowel as die (professionele) status van ontluikende sportsielkunde praktisyns te beskerm, veral in terme van die doeltreffendheid van opleiding, opvoeding en regulerende standaarde te bepaal (Fletcher & Maher, 2013:266). Ten spyte van bewustheid se doeltreffendheid as 'n middel tot die bevordering van terapeutiese pogings of 'n bewese ingryping in die verbetering van prestasie in die sportomgewing (Aherne *et al.*, 2011:177; Bernier *et al.*, 2009:329; Gardner & Moore, 2007:67; Hall, 2013:233), is 'n onderliggende bevoegdheid in effektiewe sportsielkunde praktyk nog nie geverifieer nie.

Die primêre doel van hierdie studie was om die noodsaaklike vaardighede in hedendaagse sportsielkunde praktyk binne 'n ontwikkelde konteks (gereguleer, soos in die Verenigde Koninkryk) asook 'n ontwikkelende konteks (ongereguleerde, soos in SA) te identifiseer. Filiaal doelwitte was om: (1) die parallelle tussen Oosterse-meditasie afkomstige bewustheid en die humanistiese persoongesentreerde (PC) benadering van Rogers te ekstrapoleer en kontekstualiseer; (2) die betekenis van bewustheid prosesse in hedendaagse sportsielkunde praktyk te bepaal, en; (3) die verhouding tussen toegepaste sportsielkunde praktisyn se disposisionele bewustheid en die kwaliteit van die konsulteerende verhouding met kliënte (atleetgesentreerde dienslewering) te bepaal. Hierdie sytak-doelwitte is doelbewus geformuleer in 'n poging om die onderliggende betekenis en relevansie van bewustheid met betrekking tot wat beskou word as 'n bevoegde praktyk in hedendaagse sportsielkunde te staaf. Gevolglik is 'n verkennende opeenvolgende gemengde-metodes navorsingsmetode in die studie gevolg.

Parallelle tussen meditasie afkomstige bewustheid en Rogers se humanistiese persoongesentreerde benadering is gekontekstualiseer deur wyse van 'n konseptuele en evaluerende literatuuroorsig van die persoongesentreerde raamwerk se teoretiese onderbou met betrekking tot akkurate beskrywings van bewustheid (sien hoofstuk 3). Op hierdie manier word die grondbeginsels van bewustheid binne die kern voorwaardes van persoongesentreerde terapie ondersoek en geverifieer.

Nege deskundige ASP praktisyns (N=4 van SA; N=5 uit die Verenigde Koninkryk), wat doelbewus gekies was, het deelgeneem aan semi-gestruktureerde onderhoude (in persoon) met betrekking tot die identifisering van noodsaaklike vaardighede in hedendaagse sportsielkunde praktyk (kwalitatiewe fase van die studie) (sien hoofstuk 4). Twee deelnemers was vroulik en sewe was manlik, waarvan vier met die Raad vir Gesondheidsberoep van Suid-Afrika (HPCSA), vier met Gesondheidsdiensberoep Raad van die Verenigde Koninkryk (HCPC) en een met die Britse Vereniging van Sport en Oefenkunde Wetenskappe (geregistreer BASES). Die onderhoud opnames is verbatim getranskribeer en geanaliseer volgens Tesch se (1990:142-145) agt-stap tematiese inhoudsanalise metode.

Toegepaste sportsielkunde praktisyns se perspektiewe 'op die waarde van bewustheid in sportsielkunde praktyk (sien hoofstuk 5) is gedistilleer vanuit die data wat oorspronklik deur die kwalitatiewe onderhoude oor die noodsaaklike vaardighede in kontemporêre praktyk (hoofdoel) ondersoek was. 'n Verkennende interpretatiewe paradigma is gebruik om die gekontekstualiseerde antwoorde van deelnemers te weerspieël in terme van hulle persoonlike persepsie en subjektiewe betekenis. Die getranskribeerde data was onderworpe aan 'n tematiese inhoudsanaliese (fases uiteengesit deur Braun & Clarke, 2006) waarin die primêre ondersoeker 'n realistiese metode benadering (met die bedoeling om die semantiese betekenis van deelnemers se terugvoer) gevolg het.

'n Totaal van eenhonderd-en-dertig toegepaste sportsielkunde praktisyns in Suid-Afrika en die Verenigde Koninkryk is individueel gekontak (via e-pos en telefoon vanaf 'n saamgevoegde lys) met die versoek om deel te neem in die evaluering van die verhouding tussen toegepaste sportsielkunde praktisyns se disposisionele bewustheid en die kwaliteit van die konsultasie verhouding tussen praktisyns en hulle kliënte (persoongesentreerde dienslewering) (kwantitatiewe fase van studie - sien hoofstuk 5). Aanvanklik was die praktisyns gevra om die deelname van drie afsonderlike lede van hul kliënte te werf in 'n poging om die gehalte van die kliënte verhouding van die standpunte van beide die praktisyns en hul onderskeie kliënte (praktisyn-kliënt parings) te meet. Uiteindelik het vyf-en-twintig praktisyns die aanlyn demografiese en relevante aanlyn vraelyste (FFMQ-SF & WAI-SRT) suksesvol voltooi ná afsonderlike konsultasies met drie afsonderlike kliënte (N=75). Deelnemers (praktisyns) was huiwerig om die navorser toegang te gee tot enige van die kliënte of om persoonlik kliënte te werf vir hulle deelname aan die studie. Gevolglik is die ondersoek beperk tot die verslagdoening van slegs die toegepaste sportsielkunde praktisyns se standpunte rakende die konsultasie

verhouding. Die ingesamelde kwantitatiewe data was vasgevang op 'n rekenaar en ontleed met behulp van die IBM SPSS weergawe 22.0. Korrelasies tussen die totale tellings en die subskaal tellings van die twee vraelyste was bepaal deur middel van Spearman se rang-orde korrelasie. Die Mann-Whitney U-toets was gebruik om betekenisvolle verskille tussen praktisyns wat aan bewustheid praktyke (vir ten minste ses maande) en diegene wat dit nie doen nie, te bepaal. Betroubaarheidskoëffisiënte van die vraelyste was bepaal en het algemene hoë tellings getoon met Cronbach se Alfa wat wissel tussen 0,56 en 0,89.

Geïdentifiseerde resultate in die ondersoek het 'n merkbare oorvleueling tussen meditasie afkomstige bewustheid en die humanistiese persoongesentreerde benadering van Rogers getoon. Op grond van die gedeelde ideologie van die twee verskynsels, is bewustheid voorgestel as 'n uiteindelijke meganisme om noodsaaklike terapeut eienskappe wat verband hou met persoongesentreerde terapie te kweek, te harmoniseer en te verdiep. Verder het die resultate die belangrikheid van praktisyns se karakter (relasionele en betroubare), 'n kliëntgesentreerde fokus tydens konsultasie, voldoende beradingsvaardighede (terapeutiese en fasiliterende vaardighede), en multi-dissiplinêre kundigheid (binne die velde van sielkunde, sport en sportwetenskap) beklemtoom in die hedendaagse praktyk. Die waarde van bewustheid in hedendaagse toegepaste sportsielkunde is geverifieer deur praktisyns wat voorgestel het dat dit 'n positiewe impak het op hulle vermoë om akkuraat te fokus in huidige oomblik ervarings met kliënte, en empatiese begrip van hulle kliënte se unieke behoeftes tydens konsultasie te demonstreer. 'n Bykomende ontdekking was dat die praktisyn se bewustheid die vestiging van 'n sterk konsultasie verhouding met kliënte bevorder. Die laasgenoemde is afgelei van 'n beduidende positiewe verband ($p \leq 0.05$) wat opgemerk was tussen praktisyns se disposisionele bewustheid en die totale berekende som van (tellings) hulle persepsies oor die gehalte van die konsultasie verhouding (met drie van hul kliënte in gedagte). Interskaal korrelasies ($p \leq 0.05$) het ook getoon dat sportsielkunde praktisyns se vermoë om aspekte waar te neem, akkurate beskrywing/identifisering, en die vermoë om nie te reageer nie (objektiewe onverskilligheid teenoor gedagtes en gevoelens) 'n positiewe verband hou met die gehalte van die terapeutiese verhouding, ooreenstemming oor doelwitte, asook ooreenstemming met die oog op taak en doelwitte onderskeidelik met kliënte tydens konsultasie.

Die gevolgtrekking van die resultate van hierdie studie is dat sekere voorvereiste vaardighede (bv. ervaring in en kennis van sport) saam met identifiseerbare gedragspatrone aanwysers (persoonlike karakter) 'n merkbare kwota vorm van die onderskryfde kriteria vir die aanvaarding van toegepaste sportsielkunde aansoekers in opleiding sowel as praktyk. 'n Interdissiplinêre

opleidingsmodel in toegepaste sportsielkunde, met vaardigheid in beide kinesiologie en sielkunde opleiding, moet die erkende standaard in die opleiding en ontwikkeling van praktisyns word, veral in die slyp van die inklusiewe vermoë wat gerig is op kliëntgesentreerde dienslewering. 'n Bykomende gevolgtrekking is dat meditasie afkomstige bewustheid nie net 'n hoeksteen vorm nie, maar ook dien as die prosesgids wat die kern voorwaardes vir effektiewe persoongesentreerde (kliëntgesentreerde) terapie bevorder. Daarbenewens is 'n verhoogde oorweging van – of toewyding aan – die ontwikkeling van toegepaste sportsielkunde praktisyns se bewustheid vlakke aanbeveel, aangesien dit die vermoë om effektiewe sportsielkunde dienste te lewer en die vorming van konstruktiewe kliënte verhoudings te stimuleer / bemoedig.

Sleutelwoorde: Toegepaste sportsielkunde, vaardighede, konsultasie verhouding, kontemporêre praktyk, bewustheid, persoongesentreerde benadering, praktisyns.

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CHAPTER 1

INTRODUCTION, PROBLEM STATEMENT, AND AIMS OF THE STUDY

1.1 Introduction

Sport psychology practitioners and researchers with shared interest have become ever more captivated by understanding the skills and associated science of professional practice (Aoyagi *et al.*, 2012:32; Cremades *et al.*, 2014:3; Wylleman *et al.*, 2009:435). With an increased interest in this particular area, more research is being directed towards the applied practitioners' competencies, which corroborate the effectiveness of applying sport psychology in practice (Baker, 2014:185; Eubank & Hudson, 2013:61; Poczwadowski & Sherman, 2011:511). Latest advancement concerning a competency-based understanding in applied sport psychology (ASP) emphasized the developmental and contextual nature of competence and suggested that a minimum threshold of competencies relevant to current sport psychology practice be continually reviewed and aligned to training to ensure safe and effective service delivery (Fletcher & Maher, 2013:266). This argument stems from a review and identification of generic limitations in present documentation and recognized competence standards in ASP (that is the Association of Applied Sport Psychology's (AASP) certification criteria (AASP, 2015b), American Psychology Association (APA) Division 47 Self-Assessment Checklist (APA, 2005), International Society for Sport Psychology (ISSP) competencies position stand (Tenenbaum *et al.*, 2003:156), and the athlete-counselling competencies offered by Ward *et al.* [2005:329]).

Nonetheless, a growing body of research indicates that the present-day role of sport psychologists is tending towards a humanistic, athlete-centred approach in which narrower conceptions of service delivery (for example, performance enhancement by means of conventional mental-skills training) have expanded to include a broader form of counselling (for example, understanding athletes' individualistic needs and attending to their emotional wellbeing) (McEwan & Tod, 2015:85; Sharp & Hodge, 2014:97; Tod & Andersen, 2005:314). The European Federation of Sport Psychology (FEPSAC) (2006:para2) upholds this view in its position statement proclaiming the addition of other psychological themes such as wellbeing, work-life-balance, and interpersonal issues as relevant areas of focus in applied sport psychology (ASP). The American Board of Sport Psychology's position paper on the state of ASP also

supports this notion, suggesting that sport psychology education programmes be adopted by psychology departments, instead of physical education and kinesiology departments, to advance knowledge and eventual applied competencies of practitioners (Carlstedt, 2012). The argument is therefore that the ASP practitioner needs to be equipped with a much broader and almost novel spectrum of skills and competencies than what may have been needed in previous eras (Waumsley *et al.*, 2010:246).

Mindfulness is a relatively new construct in counselling, that has been extensively researched over the past three decades because of its practical way of fostering expertise in counsellors/therapists, such as their therapeutic presence, and ability to empathize and show compassion towards the self and clients (Brown *et al.*, 2013:98; Campbell & Christopher, 2012:220; McCollum & Gehart, 2010:351). Furthermore, research maintains not only the effectiveness of mindful meditation interventions in the improvement of counsellors'/therapists' personal development and self-care (Christopher & Maris, 2010:114), and reduction in clients' psychopathology (Miller *et al.*, 1995:196; Piet & Hougaard, 2011:1038) but also the enhancement of athletes' (Aherne *et al.*, 2011:177; Bernier *et al.*, 2009:329; Gardner & Moore, 2007:67; Kaufman *et al.*, 2009:344) and coaches' performance (Hall, 2013:233). Yet despite the strong empirical support for the use of mindfulness in counselling practices and areas related to sport performance, little or no study has attempted to empirically ascertain definite implications of mindfulness for contemporary sport psychology practice, such as practitioners' ability to render athlete-centred services.

1.2 Problem statement

Irrespective of ongoing research into the skills and associated science in sport psychology practice, there is still no common ground on clearly defined athlete-counselling (consulting) competencies to guide sport psychological associations in educating (certifying) and regulating ASP practitioners (Cremades *et al.*, 2014:6; Fletcher & Maher, 2013:266; Ward *et al.*, 2005:320; Wylleman *et al.*, 2009:442). In view of this, the contention is that, despite sport psychology's significant development as an academic field almost three decades since the inception of certification, it has resisted developing into a profession in its own right (Aoyagi *et al.*, 2012:32; Portenga, 2014:201). Sharp and Hodge (2014:91) conceded that this could be largely because of the diverse roles and services (for example, performance enhancement by means of mental skills training, therapy by means of counselling, and/or a combination of both) which are currently construed as sport psychology practice. The logical proposition is thus that a clear identification

of applied practitioners' competencies in addition to the process of practice would provide more clarity on the specific antecedents of competent service delivery (Andersen, 2000:14; Cremades *et al.*, 2014:7), as well as improving the ability to effectively train, certify and monitor the professional accountability of ASP practitioners (Sharp & Hodge, 2011:360; Sharp & Hodge, 2014:93) in efforts to protect both the public and the reputation of the profession.

Addressing this need, Partington and Orlick (1987:96) were the first to develop a formal Consultant Evaluation Form (CEF) in an attempt to ascertain the expertise associated with effective sport psychology practice. These researchers believed that the knowledge, delivery style and characteristics of the applied practitioner were the fundamental factors in influencing the effectiveness of service delivery. Knowledge of the qualities and characteristics associated with effective sport psychology practice has steadily increased over the past years as a result of investigations which gathered and analysed the viewpoints provided by athlete-clients and expert practitioners in the field (Andersen, 2000; Anderson *et al.*, 2004; Sharp & Hodge, 2011; Tod & Andersen, 2005). For example, Anderson and colleagues (2004b:255) discovered that athletes in the United Kingdom (UK) deemed the most essential characteristics of an effective sport psychology practitioner to be: being personable, giving practical advice, having good communication ability, having a high level of knowledge of both sport psychology and the athlete's sport, and being honest and trustworthy. Anderson *et al.* (2004a:190) commented on Carper's (1978:14) diverse sources of knowledge in explaining that the ASP practitioner needs aesthetic knowledge (knowledge relating to one's ability to grasp, understand, and respond to a situation) and personal knowledge (the knowing and understanding of how one's characteristics can influence interpersonal relationships and interactions with individuals) in order to develop and maintain client relationships, which is essential for therapeutic change. Collective analyses of ASP practitioners' viewpoints on effective sport psychology practice, indicate that three most highly regarded consultant qualities are the abilities: to build a connection with the athlete; to establish a professional consulting relationship with the athlete, and; to ensure that the consulting relationship meets the athlete's individual needs to facilitate positive change (Andersen, 2000:13; Petitpas *et al.*, 1999:344; Sharp & Hodge, 2011:371). In support of the latter findings, Sexton and Whiston (1994:7) emphasized the point that a therapeutic relationship between the client and practitioner counts as the single variable most consistently associated with effective therapy outcomes. Andersen (2000:13) corroborated this notion, acknowledging the formation of a collaborative practitioner-athlete alliance as the major goal in the opening stages of any consulting process. More recently, Friesen and Orlick (2010:240) argued that practitioners' relationship-building skills play a fundamental role in the total value of consultancy.

Remarkably, these views were substantiated in semi-structured interviews with experienced sport psychology practitioners who indicated that the working relationship, along with other elements such as consultant variables, immersion, and a good fit, are considered cornerstones of contemporary professional practice (Poczwadowski & Sherman, 2011:511).

It is evident that modern-day sport psychology practice strongly embraces definitive characteristics underpinned by Humanistic philosophies such as the person-centred approach in mainstream psychotherapy. A person-centred approach is strongly inspired by Rogerian approaches to psychological counselling, which emphasize the counsellor-client relationship as an integral part of facilitating therapeutic change (Rogers, 1957; 1961). According to Rogers (1957:95), this theory underscores the elements of genuineness, positive regard, and empathy. If the counsellor demonstrates these three qualities, therapeutic change will be facilitated without any additional interventions. The person-centred theory views the human as a whole, organic being who has a natural tendency to evolve or improve to the fullest extent of his or her potential (Grobler *et al.*, 2003:10). The main aim of the person-centred counsellor is to help the individual achieve full autonomy and self-realisation. Rogers (1957:95) briefly described a person-centred counsellor as one who is open to experiencing the world of the client and has a high level of awareness, especially of the immediate world of feelings; is able to live fully in each moment and not enforce change to fit some preconceived structure of reality or rigid self-concept; and demonstrates trust and total acceptance. Like Rogers's person-centred theory, an athlete-centred approach to sport psychology consulting values the athlete-client as a unique individual with a self-actualising tendency. An athlete-centred approach therefore unites humanistic ideals (that is demonstrating empathetic understanding, establishing a collaborative consulting relationship) in an attempt to promote a restorative platform for clients' distinctive needs, instead of merely revolving around a predetermined scientific objectivity (for example, knowledge-based, problem-oriented approach) in pursuit of performance enhancement. Like Rogers's approach, the sport psychology practitioner functions as the intervention instrument (tool) which promotes a consultative atmosphere that is conducive to therapeutic change (Tod & Andersen, 2005:305).

However, in order to become an effective tool in the process of sport psychology service delivery, the practitioner needs to be skilled in knowing, understanding and accepting the self (Petitpas *et al.*, 1999:353). Poczwadowski and colleagues (1998:191), along with Poczwadowski and Sherman (2011:519) have pointed out the importance of managing the self as an intervention instrument in their proposed Sport Psychology Service Delivery Heuristic (SPSDH). These authors affirmed that a self-focus, and an awareness of one's own interests,

desires and limitations, will enhance practitioners' ability to manage themselves and consequently the process of service delivery (Poczwadowski *et al.*, 1998:191). In line with this, an investigation which has requested a group (N=20) of United States (US) expert clinical sport psychologists to identify the most essential competencies from 33 counselling competency statements, has indicated that competencies with an underlying theme of counselling awareness and sensitivity within sport culture were rated as the most essential for ethical psychotherapy practice with athlete clients (Ward *et al.*, 2005:318). This notion in contemporary sport psychology practice seems plausible, considering the high prevalence of negative work detachment and burnout amongst practitioners (McCormack *et al.*, 2015:8) that coincides with intricate 'trade-specific' challenges. In the light of this, sport psychology practice is documented to take place at frequently unsociable hours of the day in ad-hoc environments (such as tour buses, locker rooms, on the playing field or in a hotel) (Waumsley *et al.*, 2010:246) which nestles amongst other boundaries, thus blurring role expectations (Williams & Andersen, 2012:148). Furthermore, long periods away from one's support structure (for example, family) tend to result in ASP practitioners experiencing increased pressure, inadequacy, or feelings of being overwhelmed (Andersen *et al.*, 2001:13). These wearying conditions, along with one's own "Klaxon" of doubts and anxiety (worry about competence, making an impact), result in an exaggerated reconstructed sense of self during consultation that hinders practitioners' accurate attunement to clients' individual needs (Andersen & Mannion, 2011:181-187). In the light of the above considerations, practitioner qualities such as awareness, understanding, and managing the 'self' during consultation seem indispensable when attempting to create conditions facilitative of therapeutic change. Therefore, a more perceptive approach to sport psychology consulting would be for practitioners to become aware of "how they are" instead of "what they do" when working with clients (Williams & Andersen, 2012:150). Consequently, a better understanding and separation of practitioners' own emotions, thoughts, and needs would seem to enable them to have a more accurate focus and understanding of their clients' unique needs.

A concept which is associated with increased awareness of the self, especially in the process of service delivery that refrains from enforcing a predetermined scientific objectivity (that is cognitive behaviour modification), is mindfulness (Ponton, 2012:189). For thousands of years human-beings have been conveying and exercising the art of mindfulness (traced back to ancient spiritual practices) in an attempt to ease psychological suffering (Miller *et al.*, 1995:193). From a counselling viewpoint, mindfulness is regarded as "paying attention to the here-and-now experience in an accepting and nonjudgmental way, and at the same time being aware of aspects of the mind itself" (Harrer, 2009:234). Harrer (2009:235-236) delineated mindfulness into co-

acting components such as awareness of attentional processes, misidentification, absorption into the situation at hand, and acceptance of all objects of experience as they are, without the desire to change them. A consideration of the latter indicates that mindfulness denotes a total state of awareness in which one shows a deep understanding and acceptance of thoughts, emotions, and sensations as they occur.

In recent years several researchers have linked mindfulness to a more effective therapeutic presence (Bruce *et al.*, 2010:13; Christopher & Maris, 2010:114). Davis and Hayes (2011:198) demonstrated the facilitative role of mindfulness in developing therapists' ability to communicate a felt sense of clients' inner experiences, to be more aware of clients' suffering, and to assist clients in expressing their feelings. Similar findings were found in a sample of doctoral students who became more skilled at noticing internal phenomena and ratings of self-kindness after a brief exposure to a mindfulness training programme (Moore, 2008:335). Greason and Cashwell (2009:2) corroborated the latter by confirming that mindful practices on the part of counselling students strongly predicted their self-efficacy, empathy and ability to direct attention. Mindfulness training also aided counsellors-in-training to relate to themselves and others with more acceptance and compassion, which translated into patience and reduced reactivity and judgment in their work with clients in (McCollum & Gehart, 2010:357). Since the effectiveness of mindfulness practices entered the clinical field of psychology, this soon became an area of focus among sport psychologists as an alternative to traditional change-based psychological skills training (PST) approaches (Gardner & Moore, 2007:35). Gardner and Moore (2004:707) introduced the Mindfulness-Acceptance-Commitment (MAC) approach to sport counselling as a theoretically and empirically derived acceptance-based behavioural intervention for the purpose of enhancing competitive athletes' performance and psychological wellbeing. Ever since, mindfulness has become an integral subset in the advancement of acceptance-based behaviour therapies (ABBT) (Roemer & Orsillo, 2007:72). Acceptance-based behaviour therapies in sport suggest that athlete performance does not necessitate modification or control of internal states but rather, calls for a nonjudgmental present-moment awareness and acceptance of one's thoughts and sensations (whatever they may be). In conjunction with this nonreactive awareness, the athlete remains focused on "task-relevant external stimuli and behavioural choices" that warrant his or her performance goals (Moore, 2009:292). Similar results have been demonstrated amongst coaches (Hall, 2013:233) as well.

However, despite the efficacy of mindfulness as an alternative intervention or a therapeutic means of fostering performance enhancement in the sporting environment (for example,

reducing therapists' erroneous reactivity whilst improving their attention allocation, compassion, relationship development skills, empathy and flexibility of therapeutic response), it has not yet been verified as an effective competency of ASP practitioners in prospect of service delivery. In addition to this, there are currently no clearly defined athlete-counselling competencies or a common vision to guide psychological associations in educating, certifying and regulating sport psychology service delivery (Fletcher & Maher, 2013:266; Portenga, 2014:215; Sanchez *et al.*, 2005:82; Wylleman *et al.*, 2009:442). Also, there is no statutory organisation (professional body) in South Africa that accredits and regulates the practising of sport psychology (South African Society of Sport and Exercise Psychology - SASSEP, 2015; Whitton, 2011:602) in comparison with some nations such as that of the United Kingdom's (UK) reputable sport psychology association (British Psychological Society governed by the Health and Care Professions Council) which endorses policies, procedures, standards for training/education, and supervision (Campbell & Moran, 2014:188; Tod *et al.*, 2014:326). Consequently, in South Africa (SA), as in many other countries, there is a tendency towards charlatan practices which entice professional practitioners (including licensed psychologists with little to no training in sport or sport psychology) to believe that the demographics of the clientele determine the status of practice (Aoyagi & Portenga, 2010:254). This is in addition to the increasing number of kinesiology-trained practitioners who specialise in sport psychology services with alternative titles (for example, mental coach, sport psychology consultant; mental skills trainer) (Aoyagi *et al.*, 2012:35).

Furthermore, the argument that there is a deficiency of existing sport psychology training programmes and models to assist trainee practitioners to learn the requisite humanistic skills to provide client (athlete)-centred services (Anderson *et al.*, 2004a:188; McEwan & Tod, 2015:85) still prevails. Ward *et al.* (2005:320) reasoned that, even though sport psychology is an emerging speciality within professional psychology (clinical and counselling), the importance of athlete-counselling cannot be undervalued. Poczwadowski and Sherman (2011:511) therefore essentially recommended precise delineation of the applied practitioner's qualities associated with effective sport psychology practice in order to maintain education and training at the forefront of ASP and present new viewpoints for academic scrutiny. Wylleman *et al.* (2009:442) also emphasized the pressing need for in-depth research into the field of ASP and its practitioners since the data remains limited and certainly nonexistent within the South African context.

The globalisation and increased professionalization of the sport industry have heightened the need for professional accountability and performance efficiency in ASP at all levels of

participation (Waumsley *et al.*, 2010:246). Like a professional athlete, the ASP practitioner is required to maintain optimal performance in demanding situations. Essential competencies associated with modern-day practice, as well as the relevance of mindfulness, need to be assessed in order to understand the ASP practitioner's role in managing the self in pursuit of athlete-centred service delivery.

It is against this background that the following research questions are posed:

1. Is there an overlap between the theoretical underpinnings of Eastern meditation-derived mindfulness and Rogers's humanistic person-centred approach in therapy?
2. What are the essential competencies in contemporary sport psychology practice amongst ASP practitioners practising in South Africa/the United Kingdom?
3. How significant are mindfulness processes in contemporary sport psychology service delivery amongst ASP practitioners practising in South Africa/the United Kingdom?
4. What is the relationship between practitioners' dispositional mindfulness, and the perceived quality of the consulting relationship (athlete-centred services) amongst a group of ASP practitioners living in South Africa/the United Kingdom?

Answering these research questions may increase understanding of the essential competencies associated with contemporary sport psychology practice and its implications for current and developing education and training systems. Moreover, answers may necessitate the inclusion of additional competencies in the regulation and quality measurement of service delivery and offer a sound knowledge base for the integration of novel concepts (such as mindfulness). The result will be a better definition of areas of professional practice, and will offer significant inferences for streamlining and harmonizing relevant education, training and regulation standards of practitioners in the contexts of both developed and developing nations. The latter in particular, addresses the goal of the latest curriculum reform activities performed by South African Universities (Council on Higher Education [CHE], 2013) in an attempt to propose and develop cross-national qualifications of international comparability such as a first-hand Health Professions Council of South Africa [Psychology Division] (HPCSA) accredited degree in sport psychology. Apart from this specific contribution to higher education and humanities, insight could facilitate both operative practitioners' on-going development towards professional practice and allow sport psychology to continue to evolve as a speciality area (and accountable field) within the broader field of professional psychology.

1.3 Objectives

The objectives of this study are formulated in a coherent manner with the intention of guiding the research process and meeting the aims of the study. The aims of this study are to provide the researcher with clear goals. The three concepts of *essential competencies in sport psychology practice*, *person-centred counselling*, and *mindfulness* are central to this study, and the aims accentuate the researcher's intention in researching these. Emphasizing these three concepts and establishing clarity on their relevance to contemporary sport psychology practice will provide insight into the required and often undervalued qualities of sport psychology practitioners.

The objectives of this study are as follows:

- 1.3.1 Review and extrapolate the parallels between Eastern meditation-derived mindfulness and Rogers's humanistic person-centred (PC) approach.
- 1.3.2 Identify the essential competencies in contemporary sport psychology practice and explore the comparative views of ASP practitioners in SA and the UK.
- 1.3.3 Determine the significance of mindfulness processes in contemporary sport psychology practice amongst ASP practitioners practising in South Africa/the UK?
- 1.3.4 Determine the relationship between practitioners' dispositional mindfulness and the quality of the consulting relationship (athlete-centred service delivery) amongst a group of ASP practitioners living in South Africa/the UK.

1.4 Propositions/Hypothesis

The study is based on the following propositions/hypothesis:

- 1.4.1 Strong parallels between Eastern meditation-derived mindfulness and Rogers's humanistic person-centred (PC) approach will be verified.
- 1.4.2 The essential competencies in contemporary sport psychology practice amongst ASP practitioners practising in South Africa/the UK will accentuate the collective properties of honesty and trustworthiness, relationship-building, self-awareness (knowing, understanding & managing the self), sport-specific knowledge, and sensitivity within sport culture.
- 1.4.3 Mindfulness processes will feature very significantly in contemporary sport psychology service delivery amongst ASP practitioners practising in South Africa/the UK.

- 1.4.4 There will be a significantly positive relationship between practitioners' dispositional mindfulness, and the quality of the consulting relationship (athlete-centred service delivery) amongst a group of ASP practitioners living in South Africa/the UK.

1.5 Clarification of terminology

This section contains brief definitions of concepts and terms that are interchangeably used in this investigation and which are rather atypical or that have metaphoric descriptions of counselling, and applied sport psychology.

- 1.5.1 *Applied Sport Psychology (ASP)*: also referred to as sport psychology practice or sport psychology service delivery, which consists of the application of sport psychology knowledge for the purpose of enhancing clients' performance or wellbeing in sport;
- 1.5.2 *ASP Practitioner*: collectively referring to both accredited sport and exercise psychologists and mental skills trainers (mental coach, sport psychology consultant) with an education background in Kinesiology/Sport Science;
- 1.5.3 *Neophyte ASP Practitioner*: a person who is a beginner/novice in the practical application of sport psychology knowledge; and
- 1.5.4 *Expert ASP Practitioner*: as defined by licensure as a psychologist with a track record of working with professional and nonprofessional athletes for a minimum duration of five years or, a qualified sport scientist (kinesiology trained) who renders sport psychology services to professional and nonprofessional athletes for a minimum duration of ten years.

1.6 Structure of the thesis

The thesis is presented in article format and the structure is as follows:

- Chapter 1:** The problem statement, aims and hypotheses of the study. A bibliography is provided at the end of chapter two which is in accordance with the guidelines set by the North-West University (Harvard Style).
- Chapter 2:** The literature review regarding applied sport psychology, person-centred counselling, and mindfulness. A bibliography is provided at the end of this chapter, which is in accordance with the guidelines set by the North-West University (Harvard Style).

- Chapter 3:** Article 1: Mindfulness: A foothold for Rogers's humanistic person-centred approach. This article has been published in the *Journal of Psychology in Africa (JPA)*, 2015, Vol. 25 (6), pp. 554-559. This chapter together with its bibliography is presented and compiled according to the journal's guidelines. Guidelines to authors contributing to this journal are presented in Appendix E.
- Chapter 4:** Article 2: Essential competencies in contemporary applied sport psychology: Comparative perspectives from South Africa and the United Kingdom. This article has been published in the *African Journal for Physical Activity and Health Sciences (AJPHEs)*, 2016, Vol. 23 (1.1), pp. 1-34. This chapter, together with its bibliography, is presented and compiled according to the journal's guidelines. Guidelines to authors contributing to this journal are presented in Appendix F.
- Chapter 5:** Article 3: Exploratory study of mindfulness in modern-day sport psychology consulting relationships. This article has been accepted for publication in the *Journal of Psychology in Africa (JPA)*, 2016, Vol. 26 (5), pp. 477-480 in the form of a research report. The full length article is presented in Appendix J. This chapter together, with its bibliography, is presented and compiled according to the journal's guidelines. Guidelines to authors contributing to this journal are presented in Appendix E.
- Chapter 6:** Contains the summary, conclusions, limitations and recommendations of the study.

The appendices follow at the end of the dissertation and include the following:

- Appendix A:** Information leaflet and written informed consent form for participants who were requested to participate in semi-structured interviews (Article 2).
- Appendix B:** Protocol for semi-structured interview.
- Appendix C:** Information leaflet and written informed consent form for participants who were requested to complete the online questionnaires (Article 3).
- Appendix D:** Online questionnaires.
- Appendix E:** Submission guidelines for the *Journal of Psychology in Africa (JPA)*.
- Appendix F:** Submission guidelines for the *African Journal for Physical Activity and Health Sciences (AJPHEs)*.
- Appendix G:** Publication confirmation from the *Journal of Psychology in Africa (JPA)*.
- Appendix H:** Publication confirmation from the *African Journal for Physical Activity and Health Sciences (AJPHEs)*.

Appendix I: Publication confirmation from the Journal of Psychology in Africa (JPA).

Appendix J: Article 3: Exploratory study of mindfulness in modern-day sport psychology consulting relationships (Full length version).

1.7 Conclusion

This chapter contextualized the study by presenting an orientation to the topic, identification and description of the problem, and a statement of the concomitant aims and hypotheses. It also presented clarification of terms and a structural layout of the dissertation.

The next chapter reviews the literature of the study with a particular focus on applied sport psychology, person-centred counselling, and mindfulness.

CHAPTER 2

LITERATURE REVIEW: APPLIED SPORT PSYCHOLOGY, PERSON-CENTRED COUNSELLING, AND MINDFULNESS

2.1 Introduction

Sport psychology has developed into a cornerstone of sport sciences in both research and application (Lavallee *et al.*, 2004:18; Weinberg & Gould, 2015:10). The noted influx of students pursuing careers in applied sport psychology (ASP) (Owton *et al.*, 2014:241), together with sport psychology's intensification towards professional status, has prompted practitioners in the field to adapt to new levels of accountability and efficiency (Anderson *et al.*, 2002:433; Fletcher & Maher, 2013:265). The need for documentation and systematic evaluation of practitioners' skills, education, training and professional development has consequently become urgent in sport psychology practice (Owton *et al.*, 2014:234; Poczwadowski & Sherman, 2011:511; Sharp & Hodge, 2011:360; Tod, 2007:95; Tod *et al.*, 2009:S1; Wylleman *et al.*, 2009:436). Despite a growing awareness and recognition of sport psychology as a specialised field of practice in most parts of the world, conceptualized understanding of the inclusive nature and application of sport psychology remains obscure (Andersen *et al.*, 2000:135; Aoyagi & Portenga, 2010:254) which could explain the opposing standards on the training, education and service regulation of practising sport psychologists across the world.

Reports on effective sport psychology practices implied that research should focus less on interventions for the purpose of sport performance enhancement and more on the human deliverer of the intervention (Collins *et al.*, 2013:400; Sharp & Hodge, 2011:360; Sharp & Hodge, 2014:91). Commenting on this, Tod and Lavallee (2011:200) explained that it is not so much *what you do* as an ASP practitioner but, rather *how you do it*. The argument supporting this notion is that the sport psychologist is the "primary consulting tool and the practitioner-athlete relationship the main intervention" (Tod & Andersen, 2005:309). Nonetheless, a growing body of literature has corroborated the fact that the success of a therapeutic endeavour is dependent on a practitioner's ability to establish an open, trusting and collaborative relationship with the client (Friesen & Orlick, 2010:238; Petitpas *et al.*, 1999:351; Rogers, 1957:96). Recent case study

accounts of MSc Sport Psychology students also underscore the role of sport psychologists as facilitators who assist athletes in the development of their own skills (Owton *et al.*, 2014:247). Thus, there is an evident trend in recent sport psychology practices toward a humanistic person-centred approach which is therapeutic in nature instead of performance based.

A person-centred (PC) approach in psychotherapy appeals to in the positive nature of all human beings which places a high value on clients' own resources to form an appropriate understanding of their world and to alter their self-concept, attitudes and behaviour in favour of self-actualization (Casemore, 2011:2; McLeod, 2008:para4). Although the PC approach is not based on specialized knowledge or conceptualized methods, therapists need to offer a coherent and facilitative set of attitudes that are deeply rooted in their personal way of being in order to cultivate their clients' resources (Rogers, 1949:82). PC therapists' embedded way of being with clients is underscored by various qualities such as being truly authentic whilst showing an unreserved acceptance, nonjudgmental, and empathic understanding for the client's worldview (Rogers, 1957:98). Rogers argued that PC counselling has a mystical element to it that is typified by profound spiritual and transcendent experiences which bear a strong resemblance to Eastern-like Oriental views (Rogers, 1979:6; Tophoff, 2006:130). This notion is based largely on a PC therapist's deep-seated awareness and liberation of the self when consulting with clients, to avoid the interference of some preconceived structure of reality or rigid self-concept (Thorne, 2010:4).

Referring to this, Ponton (2012:189) affirmed that mindfulness is a skill that is associated with increased awareness of the self and acceptance of the situation at hand without the desire to enforce a predetermined scientific objectivity, especially in the course of service delivery. In recent years, a number of researchers have linked mindfulness to a more effective therapeutic presence (Campbell & Christopher, 2012:220; McCollum & Gehart, 2010:351). Mindfulness amongst counsellors has proven not only to improve their levels of self-efficacy, empathy and ability to direct attention (Bruce *et al.*, 2010:88; Greason & Cashwell, 2009:2), but also to advance their levels of compassion for and acceptance of themselves and others (Christopher & Maris, 2010:123; McCollum & Gehart, 2010:347). Mindfulness was also found to contribute to developing counsellors' global counselling skills such as establishing a therapeutic relationship, tolerating affect, session management and appropriate self-disclosure (Buser *et al.*, 2012:28) – hence the belief that mindfulness in therapy paves the way for human flourishing (Brito, 2014:358).

Amid current trends in ASP and the increased emphasis on professional accountability, it remains critical to evaluate the relevant competencies, background, training and development of applied sport psychologists (Fletcher & Maher, 2013:265; McEwan & Tod, 2015:79). In support of this, the applicable nature of customary psychological approaches to psychotherapy such as PC counselling in ASP needs to be verified to establish the current trend in service delivery. Furthermore, concepts such as mindfulness and its relevance to both customary PC counselling and the effective application of present-day ASP, also require further exploration of the continued development of effective sport psychology service delivery.

It is against this background that the following literature review was compiled. The first aim of the literature review was to conceptualize ASP in terms of relevant education, training, and essential competencies. The second aim was to review the literature that supports the notion of an athlete-centred approach in current sport psychology practices, guided by an explanation within the theoretical framework of PC counselling. Thirdly, this review aimed to explain mindfulness and its relevance to current sport psychology practice. Finally, there will be an elaboration of the interrelationship between mindfulness and PC counselling with a view to seeking clarity on the unification of Western and Eastern approaches in the facilitation of human optimization.

The next step is to pursue the argument that current sport psychology practices are trending toward a humanistic person-centred approach which is underscored by essential properties of mindfulness. The following literature review attempts to demonstrate and support this argument.

2.1.1 Conceptualization of applied sport psychology (ASP)

The American Psychological Association (APA) Division 47 (Exercise & Sport Psychology) defines sport and exercise psychology as “the scientific study of the psychological factors that are associated with the participation and performance in sport, exercise, and other types of physical activity”(APA, 2015:para1). According to The European Federation of Sport Psychology’s (FEPSAC) position statement, “Sport psychology is concerned with the psychological foundations, processes, and consequences of the psychological regulation of sport-related activities of one or several persons acting as the subject(s) of the activity. The focus may be on behaviour or on different psychological dimensions of human behaviour, i.e. affective, cognitive, motivational or sensory-motor dimensions” (FEPSAC, 1995:para4). Additionally, Weinberg and Gould (2015:4) defined sport psychology as “the scientific study of people in

exercise and sport settings which also involves the practical application of such derived knowledge”.

Based on the preceding definitions, it can be argued that sport psychology is portrayed as an academic discipline rather than a sophisticated means of practice. For this reason, the shortened descriptions of sport psychology were complemented with a more inclusive view to addressing the applied nature of sport psychology in practice. For example, the Association for Applied Sport Psychology (AASP) claimed that “applied sport and exercise psychology involves extending theory and research into the field to educate coaches, athletes, parents, exercisers, fitness professionals, and athletic trainers about the psychological aspects of their sport or activity. A primary goal of professionals in applied sport and exercise psychology is to facilitate optimal involvement, performance, and enjoyment in sport and exercise” (AASP, 2015a:para1). One of the conclusions that can be made is that ASP is the practical application of theorised principles and evidence-based research to facilitate people’s functional involvement, enjoyment and performance within sporting environments.

It is evident that the literature pertaining to sport psychology has brought to light numerous standard definitions which clarify it as a unique field of specialization. However, most definitions remain vague and very broad, and do not address the applied component of sport psychology or its practitioners (Portenga *et al.*, 2011:3; Wylleman *et al.*, 2009:442). Portenga *et al.* (2011:5) argued that the available literature on sport psychology is embodied within the views of academics instead of professionals. At present there is no coherent, practical model relevant to the application of sport psychology.

Despite sport psychology’s significant progress towards becoming a recognized field of specialization, a perpetual cloud of uncertainty looms over clients and practitioners regarding the nature and application of sport psychology (Andersen *et al.*, 2000:135). For example, it has been noted that many sport psychologists function within academic settings, with limited consultation experience (Portenga *et al.*, 2011:5). Can they be considered ASP practitioners? There is also the misconception among public clientele and professional practitioners (including licensed psychologists with little to no training in sport) that work with an athlete signifies sport psychology (Aoyagi & Portenga, 2010:254), in addition to the increasing amount of kinesiology-trained practitioners with alternative titles (for example, mental coach, sport psychology consultant, mental skills trainer) who render sport psychology services to athletes (Aoyagi *et al.*, 2012:35). Such issues are a raising concern since they discount the application of sport

psychology as a distinct specialization field with unique competencies and character (Aoyagi & Portenga, 2010:254).

In summary, sport psychology is commonly defined as an umbrella term that contains a few interrelated tasks which primarily portray the field as academic. An accurate definition of ASP remains indefinable – hence the brief exploration of the education, training, and competencies of ASP practitioners, which is needed to provide an accurate and educational understanding of ASP as well as to resolve the territorial strife about whether sport psychology should be overseen by kinesiology or psychology departments (Sanchez *et al.*, 2005:85; Tod & Lavallee, 2011:197; Ward *et al.*, 2005:330).

2.1.2 Education and training of applied sport psychologists

Sport psychology practice and the processes involved within education and certification vary between countries (McEwan & Tod, 2015:85; Sanchez *et al.*, 2005:82). The education and training of sport psychologists is usually structured according to sport psychology associations and/or educational institutes. For example, education institutions in the United States of America (USA) have well-described vocational programmes educating individuals in the practice of sport psychology, as documented in the Directory of Graduate Programs in APS (Burke, Sachs, Fry & Schweighardt, 2008:3-13). These programmes are aligned with the Association of Applied Sport Psychology (AASP) (formerly known as the Association for the Advancement of Applied Sport Psychology [AAASP] prior to 2006) which prescribes the training competence standards in accordance with the United States Olympic Committee (USOC), and the American Psychology Association (APA). The minimum training requirements within such graduate programmes should encompass coursework on sport psychology subdisciplines; professional ethics and standards; historical, philosophical and social bases of sport; psychopathology and assessment; basic skills in counselling; skills and techniques within sport or exercise; research methodology; biological bases of behaviour; cognitive-affective bases of behaviour; social bases of behaviour; individual behaviour; knowledge of biomechanics and/or physiological of sport in conjunction with 400 hundred hours of mentored experience (AASP, 2015b:para2). Notwithstanding these listed requirements, Van Raalte *et al.* (2000:98) investigation into ASP graduate programmes curricula offered by seventy-nine institutions, revealed that only a few (27%) of the institutions fully adhered to the twelve academic content areas required for AASP-certification, whilst the majority (75%) did not include the necessary courses for certification. Furthermore, these

authors also discovered that there was no congruence on the content offered by the assorted institutions.

As in the USA, there are a range of educational institutions across Europe that offer numerous ASP-related graduate and/or postgraduate courses. For example, at pan-European level, the European Federation of Sport Psychology (FEPSAC) has initiated a European Masters' Programme in Sport and Exercise Psychology (EMPSEP) which is offered by a grouping of thirteen European universities from eleven countries (FEPSAC, 2015:para1). This particular programme is accessible to students with a formal degree in Physical Education, Psychology or Sport Sciences. Wylleman *et al.* (2009:437) commented that the EMPSEP aims to educate highly qualified researchers and professionals who will be instructed in ASP-related topics such as team dynamics, mental skills training, talent development, coaching, and eating disorders.

In the United Kingdom (UK) there are two pathways to formal recognition in sport and exercise psychology namely, as a British Psychology Society (BPS) chartered psychologist, and a British Association for Sport and Exercise Science (BASES) practitioner. The BPS is the representing body for psychology and psychologists and has developed a number of formal postgraduate qualifications (comparable to a doctoral level qualification and level 12 descriptors with the Quality Assurance Agency (QAA) and Scottish Credit and Qualifications Framework respectively) for its members to qualify for Chartered Membership, which includes a Qualification in Sport and Exercise Psychology (QSEP [Stage 2]) (BPS, 2014:2). In order to apply for the QSEP (Stage 2), a candidate must be a graduate member of the society with the Graduate Basis for Chartered Membership (GBC) and would hold a BPS-accredited master's degree in Sport and Exercise Psychology, or would have completed Stage 1 of the BPS QSEP (BPS, 2011b:2). GBC can be applied for if one holds a 2.1 honours degree (a weighted average over the final two years of study ranging between 60%-69.99%) or higher in psychology or sport and exercise psychology from a BPS accredited programme.

Stage 1 of the BPS QSEP (MSc in Sport and Exercise Psychology) consists of a one-year full-time or part-time period of equivalent course work which attempts to broaden the trainees' understanding of the association between psychology and sport. For chartered status, an additional two years (460 days) of an independent post-MSc supervised practice component (QSEP stage 2: research and practice dimensions) alongside a BPS Chartered Member who is also a Full Member of the Division of Sport and Exercise Psychology (DSEP) and is registered on the BPS's Register of Applied Psychology Practice Supervisors (RAPPS) is required to

further develop knowledge and practical competencies specific to professional practice (BPS, 2011b:3). This stage in particular requires trainees to become proficient in a portfolio of key roles underpinned by the BPS Occupational Standards for Applied Sport Psychology as well as the Health and Care Professional Council's (HCPC) published Standards of Proficiency for Practitioner Psychologists (HCPC, 2012:3). These standards include: the practice within legal and ethical boundaries; how to use formal assessment procedures; how to draw on appropriate knowledge and skills to formulate professional judgement, monitor and review on-going effectiveness, and understand concepts relevant to profession-specific practice (HCPC, 2012:7).

In stage two of the BPS qualification, trainees are expected to record all their practice and supervision in a practice diary as well as completing quarterly supervisory meeting records with their coordinating supervisor. The trainees are also required to carry out research and to submit four scientifically grounded case studies of 2500 words each over the two years. Finally, stage two ends with an evaluation of professional competence (supervisory reports, supervisory meeting records, practice diaries, ongoing portfolio and research supervisory report) which is concluded with an oral assessment interview at the BPS's offices in Leicester (BPS, 2011b:5). On successful completion of the programme (stage 1 & 2 = three years minimum), the trainees are eligible to apply to the BPS for chartered status and full membership of the DSEP as well as registration with the HCPC as a Chartered Sport and Exercise Psychologist. By law, one can only practice as a sport and exercise psychologist in the UK if one is registered with the HCPC (BPS, 2011b:5). In view of this, Wylleman *et al.* (2009:438) declared the BPS route to accreditation to be of an arduous nature which is undoubtedly in accord with the training of other regulated psychology divisions such as clinical psychology.

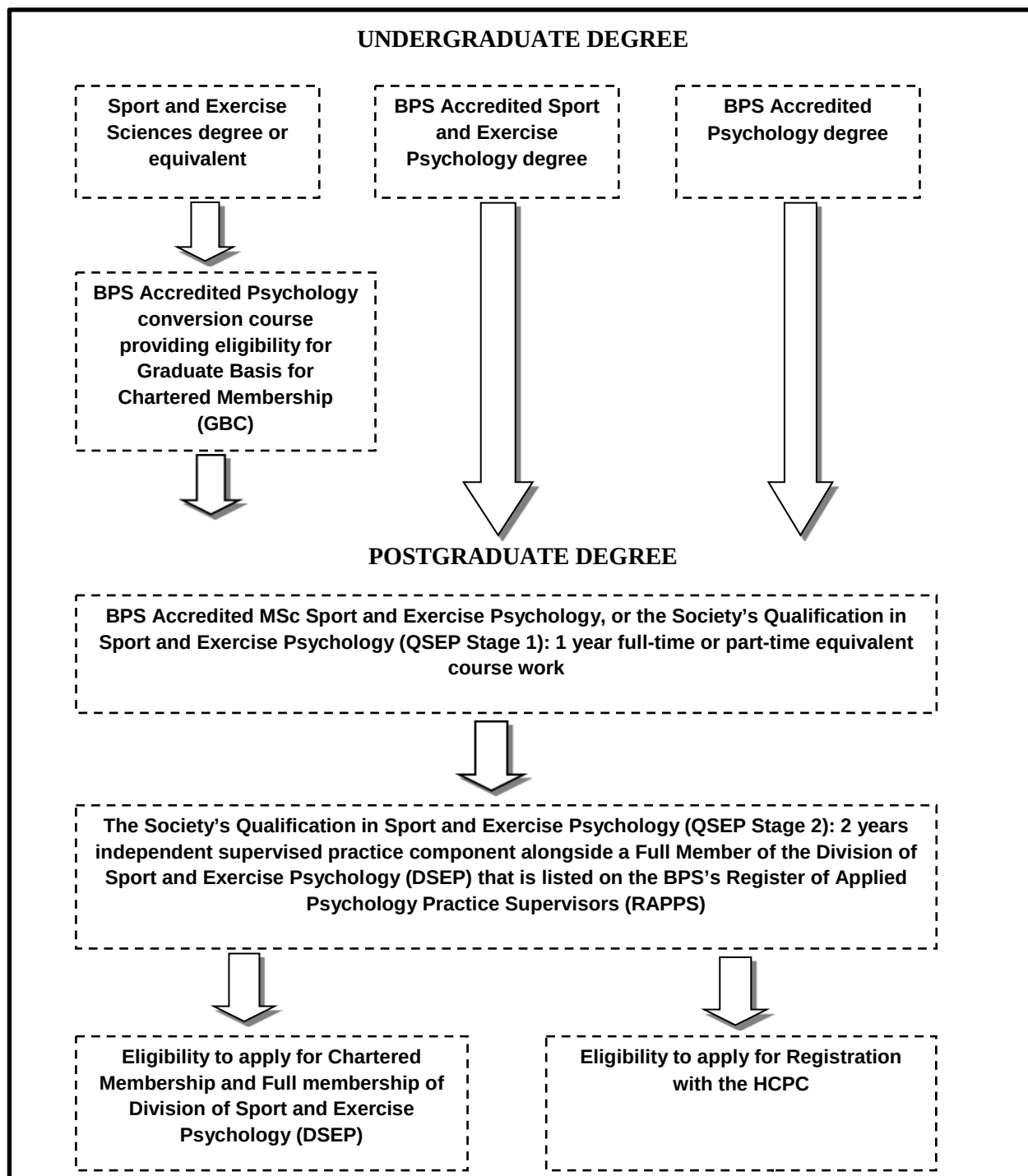


Figure 2.1: Typical route to becoming a BPS Chartered Sport and Exercise Psychologist (Cotterill, 2011:19).

The UK's HCPC regulates 15 types of health professions and has legal authority to protect titles, govern standards, skills and behaviour in seven domain-specific psychologists' titles which include sport and exercise psychology (Cotterill, 2011:18). HCPC registration lasts for a period of two years, after which practitioners can renew their licenses by providing evidence of continuous professional development. Individuals' in higher education institutions who engage in research or hold the title of lecturer/senior lecturer in sport and exercise psychology need not

be on the HCPC's register, while practitioners teaching on BPS accredited Master's programmes in sport and exercise psychology should appear on the register of practitioner psychologists (Cotterill, 2011:19). Cotterill (2011:19) also pointed out that the BPS offers a Chartered Scientist route (CSci) for sport psychologists who are more focused on research than on applied practice.

The British Association for Sport and Exercise Science (BASES) is another professional body which recognises knowledge and expertise in sport-and-exercise-psychology-related careers in the UK such as sport psychology researcher/lecturer in higher education, and/or practitioner/consultant for sport performers and teams (Barker & Winter, 2014:380; Cotterill, 2011:19; Fletcher *et al.*, 2011:366). More specifically, BASES offers a route towards accreditation as an accredited Sport and Exercise Scientist for those practitioners who have studied psychology, or sport and exercise sciences at undergraduate level and who have proceeded to specialise and develop competence in a particular branch of sport sciences such as biomechanics, physiology, psychology, and/or interdisciplinary at an MSc level (Cotterill, 2011:19; Niven & Owens, 2007:21). Thus, BASES accreditation offers 'probationary' professional status for consultants who do not have the desire to practise explicitly as a sport and exercise psychologist. In view of this, Cotterill (2011:19) suggested that BASES accreditation is of particular value to practitioners fulfilling roles within higher education institutions. BASES registration requires candidates to complete a BASES-endorsed undergraduate degree in sport and exercise sciences followed by a master's degree in a sport-and-exercise-related discipline. The master's-degree graduate is then required to fulfil two to six years of supervised experience under the guidance of a discipline-specific BASES registered supervisor. On completion of this route, candidates are eligible to apply for accreditation status which is valid for five years until renewal (Cotterill, 2011:19). The BPS and BASES have no reciprocal arrangement but it is common for BPS chartered members to apply for BASES accreditation (Niven & Owens, 2007:21).

Some countries such as South Africa have no licensing process in place or a professional body that legally recognises a sport and exercise psychologist per se. All the same, the Health Professions Council of South Africa [Psychology Division] (HPCSA) along with the Psychological Society of South Africa (PsySSA) do provide formal representation and regulation for other conventional psychological services involving clinical, counselling, educational, community and social psychological assistance (PsySSA, 2014). In other words there is currently no South African equivalent of the BPS's DSEP or FEPSAC (Whitton, 2011:602). South African tertiary institutions do, however offer modules and courses in sport psychology but not as a

specialized field with its own comprehensive curricula and practical requirements. Consequently, many clinical and counselling psychologists render services as ‘sport and exercise psychologists’ for which they actually have little to no academic training in sport psychology and/or sport sciences (Whitton, 2011:602). The following a table (Table 1) provides a summary of ASP education programmes in various countries.

Table 2.1: Education programmes preparing for ASP practice (Wylleman *et al.*, 2009).

Country	Association	Programme	Level	Right of entry	Duration
Austria	Centre of Mental Excellence-Tirol Platform for applied sport psychology (<i>Tiroler Plattform für angewandte Sportpsychologie</i>) in collaboration with the Austrian network for sport psychology (<i>Österreichisches Bundesnetzwerk für Sportpsychologie</i>) and the Sport Psychology Section of the Austrian Association for Psychology (<i>Section Sportpsychologie des Berufsverbands der Österreichischen Psychologen; B.Ö.P.</i>)	Sport Psychology and Mental Coaching in Competitive Sports (<i>Sportpsychologie und Mentalcoaching im Leistungssport</i>)	Post-graduate	Psychologist, Sport Scientists, Coaches, Medical Doctors.	100h instruction & individual supervision; 100-300h practical
Australia	Australian Psychological Society (APS); Australian	Master of Applied Psychology (Sport Psychology) offered by University of	Graduate to Post-graduate	Honours degree holders in Psychology or equivalent 4-	2 years full-time 32 units from the MAppPsych;

Country	Association	Programme	Level	Right of entry	Duration
	Psychology Accreditation Council (APAC)	Queensland (UQ) and Victoria University (VU)	level	year APAC-accredited programme.	Practicum course with 1000h supervised practice; Thesis (1 year)
		Doctor of Applied Psychology (Sport Psychology) offered by Victoria University (VU).		1 year of AMPS Master of Applied Psychology (Sport Psychology) & competent research ability at doctorate level.	3 years (1500h supervised practice)
Canada	The Canadian Psychological Association (CPA) (<i>Psychologie du sport et de l'exercice physique</i>).	Numerous universities e.g. Master's in Psychology (Specializing in Sport Psychology) offered by College of British Columbia	Postgraduate	Four-year undergraduate university degree in psychology	Master's: 1 year post-master's internship and 3 years' supervised practice; EPPP scaled score of 500; Written jurisprudence; Oral Examination
Germany	German Association of Sport Psychologists (<i>Arbeitsgemeinschaft für Sportpsychologie; asp</i>) in collaboration with the German Association for Psychologists (<i>Berufsverband Deutscher</i>	Sport Psychology in Prevention and Rehabilitation' (<i>Sportpsychologie in Prävention und Rehabilitation</i>) hosted by the University of Freiburg; Sport Psychology in Competitive Sports (<i>Sportpsychologie im Leistungssport</i>) organized by Munich Technical University	Postgraduate supervised training programme		120h Instruction; 30h ASP practitioner observation & case study report

Country	Association	Programme	Level	Right of entry	Duration
	<i>Psychologinnen und Psychologen; BDP)</i>	Master's Programme in ASP offered by University of Halle;			
		The Hochschule Vechta & Private Hochschule für Gesundheit und Sport	Post-graduate	Degree holders in Sport Science or Psychology	120 ECTS credits; 90 ECTS credits
Netherlands	Dutch Society of Sport Psychology (VSPN: <i>Vereniging Sportpsychologie in Nederland</i>) in cooperation with the Vrije Universiteit Amsterdam (VUA)	Post-academic programme for applied sport psychologists (<i>Post academische opleiding tot praktijksportpsycholoog</i>)	Post-graduate	Candidate-students holding a master's or doctoral qualification in Psychology or in Movement Sciences and a minimum of 30 ECTS credits in Sport Psychology as recognized by the VSPN	Instruction & supervised applied work
New Zealand	Sport and Exercise Science New Zealand (SESNZ)	Registration as a Mental Skills Trainer/Sport Psychologist (must be a registered psychologist with the New Zealand Psychological Registration Board)		Candidate-students holding a formal degree qualification in Psychology or in Sport Sciences	400h of experience; 150h of advanced studies specific to mental skills in sport / exercise; Minimum 50h cross-discipline sport science observation; Minimum 100h applied experience including mental skills; Minimum 25h logged

Country	Association	Programme	Level	Right of entry	Duration
					supervision
Switzerland	Swiss Association for Sport Psychology (<i>Schweizerische Arbeitsgemeinschaft für Sportpsychologie; SASP</i>) in cooperation with the Swiss Institute of Sports in Magglingen (<i>Eidg. Hochschule für Sport Magglingen</i>)	Postgraduate Curriculum Sport Psychology (<i>Postgraduales Weiterbildungscurriculum Sportpsychologie</i>) Certificate of Advanced Studies in Psychological and Mental training in Sport (<i>ZFH Psychologisches und mentales Training im Sport</i>)	Post-graduate	Registered Psychologists & Sport Scientists Qualified Sport Scientists, Coaches & Physical Therapists	51 days of instruction (25 credits) & supervision of applied work = 2-4 years to complete 20 days of instruction & 8 days of group learning = 1.5 years to complete
Sweden	Halmstad University	“How to work as an applied sport psychologist” (<i>Att arbeta som idrottspsykologisk rådgivare</i>)		Students with a minimum of 90 ECTS credits in Psychology/Sport Psychology or in Sport Sciences / Sport Psychology	Year 1 = applied case work & courses on the individual athlete (client); Year 2 = applied case work & courses on group & team dynamics

Note. This table provides a paraphrased summary to facilitate basic understanding and comparison of information. For more accurate and comprehensive information, the reader is advised to consult original sources: Austrian Psychological Society (APS); Australian Psychology Accreditation Council (APAC); The Canadian Psychological Association (CPA) (*Psychologie du sport et de l'exercice physique*); Sport and Exercise Science New Zealand (SESNZ).

The tabled information indicates that various ASP programmes, which qualify one to pursue a career in ASP, are offered either by educational institutions or sport psychology associations. Interestingly, the admission requirements into these programmes are very diverse, some

programmes require a primary qualification in psychology; other programmes admit students from sport science, coaching, physical education or even medical backgrounds, whereas admission into other ASP programmes require a formal qualification in both psychology and sport sciences. Furthermore, some programmes emphasize instruction on modules pertinent to applied practices compared to others that place more emphasis on observation and supervised practicals.

In support of Van Raalte and co-authors' (2000:98) findings, it can be concluded that there are no global or, in some cases, even national and interstate standards, for educating and 'credentialing' ASP practitioners. Hence the profession can easily be marred by charlatan practices. This notion is verified by the investigation of Sanchez *et al* (2005:85) on the status of ASP practitioners in the French-speaking part of Belgium, which revealed that, among a sample of 13 ASP practitioners, nine respondents held a university degree (8 in Psychology); four did not have any university degree of which two respondents had training in sophrology, one was a qualified physiotherapist and the remaining one held a military education background. Furthermore, these authors revealed that, of the thirteen practitioners interviewed, only one would have the right to be officially recognized as a sport psychologist under the traditional standards of the AASP, BPS or APA (Sanchez *et al.*, 2005:85).

In most acceptable cases, ASP practitioners have graduated with a major in sport psychology albeit in different academic departments. This occurrence was reported in Meyers *et al.* (2001:5) survey of 433 AAASP and/or APA Division 47 (Exercise and Sport Psychology) members, which revealed that 20 percent of sport scientists, 87 percent of clinical and 81 percent of counselling psychologists were primarily engaged in sport psychology service delivery.

Another question arising from the above, in addition to "What does the practice of sport psychology entail?" is "Who is the most competent to provide ASP services?" The following section addresses these questions with an overview provided on the perceptions of developing ASP practitioners after training, and identification of the preferences of their clientele in order to comment further on the appropriate educational curricula for ASP practitioners.

2.1.3 Neophyte ASP practitioners' views on professional practice

Although the field of ASP has witnessed a growth in research on the educational background of ASP practitioners (Anderson & Williams, 1997:326; Williams & Scherzer, 2003:335; Wylleman

et al., 2009:435), it has also directed the focus to practitioners' perceptions on training and supervision (Owton *et al.*, 2014:241; Tonn & Harmison, 2004:324; Watson *et al.*, 2004:415). Commenting on these perceptions, Tod and Lavalley (2011:197) expressed their concerns about the inadequacy of current training and supervisory practices in preparing students for ASP careers. These authors argue that too many ASP training programmes are based in Kinesiology departments, which focus predominantly on psychological skills training (PST) models for the purpose of performance enhancement rather than on process-orientated issues involved in counselling, such as meeting athletes' individual needs in a modern society. These arguments are based on reports of various longitudinal examinations and narrative accounts of developing sport and exercise psychologists' career development and philosophies for practice (Collins *et al.*, 2013:399; Tod *et al.*, 2009:S1; Tod & Bond, 2010:35). For example, Tod and Bond's (2010) two-year examination of a British neophyte sport psychologist in private practice pointed out that the consultant's initial problem-solving structured approach became more collaborative and humanistic as her experiential learning made her more cognisant of the clients' (athletes') unique needs and preferences. When the consultant was asked why she altered her approach, she replied:

“It's linked into the confidence . . . getting to know them [clients] more as people and more understanding about their needs and understanding the demands that are being placed upon them by the club, by their schools, by their families” (Tod & Bond, 2010:42).

A similar investigation involving eight Australian neophyte sport psychologists indicated that their rigid 'fix all' approach to service delivery also developed into a facilitative role that focused on athlete growth and wellbeing; as illustrated by the following quote:

“It's much less about me (directing service delivery) and more about the clients in that they direct therapy” (Tod *et al.*, 2009:S7).

A more recent investigation that analysed the auto-ethnographical accounts of three UK neophyte sport and exercise psychologists revealed that their path to applied sport psychology strongly demanded a client-oriented approach which emanates from a psychological perspective as opposed to an athletic (sport science) perspective (Collins *et al.*, 2013:399).

Supportive statements such as:

“My focus on the use of mental skills training had not prepared me for what lies ahead”;
“I hadn't had the opportunity to work on these core therapeutic skills”; and

“I have now realized that mental skills training is just the very tip of the complex dynamics involved in working with clients (athletes) and their issues”

(Collins *et al.*, 2013:401), encourage one to acknowledge the inadequacy of current sport and exercise psychology programmes in the education and training of ASP practitioners. These results partially oppose the views of ASP practitioners that were documented in Wylleman *et al.* (1999:103) investigation into the status of sport psychology in Flanders. Despite the majority of the practitioners coming from a clinical psychology and industrial psychology education background, they still indicated an explicit need for formalized sport psychology training as part of psychologists’ education that should be inclusive of courses on theoretical and methodological aspects of SP (56%), counselling and intervention strategies in a sport setting (39%), sport sciences (28%), sport management (11%), and sport-specific diagnostic instruments and tests (11%) (Wylleman *et al.*, 1999:103). In addition to the latter, thematical content analysis of interviews held with graduates (N=16) and teaching staff (N=11) of Australian master’s-of-applied-psychology programmes revealed that learning activities that involve practising service delivery (for example, supervised placements and role play), reviewing research literature and theoretical models, social interactions amongst trainees, and specific events outside of training before and during enrolment were perceived to be contributory to service-delivery competence (Tod *et al.*, 2007:329).

Another investigation that examined a UK sample (N=7) of postgraduate students’ experiences of ASP practice and training over a period of six months (before, during, and after their ASP module) highlighted the pivotal role of live demonstrations, learning from experience with clients, and interactions with clients, peers, supervisors, and guest speakers in the development of ASP students (Owton *et al.*, 2014:249). In line with this research, McEwan and Tod (2015:81) explored the perceived learning experiences relevant to service delivery competence of sport, clinical and counselling psychologists (N=20) in an attempt to establish common ground that could optimise education and training for sport psychologists. Like Tod *et al* (2007) and Owton *et al* (2014), these authors discovered that active engagement with clients, peer interaction, personal therapy or personal development groups, and continued supervision were highly valuable in developing service delivery competence (McEwan & Tod, 2015:91). However, unlike counselling and clinical psychologists, sport psychologists are not exposed to either long-term access or a variety of client cases in their supervised training to teach them the necessary relationship-building (person-centred) skills, or to flexibility in their approach. Another argument was that sport psychologists are currently being trained in an “individualistic and

idiosyncratic” manner (for example, restricted to one supervisor’s point of view), which limits their opportunities for experiential and reflective learning (McEwan & Tod, 2015:91) – hence the advice of these authors that sport psychology training programmes should create more diverse client consulting and peer networking opportunities while in training – together with continuous supervision from various supervisors throughout training (McEwan & Tod, 2015:91). Andersen *et al.* (2000:138) supported the importance of supervision, claiming that it enables both graduate trainees and professionals in peer consultation to become cognisant of the influences of their own personalities and needs when working with athlete-clients as well as of their missteps and their resistance to change.

Drawing on the information of the cited literature, it may be concluded that SP graduates are not fully equipped with the needed skills-set or theoretical underpinning to apply sport psychology in contemporary times. Despite the suggested value of formalised sport psychology training programmes in the education of ASP practitioners, it remains evident that neophyte sport psychology practitioners are not adequately trained/prepared for consulting services that extend beyond a sport science approach and that such skills are left merely to chance.

This notion is corroborated by the views of Portenga *et al.* (2011:19) who argued that the wide variety in training models causes graduates to be inadequately prepared for professional practice and they are consequently forced to rely on experience to develop professional skills and abilities. To counteract this situation, the training and supervisory practice of sport psychologists should be placed under the tutelage of mainstream psychology departments and professional bodies to ensure that graduates can cater for athletes individual needs (Tod & Lavallee, 2011:209). Aoyagi *et al.* (2012:34) stated the common appeal of interdisciplinary involvement on the part of both kinesiology and psychology departments. Even so, Portenga *et al.* (2011:20) supported Tod and Lavallee’s view to a certain extent but added that the focus should no longer be on “the kinesiology or psychology department debate” but rather on the required knowledge and training relevant to the profession such as psychology of performance, consulting, and ethics. Buttressing this notion was the reasoning that competency in practice merits special consideration of and emphasis on professional certification instead of an overreliance on academic knowledge/coursework (Portenga, 2014:215).

A conclusive review drawn from the 2013 FEPSAC’s International Conference (The Development of Expertise and Excellence in Applied Sport Psychology) reported that, despite the ASP practitioners’ educational background, the commitment to interdisciplinary research

remained a strong reason for the why and how of practice, along with self-awareness, self-reflection, and knowledge of ethical boundaries which are key points in the education and professional development of ASP practitioners (Meijen & Adams, 2014:105).

In consideration of the above, further enquiry into the suitability of education and training programmes in ASP or the skills-set needed by consultants could be answered with a review of the literature on the competencies associated with effective sport psychology practices.

2.1.4 Competencies in applied sport psychology

A definition which captures the fundamental nature of competence, explains that it is “the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served” (Epstein & Hundert, 2002:227). By and large, competence in psychology construes the integrative values that underpin service delivery in professional practice (Barnett *et al.*, 2007:510). Rubin *et al.* (2007:453) asserted that competence or competencies are visible, learnable and measurable whole-person qualities that are delineated by particularity, generality, external validity, verifiability, and parsimony – thus, implying a person’s overall suitability to perform a role or activity in a context-specific environment, based on the integration of a particular skills-set, knowledge and attitude (Cremades *et al.*, 2014:7). A recent investigation which signalled a competency-based understanding of the training and development of applied sport psychologists verified the point that competence in ASP is an integration of discrete qualities that reflects a high level of contextual intelligence or practical know-how (Fletcher & Maher, 2013:267). This particular investigation also claimed that competence is developmental and contextual to situation specific phenomena, which makes it imperative that practitioners acquire a minimum cluster of competencies in order to consistently practise in a safe and effective manner (Fletcher & Maher, 2013:267).

Expanding on this, Tenenbaum and his colleagues (2003:155) published a position stand on competencies and their accomplishment in sport and exercise psychology in support of the International Society of Sport Psychology (ISSP) Managing Council. The competencies were made up of interactive categories which included the scientist-practitioners’ approach which emphasized knowledge-based standards, practice standards, and supervised experience standards. Regardless of the authors’ contribution to the advancement in the conceptualization of competence in ASP, it remains inconclusive and uncertain since most of their conceptualization

was based on the subjective experiences of a few professionals (assumed to be their own) in the field (Tenenbaum *et al.*, 2003:156).

Currently the AASP (2015b) certification requirements are set on a certain number of theoretical courses and a monitored practicum. Despite the AASP's contribution to the establishment of ASP as a profession, its theoretical orientation does entail some deficiencies. Fletcher and Maher (2013:268) noted that the AASP certification criteria (together with the APA Division 47) fail to include essential ASP competencies (such as reflective practice and self-care) which are strongly supported by recent literature in ASP. Aoyagi *et al* (2012:35) added that the AASP's certification process also fails to distinguish performance-based work from therapeutically based work with athlete-clients. Moreover, the basis of AASP certification is predominantly structured around proficiency in coursework and the argument runs that the mere 400 hours practicum experience required for trainees is far below the licensure requirements of other psychological specializations (Portenga, 2014:215). Portenga's (2014:216) comment on this and points out that existing AASP certification (programmes) fulfils only four of the 21 standards for professional certification and licensure as imposed by America's National Commission for Certifying Agencies (NCCA).

In 2005 the APA division 47 published a sport psychology self-assessment checklist which measures three areas of proficiency (specialized knowledge, knowledge of persons and groups, and skills) to foster the evaluation of practitioners' skills and knowledge against a set criterion (APA, 2005). Fletcher and Maher (2013:270), together with Aoyagi *et al.* (Aoyagi *et al.*, 2012:34), reported that the APA Division 47 proficiency criteria were based on the AASP certification criteria, resulting in a sharing of share similar deficiencies. Fletcher and Maher (2013:270) also pointed out that the APA Division 47 lacks more objective and sophisticated methods of professional competence assessment such as oral examinations, decision-tree analysis, and 360° evaluations; all of which are essential in conjunction with trainee's self-ratings.

It is worth noting that BPS has outlined competencies in four key roles of practice, which are common to all practising psychologists. These key roles, inclusive of descriptors, form the basis of professional development requirements and the subsequent supervised practice in sport and exercise psychology which are to be maintained throughout professional life (BPS, 2011a:14).

Table 2.2: An overview of sport psychology associations' documentation on competencies in ASP (cf. and adapted from Fletcher & Maher, 2013:269)

ISSP competencies position stand (Tenenbaum <i>et al.</i>, 2003)	APA Division 47 Self-Assessment Checklist (APA, 2005)	AASP certification criteria (AASP, 2015b)	BPS Qualification in Sport and Exercise Psychology (BPS, 2011a)
Knowledge-based topics:	Specialized knowledge:	Course of study/ theoretical components:	Key Role 1: Develop, implement and maintain personal and professional standards and ethical practice:
A1 Theories: General psychology, Sport psychology, Theories in motor, physical, and kinesiology domains, Related domains.	Theory and research Principles and practices including psychological assessment and mental skills training. Clinical and counselling issues.	Professional ethics and standards. Sport psychology. Biomechanical and/or physiological bases of sport. Historical, philosophical, social, or motor behavior bases of sport.	Establish, maintain and develop systems for legal, ethical and professional standards in applied psychology. Contribute to the continuing development of self as a professional applied psychologist.
A2 Research/Scientific tools: Research designs, Methodological principles, Statistics.	Organizational and systemic aspects. Developmental and social issues. Biobehavioural bases.	Psychopathology and assessment. Counselling skills. Skills/techniques/analysis within sport or exercise and related experiences such as coaching.	Respond to unpredictable contexts and events professionally and ethically.
A3 Measurement, assessment, and interpretation: Theoretical, Practical (sport specific).		Research design, statistics, and psychological assessment. Biological bases of behaviour. Cognitive-affective bases of behaviour.	
A4 Ethical tools.		Social bases of behaviour. Individual behaviour.	
Practical-base techniques:	Knowledge of persons and groups:	Mentorship evaluation areas:	Key Role 2: Apply psychological and related methods, concepts, models, theories and knowledge derived from reproducible findings:
B1 Interventions: Performance- enhancement techniques, Personal development skills techniques, Critical interventions, Organizational interventions.	Youth/junior, high school, intercollegiate, professional, masters/senior, injured, elite, recreational, disability, athletes others (e.g. families, coaches, administrators, officials).	Ability to build a trusting consulting relationship. Structuring applied work in a collaborative environment/setting. Ability to define clients' strengths and weaknesses and solve performance issues.	Assess requests for consultancy. Plan consultancy.
B2 Communications:		Seeking assistance when needed and provide	Establish, develop and maintain working

ISSP competencies position stand (Tenenbaum <i>et al.</i>, 2003)	APA Division 47 Self-Assessment Checklist (APA, 2005)	AASP certification criteria (AASP, 2015b)	BPS Qualification in Sport and Exercise Psychology (BPS, 2011a)
Communication skills (verbal and non-verbal) Supervised experience.	Skills Psychological skills training. Cognitive-behavioural self-regulation techniques. Clinical issues. Group and interpersonal dynamics training. Outcome-focused interventions.	feedback. Integrating theory and practice. Demonstrating sensitivity to ethical and legal standards. Evaluation of overall performance.	relationships with clients. Conduct consultancy. Monitor the implementation of consultancy. Evaluate the impact of consultancy. Key Role 3: Research and develop new and existing psychological methods, concepts, models, theories and instruments in psychology: Conduct systematic review. Design psychological research activities. Conduct psychological research activities. Analyze and evaluate psychological research data. Initiate and develop original psychological research. Key Role 4: Communicate psychological knowledge, principles, methods, needs and policy requirements. Promote psychological principles, services and benefits. Provide psychological

ISSP competencies position stand (Tenenbaum <i>et al.</i>, 2003)	APA Division 47 Self-Assessment Checklist (APA, 2005)	AASP certification criteria (AASP, 2015b)	BPS Qualification in Sport and Exercise Psychology (BPS, 2011a)
			advice and guidance to others and facilitate the use of psychological services. Communicate the processes and outcomes of psychological and other applications and developments. Prepare and present evidence in formal settings. Provide feedback to clients.

Although enquiry into assessing the nature of effective ASP services was recorded nearly three decades ago (Gould *et al.*, 1991:111; Partington & Orlick, 1987:95), few studies have attempted to discover the unique competencies associated with effective ASP practices. One such study performed by Ward *et al.* (2005:318) requested a group of 20 US expert clinical sport psychologists to identify the most essential competencies from a set of 33 athlete-counselling competency statements (a mixture of 26 athlete-counselling statements and 7 validity counselling statements). Seventeen competencies statements most relevant to athlete-counselling emerged, which were then grouped into attitudes/beliefs, skills, or knowledge categories. Analyses indicated that consultants rated competencies with an underlying theme of “counselling awareness and sensitivity within sport culture” as most essential. It was concluded that the perceived essential competencies (such as “sport psychologists are aware of their values and biases as they relate to athletes and the sport environment”) are related to the ethical treatment of athlete clients. The less essential competencies related more to information which is valuable to psychologists working with athletes - yet play an indirect, secondary role to the counselling behaviour of psychologists (Ward *et al.*, 2005:329).

Similarly, advanced knowledge of ethics on the part of ASP practitioners was also noted as a key competence, depending on the nature of context (that is boundary crossing, multiple roles, performance environment, and confidentiality challenges) in which sport psychology is practised

(Aoyagi & Portenga, 2010:253; Portenga *et al.*, 2011:22). Elaborating on the study of Ward and colleagues (2005), Poczwadowski and Sherman (2011:511) conducted semi-structured interviews with ten experienced sport psychology consultants to explore the relevance of a prevailing sport psychology service delivery heuristic (Poczwadowski *et al.*, 1998:191) in current professional practices. Analyses of the consultants' responses revealed that the consultant-client relationship, along with other elements such as consultant and client variables, immersion, and the "goodness of fit", were noted as essential contributors to successful contemporary professional practice. A further observation was that person-focused values were interwoven into all structural elements of the revised heuristic (Poczwadowski & Sherman, 2011:528). More recently, researchers have also investigated the essential characteristics of practitioners in association with effective athlete service delivery. For example, Sharp and Hodge (2011) documented the views on consulting effectiveness amongst a group (N=13) of New Zealand sport psychology consultants. The analyses of the interviews indicated the ability to build a connection, the ability to establish a collaborative professional consulting relationship, and being able to meet the athlete-client's individual needs as the most essential characteristics for effective practice (Sharp & Hodge, 2011:364). Moreover, the collective views of ten sport psychology consultants with considerable experience of consulting at the highest sporting-events levels such as the Olympic Games, World Championships, World Cups, and the European Championship, have indicated that a collaborative consultant-athlete relationship, fitting in without being in the way, consistent counselling behaviour, and close collaboration with the coaches are essential signs of effective service delivery at pinnacle sporting events (Sharp *et al.*, 2014:75).

With this in mind, Vealey (1994:495) suggested that athletes' views on sport psychology services should also be evaluated in determining effective practice. An assessment of athlete-clients' perceptions of sport psychologist's effectiveness revealed that the most desirable sport-psychologist characteristics were being the following: personable, a good communicator, a provider of good practical service, knowledgeable of sport and exercise psychology, honest and trustworthy, and able to demonstrate professional skills (Anderson *et al.*, 2004b:263-264). Lubker *et al.* (2008:160) added that American college athletes valued SPs who possess positive interpersonal skills (friendliness, approachability, trustworthiness, and the capacity to maintain confidentiality), that can relate to them as athletes (for example, in the course of gender and sport experiences), in addition to having had the appropriate and necessary training and certification. This notion of results is supported by a more recent study (consumer market analysis) that was conducted on college student athletes' (N=464) preferred characteristics and qualifications of

sport psychology consultants (Lubker *et al.*, 2012:465). In addition to the latter, the recent study also indicated an athlete preference for a female practitioner whose ethnicity is the same as that of the athlete, together with a physically fit body type (Lubker *et al.*, 2012:471).

Corresponding to this, inductive content analyses of semi-structured interviews with nine elite New Zealand athletes representing various sports (for example, cricket, rugby, swimming, triathlon, dressage, and wheelchair rugby) on their views on effective sport psychology consulting have underscored the following emergent categories and concepts:

- *being friendly but not a friend*: consultants who are personable, non-intrusive, set clear boundaries, and able to establish a strong bond with the client;
- *sport psychology consulting experience*: consultants who have a good understanding of the best applied sport psychology practice;
- *athlete-centred consulting style*: consultants who focus on the athlete's individual needs, and provide the athlete with a sense of empowerment and independence (Sharp & Hodge, 2014:95).

Additionally, the views of 118 university athletes (N=106) and coaches (N=12) from six varsity sports indicated that "fitting in with team", "having useful knowledge", and "being easy for athletes to relate to" have correlated with the highest with perceived sport psychology consultants effectiveness (Gentner *et al.*, 2004:215).

Notwithstanding the above, and with particular reference to the ASP practitioners' educational background, it is however worth mentioning that, except for the use of positive interpersonal skills, Linder *et al.* (1991:145) together with Hankes (1996) (cited in Martin *et al.* (2001:22), found that sport psychology consultants' educational background or athletic experience had no, or very little, influence on athletes' perceptions about sport psychology consultants.

On the contrary, it is important to note that the above findings concentrate on research that focused on Western world athlete populations and that different preferences for consultants from non-Western athlete populations may exist. This view was recently verified in an investigation into the preferences for consultant characteristics amongst elite Malaysian athletes (N=217) which revealed that athletes favour sport psychology consultants who have prior experience as a coach or athlete, as well as formal training in psychology (Ponnusamy & Grove, 2014:640). Moreover, sport psychology consultants' ability to lead a physically active lifestyle, and teach mental skills was more sought after than their ability to consider the athletes' personal welfare,

or being of the same sex (Ponnusamy & Grove, 2014:640). Interestingly, this study further emphasized the culturally-bound influence (such as the collectivist and hierarchical stance prevalent amongst Asian athletes) on service delivery preferences by revealing that athletes demonstrated a weak desire for any involvement in the program content and preferred it to be determined by the consultant or coach (Ponnusamy & Grove, 2014:642). The latter is in contrast to the athlete-centred consulting style desired by Western athletes (Sharp & Hodge, 2014:95). However more studies utilizing similar protocols should be conducted with non-Western society athletes to advance the global understanding of effective sport psychology service delivery from an athlete's perspective. Nonetheless athletes' views on effective sport psychology service delivery may perhaps be assumed to be strongly or weakly influenced by cultural considerations that exist amongst Western and non-Western athlete populations.

Apart from the views of the athletes, the independent views of coaches are also deemed important when conceptualizing ASP practitioner effectiveness: an investigation of the perceptions of sport psychology consultants among a sample of NCAA Division 1 coaches indicated a general preference for sport psychologists who can communicate effectively with a team and individual athletes; who possess good relational skills such as gaining trust, being approachable and empathetic, being a tool in skill development and performance; and who are experienced in both the sport and the application of sport psychology (Zakrajsek *et al.*, 2013:262). In line with this, semi-structured interviews with youth coaches in the United Kingdom on their expectations of sport psychology consultants, revealed a preference for consultants who can interact effectively with the athletes and build quality relationships in addition to keeping athlete matters confidential (Barker & Winter, 2014:385). On a negative note, the coaches reported developing ominous feelings towards sport psychology consultants who put their own interests first – to the detriment of the athletes (Barker & Winter, 2014:386).

With the noted evidence on the significance of a strong consulting relationship in effective ASP practices (Anderson *et al.*, 2004b:262; Lubker *et al.*, 2008:160; Sharp & Hodge, 2011:360; Sharp *et al.*, 2014:75) in mind, Sharp and Hodge (2013) endeavoured to discover the components needed in developing an effective consulting relationship. In their investigation into two sport psychology consultant-coach consulting relationship case studies, three categories, common to both case studies, emerged as most important between consultants and coaches namely; “consultants’ knowledge of psychological theories and techniques”, “ability to develop a good knowledge and understanding of client needs, “friendship”, and “trust”. Furthermore, “consultants’ fitting in with the team culture” and “flexibility” were additionally categories

reported from individual case studies (Sharp & Hodge, 2013:313). These categories are consistent with the four categories (1. flexibility in the relationship; 2. openness, honesty and respect in the relationship; 3. contribution from both the sport psychology consultant and athlete to the consulting relationship; and 4. allowing the athlete to be an active participant in the consulting relationship) that emerged from the analysis of elite athletes' perspectives regarding a practitioner's qualities necessary for developing effective consulting relationships (Sharp & Hodge, 2014:96). Running in tandem with this is the argument that the future of expert training for professional competence in ASP should maintain a strong focus on theoretical base that underpins the core values, beliefs and personal qualities (such as integrity and trust) of practitioners since it significantly dictates the quality of therapy (Eubank & Hudson, 2013:65).

The above comments give rise to the notion that effective sport psychology practices are commonly associated with a rather humanistic client-centred counselling approach that provides the athletes with a secure environment which enables them to express their unique needs and issues. Common characteristics that repeatedly surfaced as essential to ASP, besides sport-related knowledge, were the consultant's ability to establish a collaborative relationship (Gentner *et al.*, 2004:215; Poczwadowski & Sherman, 2011:528; Sharp & Hodge, 2011:364), trustworthiness (Anderson *et al.*, 2004b:263-264; Lubker *et al.*, 2008:160; Sharp & Hodge, 2013:313; Zakrajsek *et al.*, 2013:262), an athlete-centred consulting style (Sharp & Hodge, 2014:95), a personable demeanour (Anderson *et al.*, 2004b:263-264) and empathy (Zakrajsek *et al.*, 2013:262). The personal accounts of developing sport psychology consultants listed on pages 15 to 17 of this document also attest the fact that their athlete-clients' individual needs and preferences constrained them to adopt a client-oriented approach in their practices (Collins *et al.*, 2013:399; Tod *et al.*, 2009:S7; Tod & Bond, 2010:42). In line with this, Poczwadowski and Sherman (2011:528), in their most recent sport psychology service delivery (SPSD) heuristic, also indicated the interrelatedness of person-focused values in all structural elements of contemporary sport psychology practice. It is safe to assume, then, that these provide a reasonable basis for Tod and Lavalley's (2011:197) proposition for sport psychology to be hosted within psychological departments. Essentially, the relationship between consultants and clients, in conjunction with meeting athlete-clients' individual needs, appears to be the primary factor which consistently aids in establishing productive therapeutic processes (Friesen & Orlick, 2010:240; Gentner *et al.*, 2004:215; Petitpas *et al.*, 1999:344; Sexton & Whiston, 1994:7; Tod & Andersen, 2005:309). In support of this argument, the next section will outline a theoretical framework for person-centred (PC) counselling – to demonstrate its relevance in modern-day sport psychology service delivery.

2.2 Person-centred counselling

2.2.1 A theoretical framework

Person-centred (PC) counselling (initially referred to as nondirective therapy or client-centred counselling) emanated from the work of the humanist psychologist Dr Carl Rogers (1902 – 1987). Rogers's approach to psychotherapy was based on the personal nature of the therapist and the value of the therapeutic relationship with the client. The PC approach is robustly rooted in humanistic philosophy, which relies on people's self-actualizing capability for therapeutic change, given the proper environment. The quintessential objective of this counselling approach is to establish a supportive therapeutic climate which permits self-healing and personal growth within the client (Africa, 2011:489).

Rogers's (1957) approach to psychotherapy and counselling was considered controversial and extremely radical in comparison with the deterministic nature of Psychoanalysis and Behaviourism in American Psychology (Casemore, 2011:4). Unlike these approaches, the PC approach values the nature of the therapeutic relationship in which the client, instead of the therapist, directs the process of therapy (Rogers, 1952:345). Rogers explained this by saying that the client is the expert of their own distress and should therefore be the mechanism that directs the process of healing. Rogers (1957:97) believed that distress in a client is the result of an incongruent state, which he referred to as a discrepancy in the client's actual experience of reality and their self-concept. Anxiety and disorientation are caused when the client is unaware of incongruence in himself. Africa (2011:489) explained that, in such a situation the client will employ various self-defence mechanisms to protect the self from the felt vulnerability or tension state which, according to Rogers is maladaptive, since these are mere attempts to protect the client's distorted self-concept. Rogers (1957:97) proposed that a supportive environment within a PC approach would help individual clients to become aware of the elements of their experience in relation to their self-concept. As an example, consider the case of John, the goal kicker of the national rugby team, who is struggling with his kicking accuracy at critical times in matches. While John believes that he is a resilient rugby player who is coping well with the demands of rugby at international level, negative feedback from the public or selectors as well as the results of poor kicking performances at international level, may result in anxiety. Africa (2011:489) explains that, when this happens, someone like John might employ defence mechanisms or attempt to distort reality to deal with the anxiety – hence, inadvertently preventing him from reaching his potential. She proceeds to explain that facilitative conditions within the PC approach will help one to formulate a self-concept that is essentially more realistic. In other

words, the therapeutic climate will enable him (John) to discover and incorporate feelings that are more harmonious (congruent) – feelings which initially evaded his perception.

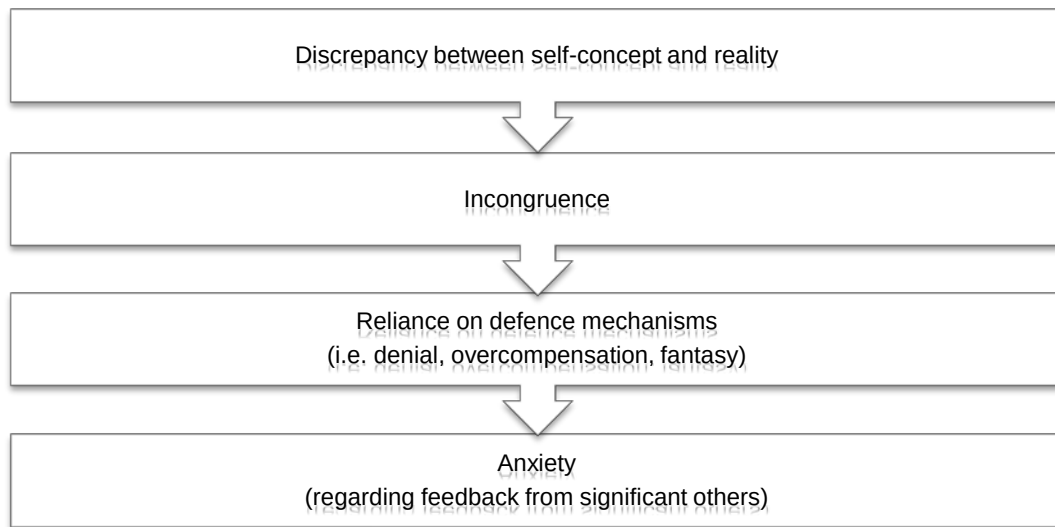


Figure 2.2: The person-centred view of psychological distress (Africa, 2011:489).

2.2.2 Therapeutic environment

Rogers (1979:98) believed that each individual has the inherited potential for self-understanding and constructive personality change under a definable atmosphere of facilitative psychological attitudes. Rogers's own clinical experiences, research and observations led to the notion that constructive personality change is dependent on six indispensable conditions, namely psychological contact between two persons; a client who is incongruent, vulnerable or anxious; a therapist who is congruent or integrated in the relationship; an unconditional positive regard towards the client; empathetic understanding of the client's internal frame of reference; and a communication of the therapists' empathetic understanding and unconditional acceptance of the client (Rogers, 1957:96). Of the six facilitative conditions; therapist congruence, empathic understanding, and unconditional positive regard evoked the most research interest. Keeping in mind their relevance to this thesis, these three therapists' qualities will be highlighted and discussed in greater detail.

2.2.2.1 Congruence

Rogers (1957:95) explained that congruence within the confines of the relationship signifies individual counsellors' awareness of themselves, which allows a genuine, wholehearted and

honest expression of the actual experiences held in the moment of time with the client. The counsellors' reactions are therefore consistent with their inner thoughts and feelings, which develops a sense of authenticity. The assessment of Collins *et al.* (2013:399) was that authenticity can be expected when counsellors adopt a therapeutic framework that is underpinned by their personal practice philosophy. Nonetheless, Africa's (2011:490) understanding maintained that the counsellor must acknowledge and express certain feelings regarding the client, while showing utmost respect for the client's feelings in order to promote honesty in communication. Petitpas *et al.* (1999:348) added that the challenge for the counsellors is to make sure that their own needs do not interfere with or gain preference over the client's unique needs and concerns. An example of this behaviour is evident in Dr Rogers's steno-typed testimony regarding his own doings that was recorded at the American Association of Marriage Counsellors' annual meeting on May 23, 1952:

“I let myself go into the immediacy of the relationship where it is my total organism which takes over and is sensitive to the relationship, not simply my consciousness. I am not consciously responding in a planful, or analytic way, but simply react in an unreflective way to the other individual, my reaction being based, (but not consciously) on my total organismic sensitivity to this other person.” (Rogers, 1952:343).

The extract reflects Rogers's non-directional emergence into the client's subjective world without a desire to fit it into a preconceived notion of reality. The communication of realness, honesty and openness by the counsellor has proven to be critical in establishing a collaborative working relationship between counsellor and client in both sport and counselling psychology (Rivera *et al.*, 2006:43; Sharp & Hodge, 2014:96).

2.2.2.2 Empathetic understanding

The second facilitative condition that received considerable research attention is the counsellor's ability to demonstrate an empathetic understanding of the client's experience. Rogers (1980:85) defined empathy as the “therapist's sensitive ability and willingness to understand the client's thoughts, feelings, and struggles from the client's point of view”. Grobler *et al.* (2003:48) used the Pedi idiom “mollo ofisa baori” which means that ‘only the person exposed to the fire can tell how hot it is’ to portray the need for the counsellor to adopt the frame of reference of the client in order to experience their inner world. Therefore, empathy is the ability to see and experience the world from the client's frame of reference. A felt sense of the client's inner world enables counsellors to communicate their understanding of the client's subjective experiences and make

inferences about the client's experiences, which the client is not fully aware of. An excerpt from a conversation with a client after a series of fifteen sessions with a PC counsellor revealed testimony of the counsellor's empathy:

"It was the role of the counsellor to bring me to myself, to help me by being with me in everything I said, to realize what I was saying ... he was right along with me in my thinking because he would say to me things which I had stated but he would clear them for me, bring me back to earth, help me see what I had said and what it meant to me" (Rogers, 1949:90).

Petitpas *et al.* (1999:349) pointed out that a counsellor's demonstration of empathy is grounded on effective communication skills, whether they are in the form of verbal or non-verbal communication. These authors proceeded to suggest that reflective-type verbal responses tend to be more effective in developing empathy and a trusting relationship. Petitpas *et al.* (1999:350) went on to use the following example to demonstrate a reflective verbal response by a PC counsellor: Consider an athlete who lacks confidence after sustaining an injury:

Athlete: "I am just not the same person I was last season. I continue to work hard, but sometimes I feel like it is all so useless. I am just not getting any better".

Counsellor: "Sounds like you think your hard work is not worth it" or "It seems that you are feeling hopeless about your game right now".

Empathy is therefore a skill that requires significant awareness, concentration and communication to accurately communicate the client's experiences. If the counsellor's own values interfere or communication contradicts the client's frame of reference, the client could react in a resistant or defensive manner which will get in the way of restructuring the self (Grobler *et al.*, 2003:155).

2.2.2.3 Unconditional positive regard

When a therapist/counsellor unreservedly accepts all the client's experiences at a particular moment in time, then the counsellor is experiencing unconditional positive regard. Rogers (1957:98) explained that unconditional positive regard occurs when a counsellor imparts care to the client, regardless of the client's individual experiences and feelings. In other words, there are no 'ifs', 'buts' or 'not reallys' when accepting the client, no matter what the presenting behaviours. McLeod (2008:3) proposed that the counsellor does not have to approve the client's

actions but needs to demonstrate an attitude of “I’ll accept you as you are”. Therefore, the notion of unconditional acceptance by a counsellor is that individual clients will grow and fulfil their potential when they are truly valued as persons of worth.

The intuitive appeal of the above is that the PC counsellor is not restricted or guided by theory but rather characterised as a way of being. This unorthodox counselling approach holds a very positive and optimistic view of human nature that is underpinned by an utmost respect for the client and a value of their self-worth. The PC counsellor trusts that the client knows best and, with the appropriate provision of facilitative circumstances, the clients’ self-concept will actualize in accordance with their organismic valuing process (Patterson & Joseph, 2007:120) which resonates with Rogers’s idea of therapeutic change.

2.3 Person-centred approaches in contemporary applied sport psychology

Similar to Rogers’ PC therapy, an athlete-centred approach in sport counselling will value athlete-clients in a positivistic way believing in their self-actualising tendency to optimize decision making and functionality. An athlete-centred approach will therefore not only attempt to enforce a knowledge-based, theoretic problem-centred judgement which focuses on performance enhancement, but rather a humanistic counselling approach that is aimed at the optimisation of the whole person. Despite the uniformity of the majority of ASP textbooks which emphasize mental skills approaches, there is however, a strong and long standing support for a client-centred approach in sport psychology (Collins *et al.*, 2013:399; Corlett, 1996:84; Fifer *et al.*, 2008:357; Petitpas *et al.*, 1999:346). In support of this, Bond (2002:23) together with Taylor (2008:162) argued that being an athlete is secondary to being a person; therefore the role of the ASP practitioner is to understand and support the person so that the person can function as an athlete. In this regard, Fifer *et al.* (2008:357) hold a similar outlook believing that the client in sport psychology consulting “has to know you care before they care what you know”.

Aspects of PC counselling have been underscored in research into professional practice in ASP. For example, the practitioner’s role in establishing a working relationship with the client (Fifer *et al.*, 2008:357; Petitpas *et al.*, 1999:344; Poczwadowski & Sherman, 2011:524; Sexton & Whiston, 1994:7), along with being honest, trustworthy, open (Anderson *et al.*, 2004b:262; Petitpas *et al.*, 1999:344); and able to communicate the athlete’s felt experiences and meeting the athlete’s individual needs (Sharp & Hodge, 2011:365; Sharp & Hodge, 2014:95) have been

considered essential in effective service delivery. In addition to these selected findings, Poczwadowski and Sherman's (2011:517-520) proposed a service delivery heuristic which accounts for the fact that professional sport psychology practice shares many qualities with the PC therapy.

The evaluation of sport psychologists' personal philosophies for applied practices has revealed valuable information regarding the current trend in working with athlete-clients. A recent study that has documented the development of personal philosophies for practice amongst three British neophyte sport psychologists has emphasized how their initial problem-focused (Cognitive Behavioural Therapy - CBT) approach to working with athlete-clients was recently replaced by an athlete-centred approach in their consulting careers. To these developing sport psychologists an athlete-centred approach was a consulting framework that was not only congruent with their philosophical standpoint but also resulted in more effective service delivery (Collins *et al.*, 2013:399). More specifically, the developing sport psychologists reported that they initially forced mental skills training and rudimentary CBT interventions onto their clients despite its irrelevance to the situation or individual, for fear of appearing incompetent or being ineffective. They soon experienced feelings of incongruence when they realized that athletes' reasons for consultation were mostly emotion related and not always performance related, and they felt an instinctive need to care for the person in front of them. One of the sport psychologists explicitly stated that:

“I discovered that I needed and wanted to provide athletes with genuine, empathetic, and non-judgemental support, not only the core characteristics of a person-centred approach but also the key values I wanted to exhibit as a caring person. As I began to support the person, many athletes seemed to develop their own solutions” (Collins *et al.*, 2013:401).

Furthermore, the second sport psychologist confessed that her athlete-clients' personal wellbeing was her primary concern (Collins *et al.*, 2013:405). The third sport psychologist testified that her main goal of consultancy “has been to foster a strong working alliance in which my clients can become more intimate with their thoughts and feelings and explore what change looks like for them and how they might get there” (Collins *et al.*, 2013:407). These statements do not only echo Rogers' anticipation of therapeutic change in a nurturing environment but also corroborate the relevance of an athlete-centred approach in contemporary sport psychology practices.

The latter accounts support the findings of an earlier longitudinal examination (3 interviews over a 2-year period) that was conducted by another British sport psychologist within the first two

years of private practice after graduating from a master's degree in Sport Psychology (Tod & Bond, 2010). This particular study indicated that the developing sport psychologist's initial service delivery approach changed over a two year period to being:

- less problem-focused and more athlete oriented;
- less controlling and structured to allow athletes to direct the sessions; and becoming:
- more focused on the long-term development of the athlete;
- a facilitator rather than advice giver;
- more flexible;
- more comfortable with silence, and
- being appreciative of a strong working alliance (Tod & Bond, 2010:40).

Notwithstanding the similar practice philosophies amongst British sport psychologists, a comparable study that focused on the professional development of eight Australian trainee applied sport psychologists has also signified how their initially adopted rigid 'expert' problem-solving approaches, when interacting with athlete-clients, changed to more flexible interventions aimed at the athletes' individual needs and the development of a working relationship (Tod *et al.*, 2009:S1). In this investigation, one participant had particularly reported that she initially thought that her primary role was to fix the athletes but she soon learned that the responsibility lies with the client and that her role was to facilitate the athletes in finding their own answer to their unique situation instead (Tod *et al.*, 2009:S7). Essentially, these authors reported that the common view of the developing sport psychologists was that experience had taught them to talk less, be less directive and rather listen as the client led the conversation. This has reportedly given rise to the establishment of collaborative relationships between themselves and their clients, which enabled the clients to talk freely and feel in control of the therapeutic process (Tod *et al.*, 2009:S7).

In support of the above, analyses of Swedish sport psychology students' reflections on the lessons learned from working with individual athletes have also demonstrated a prevailing respect for the consultant-client relationship and the various skills and expertise involved in this process, such as having good listening skills; being empathetic; and having pedagogical insight (Stambulova & Johnson, 2010:301). Alongside these empirical studies, Lindsay *et al.* (2007:342) article on the narrative accounts of real-life consultancy issues by an applied sport psychology practitioner mentioned how the practitioner's personal reflections made him realise that service delivery is all about flanking the clients, assisting them to find meaning in their difficulties and

facilitating their exploration of the future. The practitioner reported that his unease and discontent during the sessions with his client were mainly because of his preoccupation with finding the right mental skill, or trying to ‘fix’ his client who had muddled-up perceptions (Lindsay *et al.*, 2007:342).

The discussed literature illustrates how developing sport psychologists’ approach to contemporary practice was altered from acting as a problem solver to becoming a facilitator. The conceded notion is that practitioner inexperience is characterised by a ‘cookbook’ approach that is aimed at offering tangible benefits regardless of the athlete-client’s individual needs. In other words, inexperienced practitioners attempt to fit each and every athlete into a concrete service delivery approach to justify their competence as sport psychologists. Inevitably this has created feelings of incongruence (Collins *et al.*, 2013:401; Lindsay *et al.*, 2007:347), lack of self-confidence and anxiety (Tod *et al.*, 2009:S10) amongst developing practitioners. All the same, the reality of the matter seems to be that clients do not always desire to be treated as an athlete! This was how it was voiced by a client: “[T]he one thing I did not want to talk about when I came here was about being an athlete ... that’s all anyone ever asks me about” (Lindsay *et al.*, 2007:343). Conversely, more experienced sport psychology practitioners are characterized by a nondirective, client-led approach that values a collaborative relationship with the athlete-client. Professional philosophy in applied practice is also associated with an increased concern for the growth and development of the athlete instead of the professional or consulting self.

It is safe to conclude that contemporary sport psychology practices are trending towards an athlete-centred approach which resonates with the core humanistic principles of Rogers’s PC counselling approach. Applied Sport Psychologists are evidently realizing that athlete-clients are not purely defined by their sporting prowess but by being composite individuals of a rich and diverse life apart from sport. To perceive and treat them only on the grounds of being athletes could impede the optimal functionality of the person fulfilling the role of an athlete (Lindsay *et al.*, 2007:344).

This being said, ASP practitioners like PC counsellors are therefore expected to be fully aware of their felt experiences during consultation with athlete-clients in order to promote an authentic presence that is characterized by unconditional acceptance and empathetic understanding of athlete-clients’ individual experiences and feelings. A concept associated with increased awareness of present-moment thoughts and feelings, which is naturally accepting and free of judgment or delusion of a fixed self, especially in the process of service delivery, is mindfulness

(McWilliams, 2012:239; Ponton, 2012:189). The following section will provide a clarifying overview of mindfulness to substantiate its role in mastering psychotherapy and valuable integration into modern-day sport psychology service delivery.

2.4. Mindfulness

2.4.1 What is mindfulness

Mindfulness as a tradition is rooted in Eastern introspective practices such as Buddhist meditative practice (Vipassana), which can be traced back more than 2600 years in history to the teachings of Buddha who lived in north-east India (Bodhi, 2011:20). The teaching by Buddha, referred to as the ‘Dhamma’ was set on principles and practices for human beings to overcome suffering (dukkha) and gain insight in their pursuit of true happiness and spiritual freedom (nibbāna) (Sayādaw, 1977:3). This practice, together with Buddhism, have eventually spread throughout Asia and eventually other parts of the world where the thoughtful life tends to take on a religious fervour. According to Bodhi (2011:20) the concept of mindfulness emanated from the heart of all classical systems of Buddhist meditation through which Buddha himself proclaimed the essential value of right mindfulness (sammā sati) in his documented philosophical opinions known as *The noble eightfold path* and *The four noble truths*. A general English rendition of mindfulness from the Pali language *Sati Sampajañña* connotes an estimation of awareness, circumspection, discernment, and retention (Shapiro, 2009:556).

The integration of mindfulness into Western philosophy has led to continuously revised and clarified definitions. A renowned Western definition of mindfulness described the concept as “paying attention in a particular way: on purpose, in the present, and nonjudgmentally” (Kabat-Zinn, 1994:4). Jon Kabat-Zinn (1994:4) who was one of the forerunners in integrating mindfulness into Western therapeutic practices, briefly characterized mindfulness as a kind of attention that is underlined by greater awareness, clarity, and acceptance of one’s immediate experience. Almost a decade later, and after much scientific scrutiny and rigorous evaluation, a consensus meeting between mindfulness teachers, experts and practitioners led to a proposed operational definition which conceptualized mindfulness as “a process of regulating attention in order to bring a quality of nonelaborative awareness to current experience and a quality of relating to one’s experience within an orientation of curiosity, experiential openness, and acceptance” (Bishop *et al.*, 2004:234). These authors also affirmed that mindfulness is a process of dispassion (de-centred perspective) that skilfully allows one to ascertain the rationality and

ephemeral nature of one's direct thoughts and feelings (Bishop *et al.*, 2004:234). Black's (2011:1) condensed definition of mindfulness also portrayed a state of general receptivity and full engagement with present-moment experiences.

Resembling Bishop *et al.* (2004) definition, within the context of psychology, mindfulness is viewed as an outcome (mindful awareness which manifests a resolute presence that is free of grasping, repugnance and delusion) that arises from a systematic process (mindful practice which involves deliberate attendance in an open, accepting, and discerning way) in moment-to-moment cognitive, affective, and sensory experiences (Shapiro & Carlson, 2009:4). In extension of this belief, Williams and Kabat-Zinn (2011:10) alluded to Sharon Salzberg perceptive views from her book *Lovingkindness: The revolutionary art of happiness* by stating that:

“Mindfulness helps us break through the legends, the myths, the habits, the biases and the lies that can be woven around our lives. We can clear away the persistence of those distortions, and their familiarity, and come to much more clearly see for ourselves what is true. When we can see what is true, we can form our lives in a different way”.

Mindfulness, therefore, is not just the mere allocation of attention to a particular object (as the case is with concentration), but rather, a heightened awareness of an unfolding experience that is in coexistence of a nonjudgemental, and accepting attitude towards the self and other (Brown *et al.*, 2013:96).

In support of Shapiro and Carlson's (2009:4) view of *mindful practice*, Gardner and Moore (2007:35) affirmed that individuals can be taught to become mindful through frequent engagement in exercises that include various meditation-inspired activities. Kabat-Zinn and Hanh (2009:60) referred to such activity as a way of 'non-doing' that ushers in a refuge of sanity and stability that could inevitably allow one to develop subsequent moments of mindfulness that are manifested in a nondirective, nonreactive mode of conscious adaptation.

In this respect, Epstein (1995:142) (cited in Brown *et al.* 2013:102) conclusively asserted that “once mindfulness has been developed, the self can never be thought of in the same spatially based manner again. Mindfulness is seen as the pivotal ingredient, the catalyst for a profound change in the way the self is experienced”. Brito (2014:356) corroborated this forward-looking and insightful view, emphasizing that mindfulness, like the 'whole dharma', is not a contextualized tool but rather a cultivation of wisdom (awareness and insight) and compassion that establishes a way for human flourishing.

2.4.2 Measurement of mindfulness

The increased scientific discovery, together with adequate empirical support for mindfulness interventions (for example, Mindfulness-Based Stress Reduction - MBSR, Mindfulness-Based Cognitive Therapy - MBCT; Dialectical Behavior Therapy - DBT, etc.) over the past three decades, has significantly contributed to a well-established operational understanding of mindfulness across various fields of interest. Consequently, a series of studies have reported the development and validation of numerous mindfulness self-report measures that assess related constructs of awareness and acceptance of present-moment experience such as the Freiburg Mindfulness Inventory (FMI - Buchheld *et al.*, 2001); Mindful Attention Awareness Scale (MAAS - Brown & Ryan, 2003); Kentucky Inventory of Mindfulness Skills (KIMS – Baer *et al.*, 2004); Toronto Mindfulness Scale (Lau *et al.* 2006); Cognitive and Affective Mindfulness Scale-Revised (CAMS-R - Feldman *et al.* 2007); Southampton Mindfulness Questionnaire (SMQ – Chadwick *et al.*, 2008); and the Philadelphia Mindfulness Scale (PHLMS – Cardaciotto *et al.*, 2008). Baer *et al.* (2006:36) examination of five other mindfulness questionnaires available at the time, in an attempt to conceptualize a comprehensive facet structure of mindfulness, has pointed out that mindfulness is indeed a multifaceted construct which is representative of five distinct facets, namely: 1. nonreactivity, 2. observing, 3. acting with awareness, 4. describing, and 5. nonjudging. This wide-range multi-facet structure subsequently led to the development of the Five Facet Mindfulness Questionnaire (FFMQ) (Baer *et al.*, 2006:43). However, The FFMQ was essentially a follow-up version of the KIMS which was the only other questionnaire designed to separately measure four elements of mindfulness (all but nonreactivity) instead of yielding a single total score like the other compared measures. Most recently, a mindfulness measure intended for children populations older than nine years has also emerged, which is known as the Child and Adolescent Mindfulness Measure (Greco *et al.*, 2011) as well as a Mindfulness Inventory for Sport (Thienot *et al.*, 2014).

Regardless of the potential limitations such as erroneous and biased reporting on questions associated with self-report questionnaires, these measures could still be useful to counsellors in determining baseline levels of mindfulness and the efficiency of interventions over a duration of time (Brown *et al.*, 2013:101). The next section particularises empirical research evidence which advocates the efficiency of the best-known mindfulness-based therapeutic interventions.

2.5 Research and empirical support of mindfulness-based therapeutic interventions

2.5.1 Mindfulness based stress reduction (MBSR) programme

Empirical evidence indicating the beneficial effects of mindfulness interventions has been extensively and consistently documented over the years in both treatment and practice. The Mindfulness Based Stress Reduction (MBSR) programme founded by Kabat-Zinn in 1979 has, since its emergence, been successfully utilized by medical institutions around the world (Kabat-Zinn, 2003:73). The MBSR is a group-based (up to 30 participants) programme which generally consists of 8 to 10 weeks of 20 minutes' daily mindfulness meditation practice that requires one to sit in silence while paying full attention to the feeling of the breath as it enters and exits the body (Kabat-Zinn & Hanh, 2009:64). The programme was initially designed as an added alternative to the treatment for patients with chronic pain, with the primary objective being to intensively train mindfulness meditation to enable such individuals to become more accepting and nonjudgmental of their physiological and psychological conditions (Keng *et al.*, 2011:1044).

Research within the clinical mainstream has indicated that the engagement in MBSR programmes has improved the quality of life amongst cancer patients by significantly reducing sleep disturbance, mood disturbance, stress, and fatigue (Carlson & Garland, 2005:278; Carlson *et al.*, 2003:571) whilst improving the psychosocial adjustment to cancer (Ledesma & Kumano, 2009:571). It has also been shown to noticeably improve the openness to new experiences, interaction with other members, self-control, and spirituality amongst a drop-in group of cancer survivors (Mackenzie *et al.*, 2007:66). Additional studies have reported significant improvements in the relief of chronic pain (Chiesa & Serretti, 2011b:86); immune functioning (melatonin levels) (Massion *et al.*, 1995:39), self-efficacy, positive mood states (Chang *et al.*, 2004:141), social functioning and overall wellbeing (Reibel *et al.*, 2001:183), as well as general features of coping with distress and disability in everyday life (Grossman *et al.*, 2004:39). Goldin and Gross (2010:83) advocated the effectiveness of MBSR training amongst a sample of patients with social anxiety disorder (N=16) by demonstrating a significant reduction in their emotional reactivity to negative self-beliefs and improved emotion regulation abilities.

In expansion of this research, an investigation into the impact of an MBSR programme on a diverse community sample that is free of any chronic medical condition, revealed a significant increase in the participants' mindfulness, spirituality, self-compassion and empathetic perspective taking in addition to a significant reduction in personal distress, symptoms of stress

and mood disturbance (Birnie *et al.*, 2010:366). Other investigations including hale and hearty participants have also underscored the significant value of MBSR training on primary brain functioning (Kilpatrick *et al.*, 2011:290) and brain neuroplasticity (Hölzel *et al.*, 2011:36). In the aforementioned investigations, Kilpatrick *et al.* (2011) assessed the altering effect of eight weeks of MBSR training on the functional networks in the brain of a randomly selected sample (N=32) of healthy, meditation-naïve women (ages 21-55; mean age=34.1) during a focused attention instruction by means of Functional connectivity MRI (fcMRI). Participants were randomly assigned into a training (N=17) and a nontraining/waiting (N=15) group. Independent group analysis was performed, which revealed significant MBSR-related differences in the intrinsic functional brain connectivity of trained participants which essentially led to the conclusion that MBSR-trained individuals could have altered underlying functional brain processes that will result in an improved attentional resource allocation and consistent attentional focus, as well as enhanced sensory processing and reflective awareness of sensory experiences (Kilpatrick *et al.*, 2011:298). These findings are corroborated by a similar investigation conducted by Hölzel *et al.* (2011:40) which revealed increases in grey matter density in brain regions responsible for perspective taking, emotional regulation, memory, self-reflection and empathy in a sample of healthy meditation-naïve individuals who have completed the eight-week MBSR programme.

Hence, the MBSR programme is likely to garner underlying brain processes and transformative values such as self-development, transcendence, self-healing and wellbeing for people with and without ailing conditions that are diverse in employment, religion, gender, and age.

2.5.2 Mindfulness-based cognitive therapy (MBCT)

The MBSR programme was soon followed by another mindful meditation-oriented intervention, known as Mindfulness-Based Cognitive Therapy (MBCT) by Segal, Williams and Teasdale (2002), which combines MBSR with cognitive therapy. The MBCT is an eight-week manualized group intervention programme that was generally developed to treat remittent depressed patients. Keng *et al.* (2011:1046) explained that MBCT assists patients to detach themselves from automatic negative thinking that is associated with feelings of dysphoria in an attempt to treat depression and reduce relapse rate. A systematic review on randomized controlled studies documented by Fjorback *et al.* (2011:102), and Chiesa and Serretti (2011a:441) have indicated that MBCT is a promising intervention for decreasing depression

and reducing the risks of depressive relapse in clinical populations with physical illness and psychiatric disorders respectively. The aforementioned findings lend valuable support to the contention of Piet and Hougaard (2011:1032) who believed that MBCT could be as effective as maintenance of antidepressant medication. Recent research has also demonstrated the effectiveness of an innovatively structured MBCT programme adapted for adults with intellectual disabilities in the improvement of depression and anxiety symptoms, as well as self-compassion and compassion for others in people with borderline, mild and moderate intellectual disability (Idusohan-Moizer *et al.*, 2015:93). Additionally, MBCT has indicated promising results in the treatment of various conditions such as insomnia in patients with anxiety disorder (Yook *et al.*, 2008:501); bipolar disorder (Deckersbach *et al.*, 2012:133; Williams *et al.*, 2008:275); binge eating disorder (Baer *et al.*, 2005:295); as well as attention problems and anxiety symptoms in children (Semple *et al.*, 2010:218).

Other practical interventions that teach mindfulness using less meditation-oriented techniques such as the Dialectical Behaviour Therapy (DBT) by Linehan (1993), and Acceptance and Commitment Therapy (ACT) by Hayes *et al.* (1999) have gained strong empirical support for improving various conditions among hospital and psychotherapy patients. Furthermore, Gardner and Moore (2007:67) have accentuated the significance of the Mindfulness Acceptance and Commitment (MAC) approach to improving sport performance. Table 3 below provides a paraphrased summary of empirical studies on the effectiveness of mindfulness-based interventions.

Table 2.3: Randomised controlled trials of less meditation-oriented interventions

Less meditation-oriented interventions	Nature of intervention/ core treatment process	Mode of treatment	Focus group/ type of participant	Main outcome	Researchers
Dialectical Behavior Therapy (DBT)	Focus on acceptance and validation of behaviours in the moment with the intention of improving emotion regulation	Individual therapy, group therapy, telephone consultation between therapists and patient, and group consultations	Patients with Borderline Personality Disorder, treatment for chronic suicidal and self-injuring behaviour	Reduce frequency and severity of suicidal and self-injuring behaviour; reduce days of psychiatric hospitalization; increase treatment retention as well as overall and social global adjustment of patients.	(Koons <i>et al.</i> , 2001:371; Linehan <i>et al.</i> , 1991:1060)

Less meditation-oriented interventions	Nature of intervention/ core treatment process	Mode of treatment	Focus group/ type of participant	Main outcome	Researchers
	abilities.	with therapists		Reduction in suicide and self-mutilation, increase in treatment retention.	(Linehan <i>et al.</i> , 2006:757; Verheul <i>et al.</i> , 2003:135)
Acceptance and Commitment Therapy (ACT)	Undefended acceptance, defusion, contact with thoughts, feelings and bodily sensations, self as context, and committed action.	Individual and group settings; treatment varying from one day to 16 weeks	Populations with depressive and anxiety disorder	Reduction in opiate and drug use, reduction in psychological distress and improved adjustment. Reduction in depression and anxiety, improved quality of life experience, life satisfaction, and general functioning.	(Hayes <i>et al.</i> , 2004:668) (Forman <i>et al.</i> , 2007:772)
				Reduced depression, improved social functioning.	(Lappalainen <i>et al.</i> , 2007:488)
Mindfulness Acceptance and Commitment (MAC)	Enhance athletes' nonjudgmental awareness; cultivate experiential acceptance; and improves task focus attention.	7-week protocol for individual and group sessions (MAC Protocol)	Performance populations in sport	Enhanced golf performance in competition. Increases in mindful awareness, mindful attention, experiential acceptance flow, and diving performance.	(Bernier <i>et al.</i> , 2009:329) (Schwanhauser, 2009:377)
				Greater increases in the coaches' ratings of athletic performance, and smaller decreases in performance over season; performance enhancement of college athletes.	(Wolanin & Schwanhauser, 2010:319)

Less meditation-oriented interventions	Nature of intervention/ core treatment process	Mode of treatment	Focus group/ type of participant	Main outcome	Researchers
				Increased ability to take action towards realizing athletes' goals.	(Hasker, 2010)
				Increase in measures of attention and flow, increased coach ratings of performance.	(Lutkenhouse <i>et al.</i> , 2007)

Note. This table provides a paraphrased summary to facilitate basic understanding of information. For more accurate and comprehensive information, the reader is advised to consult original sources cited herein as well as the publication of Keng *et al.* (2011).

The effectiveness of mindfulness-based interventions is not limited to the treatment of ailing or troubling conditions. The following section attempts to point out the significance of mindfulness in mastering therapeutic practice.

2.6 Mindfulness in mastering counselling practice

There have been numerous investigations that underscored the beneficial effects of mindfulness in applied practice such as psychotherapy (Aiken, 2006:2212; Brito, 2014:351; Campbell & Christopher, 2012:213; Davis & Hayes, 2011:198; Dreifuss, 1990:2617; Dunn *et al.*, 2013:82; Gehart & McCollum, 2008:176; McCollum & Gehart, 2010:347). This divergent approach in assessing the benefits of mindfulness seems logical, considering the intricate role of culture and cultural techniques in psychotherapy (Hansen *et al.*, 2006:66; Sue, 1998:440), along with the essential skills associated with successful counselling such as the ability to maintain attentive presence, to empathize both cognitively and affectively with the client, and to develop a therapeutic relationship (Elliott *et al.*, 2011:43; Gaston, 1990:143; Krupnick *et al.*, 1996:532; Lambert & Barley, 2001:357; McCollum & Gehart, 2010:347). Ponton (2012:191) sustained the relevance of mindfulness in counselling, believing that “mindfulness is a way to quiet those voices of distraction, a way of tuning our minds with the freedom to identify the foreground against the background”.

Apart from this, a strong belief that aspects of the therapist's self largely affect both the therapy process and therapeutic outcome (Blow *et al.*, 2007:313; Kim *et al.*, 2006:168) persists. More specifically, Kim *et al.* (2006:161) analyses of therapist variability from random-effects modelling of the National Institute of Mental Health Treatment of Depression Collaborative Research Program predictably estimated that therapists' effects contributed at least 8 percent of the variance in therapeutic outcome. In line with this, Blow *et al.* (2007:305), together with Messer and Wampold (2002:23), deduced that some therapists are better than others not because of their choice of manualized medical treatment (specific ingredients), but rather because of the manner in which they incorporate their inferred traits (such as personality, coping patterns, emotional wellbeing, values and beliefs, and cultural attitudes) when treating patients. Incidentally, Brito (2014:352) recently explained that successful psychotherapy is all about the therapist's ability to "relate to clients and [to] tailoring the relationship to individual clients" – hence the fact that the role of mindfulness in the lives of counsellors should be noteworthy, considering their important responsibility in benevolently moving in and out of a clients' world of anguish without any contagion. This notion is supported by Ponton (2012:192) who claimed that "the caseloads of many are so chronically toxic that, without clear boundaries and mindful awareness of arousal differences between the stress of their own threats and those of their clients, counsellors' risk being washed into the ocean of despair". To corroborate the latter, McCollum and Gehart's (2010:350-352) thematic analysis of thirteen beginner therapists' (practicum students) journal entries concerning the perceived effect of mindfulness meditation on their personal lives and clinical practices, revealed that mindfulness meditation helped them to become more present in therapy. In particular, the therapists reported that they became more aware of their inner experiences as well as more aware of their clients during therapy. In short, the effects of meditation allowed them to become more compassionate and accepting of themselves and their clients.

An examination of the influence of long-term mindfulness meditation practice on the work experiences of six therapists also indicated that mindfulness could be positively associated with an improved ability to differentiate counsellors' own experience from their clients' experience, precision in working with clients, and self-insight (Dreifuss, 1990:2617). In a similar investigation, six licensed psychotherapy practitioners who had maintained daily mindfulness meditation practice for at least 10 years, were extensively interviewed to ascertain whether their personal emphasis on Buddhist sublime states, together with a history of mindfulness-practice, contributed to the cultivation of the qualities associated with empathy in their therapeutic work (Aiken, 2006). Consistent themes generated from the interview data revealed that mindfulness

strengthened therapists' ability: to experience and communicate a felt sense of the clients' inner experience; to be more present to clients' pain and suffering; and to help clients become better at communicating their bodily feelings and sensations (Aiken, 2006:2212).

In conformance to the aforementioned (and the concept of empathy), Wang's (2006:87) causal-comparative study approach which assessed the effect of mindful meditation on psychotherapists' levels of empathy, recorded significantly higher levels amongst experienced meditating therapists compared to nonmeditating therapists. What is more, the results of the training outcomes of an eight-week mindful therapy (MT) training programme for psychotherapists (N=47) indicated a reduction in their perception of stress and tension that allowed them to feel more relaxed within therapeutic work, and increased their capacity to liberate themselves from disturbing thoughts or sensations as they occur (Aggs & Bambling, 2010:284). The latter is noteworthy, since research has drawn attention to the negative impact of therapists' countertransference (CT) reactions to the process and outcome of psychotherapy (Gelso *et al.*, 2002:861; Hayes *et al.*, 1997:145). Notwithstanding this, an investigation into the relationship between trainee therapists' (N=100) mindfulness qualities, and supervisors ratings of the trainee therapists' CT thoughts, feeling and behaviour during therapy, has revealed a significant association between nonreactivity and CT management (Fatter & Hayes, 2013:509) – thus suggesting the common ground between the ability to be nonreactive (which is promoted by mindfulness) and emotion regulation skills during therapy, such as controlling reactions stemming from areas of unresolved struggles within the therapists' self.

Newsome *et al.* (2012:306), however, found that an eight-weekly, 90-minute group session training of MBSR techniques for college students (N=31) who were in training for careers in helping professions (for example, counselling, psychology, education, family/child science, nursing etc.) significantly lowered their perceived levels of stress, while increasing their levels of mindfulness and self-compassion. These findings seem sensible, considering the empirical evidence that was generated within a group of Australian psychotherapists (N=58) which revealed a strong association between properties of mindfulness and the optimization of practice in terms of job satisfaction, wellbeing and reduced experiences of burnout (O'Donovan & May, 2007:46). These outcome benefits that mindfulness brings about for the practitioner's personal self have been elaborated upon in interviews with counsellors regarding the long-term impact of a mindfulness course on their counselling careers (Christopher *et al.*, 2011). In this particular qualitative investigation, it was found that exposure to mindfulness training had lasting effects on the counsellors' self-care which positively affected them physically (increased energy, and

better circulation), emotionally (being better able to remain calm, focused, and relaxed or grounded), cognitively (being better able to quiet their mind and garner an attitude of openness), as well as improving their levels of awareness (being in tune with physiological and psychological responses), and acceptance (increased self-compassion and being less judgemental) (Christopher *et al.*, 2011:325-329). Further results also indicated persisting improvements in their interpersonal relationships with others, their experience of self during counselling, the formation of a therapeutic relationship with clients, and nature of practice (Christopher *et al.*, 2011:330-332). All these benefits garnered by mindfulness, conform to the standpoint of effective psychotherapy, suggesting that a patient's recovery is based on key therapist characteristics such as the ability to be fully present, attentive, and attuned to a client's individual needs (Rogers, 1957:98).

Granting the evidence of research revealing the improvements of mindfulness training on practitioners' perceived well-being or therapeutic skills, the translation of mindfulness into the actual improvements of therapeutic outcomes determined from a client's perspective also need to be validated. In view of this, one objective of Dunn *et al.* (2013:78) study was to determine whether the engagement in a five-minute guided mindfulness exercise as part of a therapist's preparation routine immediately before sessions with adult clients would positively impact therapy outcomes from a client's point of view. In this study, twenty-five trainee therapists who were completing their in-house practicum, were recruited and prompted to participate in a five-week manualized mindfulness training programme (five training sessions of 20 minutes each) for the purpose of developing an understanding of the basic principles of mindfulness and to master mindfulness exercises. Participants were also instructed during this phase to complete daily guided mindfulness exercises at home and to engage in informal mindfulness practices such as being present while doing simple everyday activities such as brushing their teeth. Pursuant to this phase, participants were required to draw a paper slip prior to each therapy session, which instructed the therapists to engage in either a five-minute mindfulness-centring exercise or a control activity such as reading emails, going to the rest room, or talking to other therapists. The clients' ratings of each session were then recorded by means of the Therapist Presence Inventory and Session Rating Scale. After five weeks of data collection (2 weeks in a larger clinic and 3 weeks in a smaller clinic) the data were analysed, revealing that clients' perceived their therapists as being highly present in all sessions, regardless of whether or not the therapists engaged in the mindfulness exercise or controlled activity. Nevertheless, the clients did perceive the sessions as being more effective when the therapists engaged in the mindfulness exercise prior to the start of the session (Dunn *et al.*, 2013:82). This study is unique compared to the other

documented studies of the same phenomenon, in the sense that it examined the effects of a brief mindfulness exercise immediately prior to a session. More noteworthy is the point that the same therapists and clients were used to assess the effects of a brief mindfulness-centring exercise. In other words, the research design allowed randomization at the session level (between-condition comparison within the same therapists) rather than at the therapists' level (between-therapists conditions) (Dunn *et al.*, 2013:84). As a result, it can be tentatively accepted that mindfulness exercises, even as brief as five minutes, can positively predict therapeutic outcomes. Based on this, the authors of this study endorse the inclusion of mindfulness practice in the training of beginning therapists (Dunn *et al.*, 2013:82).

In validation of this, Greason and Cashwell (2009:13) theorised that mindfulness should be part and parcel of the preparation curriculum and supervision for counsellors in training, as they also discovered that mindfulness was a significant predictor of counselling self-efficacy among counselling students. Campbell and Christopher (2012:222) attested to the value of mindfulness training for counsellors in training by stating that it “increases therapeutic responsiveness, empathy, and attentiveness while decreasing reactivity and defensiveness”. This notion was supported in an investigation which assessed the impact of mindfulness on the counselling-skills' development of master's-level counselling students (Buser *et al.*, 2012:28). In this particular study, fifty-nine students were evenly divided into practice-session mindfulness groups labelled “No”, “Brief”, and “Extended”. Brief exposure to mindfulness practice consisted of five weekly practice sessions and the extended-mindfulness practice consisted of eleven weekly practice sessions. After the mindfulness intervention at the end of the semester, a 10-minute taped counselling session of each student was randomly assigned to two PhD-level instructors for assessment by means of Eriksen and McAuliffe's (2003) Counselling Skills Scale (CSS). Analyses of the assessment results revealed a significant improvement in the counselling skills for groups of students who had engaged in brief and extended mindfulness practice sessions (Buser *et al.*, 2012:28). In effect, these authors suggested that mindfulness practice enabled the counselling students to be more “capable of facilitating an accepting, caring therapeutic relationship with clients” (Buser *et al.*, 2012:29). They also explained that mindfulness practice encourages counsellors to slow down the pace of perception and responsivity during counselling, which enables them to fully explore the subtle sensations and feelings of the situation at hand that contribute to understanding the client's situation.

Along these lines, Greason and Cashwell (2009:13) demonstrated that there was a significant relationship between mindfulness and fundamental counsellor preparation and development

outcomes amongst counselling students, such as counselling self-efficacy, attention, and empathy. The conclusion was that the mindful counsellor “would be able to stay present, fully hear the client’s story, and engage empathically” (Greason & Cashwell, 2009:14), a further testimony to the value of mindfulness in counsellor training and development.

Aside from a counselling viewpoint, a systematic review of neuropsychological findings concluded that mindfulness training is associated with advanced cognitive functioning due to the significant improvements noted in: selective and executive attention, sustained attention ability, working memory capacity, and executive functions such as verbal fluency (Chiesa *et al.*, 2011:461). Surprisingly, these tendencies were apparent amongst psychotherapists who had completed an eight-week mindful therapy (MT) training programme (Aggs & Bambling, 2010:278). A more specific finding was that therapists recorded higher scores in clarifying knowledge and capacity to elicit a mindful state of consciousness (Aggs & Bambling, 2010:284). This notion, together with the additionally cited literature is essentially encapsulated in Leppma’s (2012:197) report which claimed that mindfulness-based meditation (with specific reference to Loving-Kindness Meditation - LKM) enhances counsellors’ attention, presence, acceptance, and self-regulation abilities that are complemented by an increased sense of self-care and connectedness in therapy.

Mindfulness is therefore an evidently essential element of the processes and outcomes of therapy as well as of the continuation of effective counselling behaviour. Although the virtues instilled by mindfulness training closely resonate with Carl Rogers’s characteristics of a PC counsellor, the deep-seated association between mindfulness and counsellor awareness, therapeutic presence, self-compassion, empathetic understanding, nonreactivity, sustained focus, emotional control, counselling self-efficacy, and accurate communication of a client’s felt experiences is surely a keystone of successful therapy from any theoretical approach. Logically, the following discussion will highlight the potential value mindfulness may hold for sport psychology practice.

2.7 Mindfulness in applied sport psychology

Research on mindfulness in applied sport psychology is insufficiently documented and has over the past decade been limited to an alternative approach to enhancing athletes’ performance which is better known as the Mindful Acceptance Commitment (MAC) approach (Gardner & Moore, 2004, 2007). Notwithstanding the strong scientific support for the beneficial effects of

mindfulness in the processes and outcome of psychotherapy, researchers have neglected investigation into its relevance to the applied sport psychologist in service delivery. The tendency for sport psychology consulting to become more collaborative and athlete-centred (see Anderson *et al.*, 2004b) should surely evoke interest among researchers and applied practitioners to investigate the significance of mindfulness in this regard, especially if considering the unusual environments in which contemporary sport psychology is practised (Waumsley *et al.*, 2010:246), amidst the anxiety that stems from the ever-present idealistic ‘quick fix’ expectations of many athletes and coaches (Weinberg & Gould, 2015:253). In line with this, research findings have indicated the need for sport psychologists to become more attuned to themselves and their clients in order to establish open and trusting consulting relationships to foster an environment that allows clients to determine the direction and outcome of therapy (Collins *et al.*, 2013:407; Tod *et al.*, 2009:S7; Tod & Bond, 2010:40). This trend in current sport psychology practices is further supported by Williams and Andersen (2012:140) who unequivocally proposed that the therapeutic relationship between a sport psychologist and an athlete-client is imperative for any positive outcome to occur whether it is “performance enhancement or decreased depression”.

Contemporary sport psychology practice is therefore underpinned by humanistic principles as outlined by Carl Rogers (see pp. 27-29 of this text). For this reason, the importance of mindfulness in ASP will be substantiated by adopting Ponton’s (2012) symbolic mantra (“Show up, shut up, listen up, and roll up your sleeves!”) to denote how mindfulness skills facilitate mastery in counselling.

2.7.1 Show up – therapeutic presence

Ponton (2012:190) used the term “Show up” to express the point that mindful awareness will enable counsellors to “move from acting as if they are counsellors to acting because they are counsellors”. More specifically, he explained that mindful attention to the present moment with the client will enable counsellors to form a rich and meaningful concept of the whole such that the client’s individual needs and one’s own could, in his words, “propel the counsellor on the transformative journey of development” (Ponton, 2012:191). In line with this, Rønnestad and Skovholt’s (2003:35) model of professional development in counsellors/therapists highlighted the importance of ‘meaningful contact’ with clients as one of the most impactful catalysts in counsellors’ professional development.

Like Ponton, Greason and Cashwell (2009:14) upheld the notion that a mindful counsellor would be more likely to stay present, fully listen to a client's story and engage in a nonprescriptive empathetic manner. Campbell and Christopher's (2012:213) research on the effects of mindfulness training in counselling supported these views by revealing that participating counsellors have experienced increased feelings of awareness and acceptance of both themselves and others that were accompanied by increased reflectivity and decreased reactivity. Furthermore, it was reported that these altered behaviour patterns had inadvertently fostered therapeutic presence (Campbell & Christopher, 2012:213).

Sport psychology service delivery has established that consultants very often adopt text book theories/formulas to try and 'fix' athletes to prove their level of expertise (Arnold & Sarkar, 2014:9; Williams & Andersen, 2012:142). It is common for novice ASP practitioners as well as those in training to act as expert advisers who are bound to a rigid problem-solving approach when working with athletes (Owton *et al.*, 2014:251). Analyses of interviews with expert sport psychologists who rendered services to athletes during the most anticipated sporting events in the world (for example, Olympic games), reported that sport psychologists will very often misjudge clients' true needs if they attempt to 'fix' them, and suggested that practitioners should rather listen for longer and facilitate the athlete through the process of listening because only then will they discover the essential nature of clients' issues (Arnold & Sarkar, 2014:9). In other words, clients' know best, and a nonreactive and attentive approach allows them to pave the way toward healing. A quote from the data that were gathered from case notes, and a self-reflective logbook of a sport psychologist on tour to Europe with the Australian Paralympics table tennis squad bears testimony to this by stating:

"I tried to catch myself whenever the desire to fix arose, and directed my attention back towards tuning into my reactions to clients so that I might know where to move with them as we navigated our way through their world" (Williams & Andersen, 2012:149).

Commenting on this, Giges (2011) who is a renowned expert on self-awareness and sport psychology consulting, clearly stated (in the DVD titled 'Self-awareness in sport psychology consulting') that sport psychologists' honest assertions about their clients' behaviour are robustly influenced by their own life experiences, which not only distorts their perception of athlete-clients' individual needs but also hampers the formation of a therapeutic bond with clients. Like Ponton (2012:191), Giges (2011) went on to explain that an accurate awareness of the self and the client's world is needed, because a complex challenge for sport psychologists is to unravel

the “muddle” of the client’s story, while skilfully navigating the client to expand and organize the story that the client yearns to tell.

Mindful awareness in ASP is therefore imperative since it permits practitioners to become therapeutically present and move away from their intuitive desire to fix athletes problems or be expert advice givers.

2.7.2 Shut up and listen up – nonreactive awareness

It is argued that a professional counsellor’s attention should not be easily distracted by intrusive external events such as a ringing telephone, and music playing in the background, during a moment of therapy (Ponton, 2012:191). However, there is a belief that the same could not be assumed for distractions caused by a counsellor’s own thoughts. Ponton used this to explain that each client imparts an array of potential diversions to the consultation, which are spontaneously documented in a counsellor’s own thoughts – diversions such as “What on earth is she wearing?” or “Why did he greet me in such a strange way?” – and these hinder the counsellor’s attention in the moment of therapy (Ponton, 2012:191). In addition to these client-precipitated distractions, counsellors also battle to control the unbidden voices of their own minds that intrude during therapy, such as “What should I buy for dinner?” – not to mention all the thoughts that are constantly reminding one not to fail, or worry about the reaction of the licensing board (Ponton, 2012:191). Dunn *et al.* (2013:83) corroborated this notion by inventively calling it the “inner chatter” of the novice therapist which inhibits therapists’ ability to remain attentive and present while in session with clients.

In view of this, both Ponton (2012:191) and Dunn *et al.* (2013:82) firmly believed that mindfulness in counselling is essential since it enables counsellors to silence all thoughts (‘shut up’) and to deautomatize their minds for more accurate awareness of the situation at hand. Martin (1997:291) referred to this as a “state of psychological freedom that occurs when attention remains quiet and limber”. While Brown *et al.* (2013:99) supported this notion, they suggested that mindfulness does not necessarily silence the thoughts, voices or emotions but rather permits counsellors to become aware of them and to realize that they are transient and often irrelevant. Moreover, these authors explained that this realization, would enable the counsellors to withdraw their attachment to their thoughts and emotions in order to become more therapeutically present (Brown *et al.*, 2013:99). This view corroborates the Buddhist stance on psychotherapy which maintains that counsellors who seek gratification within the precincts of a

fixed self (self-cherishing) will sow the seeds of dissonance since the world constantly challenges and shapes one's identity (Kumar, 2003:42). This view finds even greater resonance in the old Taoist metaphor from the Tao Teh Ching, where Lao Tzu asserted, "If you want a glass of muddy water to clear, leave it alone and let it settle out by itself. If you try to stir it clear, it will only get cloudier." Moreover, Lao-Tzu claimed that "the master doesn't seek fulfilment, but not seeking, not expecting, is present, and can welcome all things" (Chowaney, 2015:para1). In other words, counsellors in psychotherapy need to adopt a nonpurposive state that treats each client as a new experience ('Listen-up'). Hence, the ability in counsellors to 'Shut up and listen' lies in the mindful awareness of their own thoughts, emotions and perceptions as they occur, without needing to react upon them (nonreactive awareness).

Sport psychology practitioners could benefit from practising mindfulness since it enables them to be present and attuned to their inner states, which is needed to render a service where the athlete-clients feel 'felt' and understood, especially when under the scrutiny of professional gatekeepers (Williams & Andersen, 2012:150). Essentially, this notion was based on the findings underscoring the professional anxiety, self-doubt, multiple roles, presence, and attunement issues experienced by licensed psychologists on entering the pressured world of elite-level sports. In this particular investigation, the psychologist reported recurrent episodes of feeling lost and confused because of having to fulfil multiple roles such as acting as "a lifeguard, a beautician, a luggage carrier, a stand-in pretend coach, a camera man", let alone a psychologist, while touring with a team (Williams & Andersen, 2012:148). Furthermore, on another occasion during this investigation, the psychologist also reported asking himself the question, "Who am I in this role?" during his travel with a team when he had to make himself available to concurrently fulfil the role of a sport psychologist, a warm-up coach, and assistant mechanic – all within a period of five minutes (Williams & Andersen, 2012:146).

Waumsley *et al.* (2010:250) confirmed the frequency of sport psychologists' having to fulfil boundary-blurring roles when working with a team which they believe is motivated by practitioners' need to show their professional concern for the athlete(s) and to ascertain credibility, trust and respect. Expert sport psychology consultant Dan Gould confirmed this notion, stating that it is all part of fitting in with the team (Fifer *et al.*, 2008:361). The counterargument, however, is that fulfilling these ambiguous boundary-blurring roles in concurrent succession not only creates confusion but also obstructs practitioners' concentration, emotional standing and decision making (Waumsley *et al.*, 2010:250). Running concurrently with these roles, are frequent demands for individual consultations with athletes in ad-hoc

environments such as on the aeroplane, in the bus en route to or back from a competition, at venues, the hotel lobby, hotel rooms, change rooms, and weight rooms. (Waumsley *et al.*, 2010:246; Williams & Andersen, 2012:149) – all in addition to working undesirable hours (Jackson, 2006:42). To make matters even worse, as Lutkenhouse (2007:166) pointed out, sport psychology practitioners are repeatedly faced with athletes requesting performance enhancement services, while clarifying intricate psychological issues. The prevalence of such occurrences was even noted in the training stages of postgraduate MSc Sport Psychology students when it was discovered that these students find it difficult to detach themselves from their clients (Owton *et al.*, 2014:252). More specifically, one of the participants in the study found that the depression and self-esteem issues of her client were becoming an emotional burden to her (Owton *et al.*, 2014:249). Furthermore, the authors of this particular study reported that sport psychology students came to realize that the applied nature of the field is much more complex than they initially anticipated and that they developed a new-found meaning in and appreciation of the “art of listening”, openness, and flexibility in consultation (Owton *et al.*, 2014:248). As in the investigations of Waumsley *et al.* (2010), Lutkenhouse (2007), and Williams and Andersen (2012), this study acknowledged an evolving parallel between the experiences of neophyte ASP practitioners and the struggles of novice counsellors and therapists documented by Skovholt and Rønnestad (2003:45), such as: severe performance anxiety, porous or rigid emotional confines, glamourized expectations, an acute need for positive mentors, and a fragile or inadequate practitioner-self.

This idea relating to sport psychology service delivery is further substantiated by research findings on the supervisory issues of trainee sport psychologists which revealed that students tend to question their supervisors about the professional development of practitioners in terms of the management of personal thoughts and feelings during consultations (Hutter *et al.*, 2015:106). In the same way, the topic of personal management as a consultant was another inescapable issue arising from interview discussions with sport, counselling and clinical psychologists who reported the influence of counsellors’ “own messiness” and its effect on consultation (McEwan & Tod, 2015:88). In the light of the latter, it is no surprise that the analyses of interviews with some of the most reputable sport psychologists in the world on best-practice insights into working with elite athletes, has shown that the ability to manage oneself during consultation is a keystone for neophyte practitioners (Arnold & Sarkar, 2014:10).

Sport psychology service delivery is therefore clearly subject to conditions that constantly defy the applied practitioner’s ability to remain flexible and manage the self. This notion is supported

by Fifer *et al.* (2008:358) who wrote that the consulting process in the sport world is flooded by adjustments and barriers since each consulting experience is unique.

Managing the ambiguous boundary-blurring responsibilities in addition to having to face athletes' convoluted issues at unsociable hours of the touring day could be a daunting task even for experienced ASP practitioners -- not to mention battling with their own uncontrolled thoughts and emotions regarding effectiveness or personal issues. Hence the need for ASP practitioners to be mindful of their own 'messiness' in order to realize whether their 'doing' at a particular moment in consultation is being wrongly influenced by their 'being'. In other words, mindful awareness will prompt ASP practitioners to stop and ask, "What am I thinking/feeling?"; "Why am I thinking/feeling this?"; "What am I doing?"; "Is this in accordance to my own needs or the client's needs?" (Williams & Andersen, 2012:149). Mindfulness will thus enable practitioners to separate themselves from their (false) sense of self (shut up) and become attuned to clients' unique world of experience (listen up) which is indispensable to the development and nurturing of a caring and trusting relationship with clients (Andersen & Mannion, 2011:174; Zizzi *et al.*, 2010:194). A less convoluted view of this notion would be that mindfulness provides practitioners with the freedom to choose how they will respond to a situation at hand – a situation where they are able to distinguish between reactions and desired responses.

2.7.3 Roll up the sleeves – mastery in counselling

Ponton (2012:194) concluded that, rather than being a counselling moderator, mindfulness is a technique for mastering counselling. With his metaphorical allusion, 'Roll up the sleeves and set to work', he argued that counsellors' own mindfulness would enable them to do the work which they are called to do with a deepened focus and clarity that would not only add meaning to the lives of both their clients and themselves but also enrich their life experiences and ensure development towards mastery in counselling (Ponton, 2012:195). This notion is corroborated by Williams and Kabat-Zinn (2011:10) who asserted that mindfulness induces a sense of certainty (free of grasping, aversion and delusion) which sets the stage for continuous transformation and insight. These authors proceeded to explain that this deepened insight resulting from mindfulness (such as realizing the inextricable unification of all our lives) will intrinsically cultivate loving-kindness which harvests compassion towards the self and others. With specific reference to the role of the therapist, Padilla (2010:7) expressively added that it is compassion for the self which paves the way for successful therapeutic interaction with the client, characterised by the ability to be warm, genuine, compassionate, and empathetic. She supported this notion, claiming that, "as mindfulness begins to dissolve the artificial boundaries that define our separateness, we begin to

experience our innate affinity with all beings”. This ‘affinity’ is a keystone in mastering counselling since it also runs parallel to the second most advanced phase (phase 5: Experienced Professional phase) of Rønnestad and Skovholt’s (2003:20) proposed six-phase model of counsellor/therapist development. In their interviews with experienced professional counsellors/therapists, Rønnestad and Skovholt’s (2003:20) noticed the importance of meaningful contact with a wide variety of clients in different settings, together with a clear understanding of the personal and professional self in relation to clients, in their professional development. Explaining this, Rønnestad and Skovholt (2003:31) referred to Belenky *et al.* (1986:137-138) ‘Model of Knowledge Development’ to elucidate the viewpoint of experienced practitioners:

“All knowledge is constructed, and the knower is an intimate part of the known. . . To see that all knowledge is a construction and that truth is a matter of the context in which it is embedded is to greatly expand the possibilities of how to think about anything. . . . Theories become not truth but models for approximate experiences . . .”

Evidently the properties of self-awareness, openness to experience (client-led approach), continuous transformation, and deepened insight (reliance on internal expertise) which are instilled by mindfulness are instrumental to mastery in counselling. In support of the latter, Skovholt and Trotter-Mathison (2011:27) unswervingly believed that, without mindfulness, a practitioner’s career journey would lack texture and richness and would consist of a mere repetition of the initial experience, that is, having one year of experience repeated over and over.

As in other therapeutic settings, practitioners in ASP will significantly benefit from being mindful. Instilled mindfulness will enable ASP practitioners to adopt a present focus that is accompanied by an all-accepting attitude which inadvertently promotes a focus on contextually appropriate behaviour responses in the demanding situations associated with sport environments. In other words, instead of reacting to perceptions which are clouded by personal preferences, desires, fears, and needs (Waumsley *et al.*, 2010:246; Williams & Andersen, 2012:146), practitioners will be able to choose a relevant response to the situation at hand if needed. This deliberate separation of the transient self in service delivery will provide the foundation necessary for successful service delivery from any theoretical approach. Moreover, the mindful ASP practitioner will have a sense of incorporated flexibility concerning service delivery that matches not only the clients’ individual needs but also their adaptable worldview. Various sources argue that timeous meaningful encounters with clients will lead to developing a clutter-free authentic consulting self which is characterised by personal and professional congruency

(Rønnestad & Skovholt, 2003:20; Skovholt & Trotter-Mathison, 2011:27). In a sense, from a Humanistic standpoint, Rogers (1951:40-41) related such mindfulness to mastery in counselling, pointing out that “in the therapeutic experience, to see one’s own attitudes, confusions, ambivalences, feelings, and perceptions accurately expressed by another...paves the way for acceptance into the self of all the experiences which are now more clearly perceived. Reorganization of the self and more integrated functioning of the self are thus furthered”.

Although this perception, along with the effectiveness of mindfulness, actually lacks scientific support in mastering sport psychology service delivery, mindfulness has a strong scientific foothold in other occupations where someone acts as a ‘facilitator of behaviour change’ such as classroom teachers (Ball *et al.*, 2014:9; Jennings *et al.*, 2011:37; Jennings *et al.*, 2013:374; Roeser *et al.*, 2013:799; Zakrzewski, 2013:para1-9). For instance, Jennings *et al.* (2011:42) discovered that teachers who participated in mindfulness training were more capable of being responsive than emotionally reactive to challenging situations, than they were of being able to verbalise their emotional states with their students – thus giving rise to relatively greater understanding and conflict resolution in provocative situations. A subsequent study by these authors which involved a randomized controlled trial of a mindfulness-based professional development programme (Cultivating Awareness and Resilience in Education) discerned significant positive effects on teachers’ ‘reappraisal of stressful situations (general wellbeing), teaching efficacy, burnout and mindfulness (Jennings *et al.*, 2013:384). Moreover, the results of the programme satisfaction survey conveyed that the teachers identified an improvement in pro-social classroom climate such as improved relationships with their students, classroom management and student outcomes (Jennings *et al.*, 2013:386). A positive correlation between mindfulness practice and greater awareness of sensations, perceptions, actions and reasons for actions amongst teachers was also verified (Roeser *et al.*, 2013:799). More importantly, mindfulness training has significantly enhanced teachers’ focused attention and working memory capacity, and occupational self-compassion, whilst reducing their occupational stress and burnout (Roeser *et al.*, 2013:800). In addition to this, an increase in effective teaching behaviour (consisting of emotional support, classroom organization and instructional support) and reduced attention biases among elementary school teachers who have participated in an eight-week mindfulness-based wellness training programme pilot study was also noticed (Flook *et al.*, 2013:189) – thus suggesting that mindfulness training made the teachers more accepting of the distractions, challenges and issues they face in the teaching environment whilst enabling them to remain focused on the task of teaching. Adding to the discussion on ‘Mindfulness practice in the classroom’, Ball *et al.* (2014:9) commented that mindful teachers will develop a deeper

understanding of what their students say and respond accordingly with greater empathy and compassion. Zakrzewski (2013:para12) shared this view, arguing that mindfulness training for teachers will enable teachers to become aware of themselves amidst crazy classroom situations, and rein in inappropriate responses while generating empathetic and caring thoughts instead. She continued by saying that teachers' deliberate practice of mindfulness will garner helpful qualities such as empathy and compassion which will strengthen the teacher-student relationship inside and outside the classroom. This perception is supported by Meiklejohn *et al.* (2012:291) who concluded that mindfulness training enhanced teachers' ability to "manage classroom behaviour and establish and maintain supportive relationships with students".

Like the abovementioned investigations into teaching, mindfulness in the workplace remains a stimulating research topic due to the desire on the part of some either to know how to effectively deal with workplace stress, manage interpersonal relations at work or for the mere reason of developing competence in the pursuit of a promotion. In this regard, Hunter and McCormick (2008:1) conducted unstructured interviews with eight managers and professionals who were fulfilling job-related roles such as physicist, magazine journalist, architect/academic dean, filmmaker, investment manager, writer, and university music chair, to explore the effect of mindfulness (contemplative practices) on people's work life. Analyses of the interviews suggested that people who engage in mindfulness training may: experience greater external awareness and acceptance of the work situation; have more modest and realistic goals; be more altruistic; be less concerned with material gain and wealth; have a more internal locus of focus, develop multiple sources of meaning in life; have greater ability to remain level headed; be more likely to perceive work difficulties as challenges instead of threats; experience more job gratification; be more adaptable to different work situations; and have more constructive interpersonal relations at work (Hunter & McCormick, 2008:27). Similar results were revealed in a mixed-methods study that explored the value and application of personal mindfulness when working in mental health contexts among occupational therapists (Reid *et al.*, 2013:279). In greater detail, the following five distinct therapeutic skills emerged as the ones most commonly promoted by mindfulness:

- 1) *perspective taking*: being able to clearly see and understand things from the clients' perspective;
- 2) *nonjudgmentality*: being able to remove personal judgement from the therapeutic process;

- 3) *active listening*: being present with clients and attentively listening to what they have to say;
- 4) *modelling*: being able to teach mindfulness principles as a result of ‘practising what one preaches’; and
- 5) *monitoring of boundaries*: being increasingly more skilled at managing countertransference and setting limits with difficult clients (Reid *et al.*, 2013:286).

In the light of the skills identified in the present study, the authors also questioned the participants about what strategies they used to preserve a nonjudgmental, open and aware attitude towards clinical practice. Three common themes emerged from the participants’ responses, which suggested that they were:

- 1) *taking care of themselves*: for example, they concluded that when they feel supported, less stressed and their personal wellbeing is taken care of, then they are more capable of caring for others in a better way;
- 2) *educating themselves*: reading literature on, and practising mindfulness, or attending mindfulness courses;
- 3) *engaging in organizational strategies*: such as decluttering the environment, whilst remaining mindful, open and aware (Reid *et al.*, 2013:287).

Thus, mindfulness training promotes general behaviour changes and adaptive qualities within humans that facilitate personal wellbeing and role optimization in the workplace.

Apart from the aforementioned profession-specific studies on the benefits of mindfulness, the time devoted to mindfulness practice in an attempt to become more mindful is a sensible endeavour for all humans since it enhances the meaning, functioning and satisfaction of life (Ball *et al.*, 2014:9). Generally, therefore, mindfulness can be assumed to be indispensable to the mastery of any professional pursuit, including the practice of ASP.

All the (therapeutic) skills benefits detailed above such as showing compassion, empathy, selfless behaviour, nonjudgmentality, attentive listening, emotional awareness, perspective taking, self-regulation, modelling, malleability as well as relationship formation, are keystones in effective sport psychology service delivery. It goes without saying that, being fully present in the moment could most certainly enable sport psychologists to connect with their environment, others and themselves with more precision and care. As regards the consultation with clients, this notion is underscored by Brito’s (2014:352) assertive inference that therapeutic growth is more

probable if clients perceive their therapist as warm, open, congruent and attuned to their inner needs. Despite the long duration and intricacy involved in fully understanding the ways of humans and their countless expressions (Skovholt & Jennings, 2005:14), mindfulness could surely pave the way towards mastery and professional development in ASP.

In view of a similarity in themes emerging from the foregoing discussion on PC counselling and mindfulness, the following section will focus on establishing some common ground between these respective Western and Eastern developed psychotherapeutic approaches.

2.8 Mindfulness: a foothold for person-centred counselling

The concept of right mindfulness, a spiritual and mental phenomenon which emanates from Eastern contemplative practices (Buddhist traditions) may seem radically different, perhaps even contradictory, to Western developed psychotherapy approaches. Yet, over the years, a few researchers/therapists have deliberated on and advocated the interrelatedness between the facets of mindfulness and various psychotherapeutic approaches (Bazzano, 2010:32; Beitel *et al.*, 2014:187; Kumar, 2003:40; McWilliams, 2012:230; Robins, 2002:50; Tophoff, 2006:127). Robins (2002:51) confirmed that the core teachings of Buddhism (such as *The noble eightfold path and its factors explained* by Sayādaw, 1977) echo the understanding of the constituent parts of human suffering which are significant to the field of psychotherapy.

Mindfulness is seen as a behavioural disposition that arises from a systematic process of deliberate and resolute attendance to moment-to-moment cognitive, affective, and sensory experiences (Shapiro & Carlson, 2009:4). The frequent practice of mindful-attendance to such cognitive, affective and sensory states is believed to harbour sanity and stability that are characterized by prevailing qualities in the self, such as being:

- *accepting*: embracing and accommodating all present-time thoughts and sensations without a desire to resist or strut against them;
- *nonjudgmental*: allowing any kinds of thoughts and sensations that arise to be without judgment – neither good, bad nor indifferent but just as they are;
- *patient*: having the ability to venerate the natural ebb and flow of things, especially as the self evolves through learning – not hastily and without forcing anything;
- *trusting*: accepting our inner wisdom as true and not trying to be any different from the true self;

- *nonstriving*: remaining relaxed in the direct experience, with no hope of or intention for anything in particular to happen;
- *able to let go*: separating the self from any thought, feeling or sensation, whether it be good or bad – staying present with the emergence and evolution of active occurrences, accompanied by
- *holding a beginner's mind*: perceiving each moment, breath, experience as new – regardless of similar past experiences – not allowing what we know to interfere with the direct experience (adapted from *Full catastrophe living: How to cope with stress, pain and illness using mindfulness meditation* by Jon Kabat-Zinn (2013:33-39).

These aforementioned qualities hold strong parallels with the counsellor's characteristics that were proposed by Rogers (1957) in his humanistic view of person-centred (PC) counselling. In brief recapitulation, Rogers's viewpoint, unlike other psychological approaches, regarded the PC counsellor and the client as equal partners, instead of the one being the treating expert (McLeod, 2008:2; Rogers, 1949:82). Rogers was consequently, placing an insuperable emphasis and value on the establishment of an open, and trusting (therapeutic) relationship with the client. This relationship is not founded on counsellors' level of expertise or application of specialized techniques but rather on the way of being which is characterized by: congruence (the counsellor is freely and deeply himself with the client), unconditional positive regard (the counsellor is open and accepting to every aspect the client presents), and empathetic understanding (the counsellor has a deep understanding of the client's private world – held at the moment) (Rogers, 1957:97-99).

As previously mentioned in this text, these three therapist/counsellor characteristics form the core (3rd, 4th and 5th conditions respectively) of the six fundamental conditions needed for therapeutic personality change in PC counselling (Rogers, 1957:95).

With the latter being clarified, the following question can be proposed: "How does mindfulness inform the PC therapist/counsellor?"

2.8.1 Mindfulness: a way to inform counsellor congruence (3rd condition of PC counselling)

Person-centred counsellors' hold an open and inviting (accepting) attitude to whatever clients wish to present in a moment of therapy. Moreover, Rogers (1957:98) proposed that PC

counsellors are fully aware and accepting of all the experiences presented by clients – in addition to the feelings and attitudes within the self at the moment in time. This PC counselling proposal strongly resonates with the operational definition of mindfulness which described it as “a process of regulating attention in order to bring a quality of non-elaborative awareness to current experience and a quality of relating to one’s experience within an orientation of curiosity, experiential openness, and acceptance” (Bishop *et al.*, 2004:234). Based on this description, one can see a striking resemblance between PC counselling and mindfulness in terms of having a fuller *awareness* of one’s experience, whilst holding an *open* and *accepting attitude* to every aspect of what is happening at that moment in time. In counselling, the aspects presented by the client are expected to stimulate a great part of the counsellor’s own sensations and experience – yet, like mindfulness – the need for accurate awareness of oneself and all that is present (such as the client in contrary), openness to arising aspects, and acceptance, form the cornerstone of the consulting behaviour of PC counsellors.

Complementing this behaviour is the fact that PC counsellors according to Rogers’s (1952:343) view, have neither the desire to judge or be biased against (nonjudgmental) any aspect that is presented by the client and experienced within, nor do they want to impose or suppress any particular occurrence during therapy (nonstriving). This behaviour resembles the mindfulness-instilled qualities such as perceiving things in a *nonjudgmental* manner and remaining relaxed or *nonstriving* in order to stay present with the experience of active occurrences (see author’s interpretation of Kabat-Zinn (2013) in the preceding pages). Much like mindfulness and similar Eastern teachings, Rogers’s PC approach to counselling values an ‘Oriental attitude’ within the counsellor (Tophoff, 2006:130). Rogers (1980:22), cited in Tophoff (2006:130) explained, “I don’t try to control a sunset. I watch it with awe as it unfolds”. This particular view additionally holds a strong parallel with the mindfulness qualities of being *patient* and *letting go*, which signify the ability to adopt a decentred perspective and embrace the natural flow of emergence without the need to change anything (Kabat-Zinn, 2013:34). This therefore means that, like mindfulness, PC counselling accepts and honours the natural ebb and flow (letting go) of counselling, without being influenced by a pre-conceived opinion of reality or a rigidly defended self-concept (beginner’s mind) (Thorne, 2010:4). In other words, the counsellor sees each experience and breath with the client as novel and original. Rogers (1952:344) has resonated with this, explaining that counsellors who liberate themselves from all intellectual inhibitions, conscious thought and analytical thinking, will become integrated persons (congruent – 3rd condition) in the relationship with the client. The implication is that PC counsellors hold no professional façade and are openly ‘being’ their inner flowing thoughts and feelings at the same

moment in time with the client. As a result, this guarantees that clients experience counsellors in an authentic (genuine) way (Rogers, 1957:98). Against this background, it is apparent that congruence in PC counselling is the secondary effect that arises from a counsellor's ability to effectively employ mindfulness-like qualities such as holding an accurate awareness of the aspects presented by the client and the feelings flowing within – in co-existence with an accepting, nonjudgmental and nonstriving attitude in the emerging situation as each aspect is perceived with a child-like (beginner's) mind.

2.8.2 Mindfulness: a way to inform unconditional positive regard (4th condition of PC counselling)

Mindfulness also paves the way for PC counsellors to move beyond a cognitive understanding of the client's world to a level of embodiment (unconditional positive regard – 4th condition) (Bazzano, 2011:120; Bazzano, 2010:34). For example, the mindfulness qualities of experiential openness and unconditional acceptance of present-moment experiences garner a much deeper understanding not only of the self but also of its intersubjective and interdependent relationship with existential phenomena which dissolves all boundaries that define the distinctive self (Padilla, 2010:7). The implication of this is liberation from self-interest for a meaningful awareness of one's interdependence on what is (Beitel *et al.*, 2014:192) which is believed to result in an embodied presence and a natural unconditional positive regard for what is in present moment experiences (Bazzano, 2011:126). In a very similar way, the behaviour of PC counsellors bears no barricade to 'you-ness' or 'me-ness' and is intentionally aimed at becoming one with the client (Rogers, 1979:6), meaning that the client's world view is completely and utterly accepted, and denoting a demonstration of unconditional positive regard.

Analysis of recorded conversations with PC counsellors, who regularly engaged in mindful meditation, sustained the interrelatedness of mindfulness and their ability to offer unconditional openness and embodied presence (Bazzano, 2011:125). One counsellor in particular confessed that mindful meditation allowed the breakthrough in his ability to connect with the world and the other (Bazzano, 2011:123). A personal account from the author's experience of how mindfulness meditation informs his ability to practise as a PC therapist; stated,

“What I did notice was that if I discontinued meditation practice for a day or two, the quality of attention and empathy I gave to the clients was affected: the quality of my

awareness became more opaque, and the ability to be in the present moment with the client did not feel as natural” (Bazzano, 2010:32).

Grounded on both Bazzano’s (2010:34) personal account and the collected views of other PC counsellors (Bazzano, 2011:126), the conclusion drawn was that mindful meditation cultivates an open-hearted way of being that appreciates life’s imperfections which, in effect, produces the ability to show a deep care and understanding for the self as well as for the client.

This notion echoes Rogers’s (1957:95) view on empathetic understanding (5th condition) which underscores the therapist’s ability to deeply experience the client’s world with no attachment to self.

2.8.3 Mindfulness: a way to inform empathetic understanding (5th condition of PC counselling)

In view of the preceding discussion, mindfulness provides an explanatory framework for the facility of empathizing with others. Mindfulness, in this instance, promotes a decentred perspective on thoughts and feelings, which provides a clearer understanding of the impermanence and transient nature of experience (Bishop *et al.*, 2004:236; Geller, 2003:261). This implies that mindfulness allows one to remain present with a full range of experiences whether they be positive or negative – excluding the possibly of being emotionally overwhelmed or developing a need to resist or judge. This capability allows one to slide along with the emerging nature of the experience providing a richer understanding of what is (Geller, 2003:261). Bazzano (2010:33) agreed to this, claiming that mindfulness provides the self with a sense of fluidity that is mouldable to the experiencing situation, and allows for a deeper understanding of and acquiescence to phenomena. This view of mindfulness corresponds to Rogers’s (1961:111) description of an “organismic experiencing” that denotes a sense of oneness with the client rather than a self-existing entity. Mindfulness will therefore facilitate empathetic understanding in PC counselling and enable counsellors’ to effectively set aside their own frame of reference in order to see the world through the client’s eyes. Padilla (2010:8) concurred, adding that compassion for the self and the other is a natural extension of mindfulness since it enables one to experience an “innate affinity with all beings”.

This suggests that mindfulness encapsulates empathetic understanding (5th condition) because it embraces a deep probing of the existential dilemma of a client’s world view, together with a curious and accepting appreciation of human nature (Bazzano, 2011:120; Bazzano, 2010:35;

Beitel *et al.*, 2014:199). Researchers have confirmed this notion thus supporting the association between mindfulness and therapists' ability to show compassion and understanding of clients' perspectives (Davis & Hayes, 2011:202; Reid *et al.*, 2013:286).

It is believed that the aforementioned conditions form an integrated part of PC counsellors' personality and become a life-affirming way of being instead of the mere application of techniques (Rogers, 1979:8). Rogers argued that, only when a client experiences these counsellor conditions (ways of being) in an authentic and sincere way, will they provide an opportunity for therapeutic change (personal growth and actualization). In the light of this, when mindfulness is compared with Rogers's 'way of being', it is not a contextualized tool or a conceptual knowing but rather a cultivation of wisdom (awareness and insight) and compassion that establishes a way for human flourishing (Brito, 2014:356). The preceding line of reasoning indicates an acceptance of the fact that mindfulness and PC counselling are separate but complementary streams of a collective ideology (Rogers, 1979:8), and that, in isolation, PC counselling is symbiotic with, and consequential to, mindfulness. The writer's conclusive assumption on this matter has been confirmed in personal communications with mentoring psychologists in that they were of the opinion that the two concepts form a formidable combination that functions as "two sides of a coin" (Steyn, 2014) and can be experientially construed as a "Dialectical Behaviour Therapy Dance" (Edwards, 2014). In the light of this, the override principles of mindfulness and PC counselling mentioned in this text surely provide a strong basis and motive for the development of other Buddhist-derived (mindfulness meditation) approaches in therapy such as the Dialectical Behaviour Therapy (DBT) (Linehan, 1993), and Acceptance Commitment Therapy (ACT) (Hayes *et al.*, 1999) which in essence are founded on the principle of acceptance of all aspects of expression and experience (Padilla, 2010:10).

2.9 Conclusion

This literature review attempted to provide insight into the current nature of ASP with a documented view on the current theoretical definitions of sport psychology, relevant training and education requirements, practitioners' views on professional development, and competencies essential to service delivery. The PC counselling framework within psychotherapy, along with the conditions for therapeutic change, was also conceptualised in order to draw attention to the natural applicability and relevance of PC counselling to athlete-centred services in contemporary sport psychology service delivery. This review also disseminated the literature on mindfulness in an attempt to clarify its intricate nature, inherited benefits, and potential role in facilitating the

pursuit of therapeutic endeavours such as in ASP. In conclusion, this review has drawn attention to the strong parallels between PC counselling and mindfulness and the efforts to unify Eastern and Western perspectives on the alleviation of human suffering for the potential advancement and future incorporation of counsellor training.

What the cited literature revealed was that, to date, sport psychology still lacks a comprehensive and encapsulating definition that addresses the sophisticated nature of the practice. The underdeveloped understanding of the applied nature of sport psychology could presumably be a reason why there are no universal standards – or in some cases – even national and interstate standards, for educating and “credentialing” ASP practitioners, which, as noted, leaves the field open to unscrupulous and charlatan practices. All the same, over the years, countries such as the UK have developed a rigid credentialing pathway to ensure the integrity and recognition of the profession. The perceptions of neophyte sport psychologists were probed and clearly indicated that formalised sport psychology training models are ill-equipped to teach developing sport psychologists the skills necessary to render consultation services beyond the confines of rudimentary MST or sport science approaches. It was noteworthy that contemporary sport psychology practice faces a broad spectrum of person-related issues that are not so much athlete-or-sport-related as demanding a need for more refined psychological approaches to address athlete-clients as unique individuals. The obvious moral to be gleaned from all this was that the education of sport psychologists should be undertaken equally by psychology departments and sport-training institutions, and that trainee sport psychologists should be exposed to diverse client consulting and peer networking opportunities under the supervision of numerous supervisors.

The cited literature on sport psychology service delivery indicates that consulting effectiveness is becoming more reliant on practitioners’ *way of being* than on their professional *doing*. Empirical evidence has revealed that practitioners who are honest, trustworthy, open, and able to address an athlete’s individual needs, together with being able to provide an athlete with a sense of empowerment and independence, are more effective in practice. These qualities undeniably echo the cornerstones of Carl Rogers’ therapeutic conditions in PC counselling, such as counsellor congruence, unconditional positive regard and empathetic understanding for the client. Hence, it was confirmed that contemporary sport psychology service delivery falls largely within Rogers’ interpretation of therapy, the essence of which is an appreciation of clients’ own resources for self-fulfilment, growth and behaviour change, regardless of whether they are athletes or coaches.

Mindfulness, together with mindfulness-based interventions appears to be a promising and noteworthy modality enhancing both psychotherapy practice and patient treatment since it proves to significantly enhance brain processes, and transformative values such as self-development, transcendence, self-healing and wellbeing. As regards therapeutic practice, mindfulness was revealed as instilling a sense of therapeutic presence that enables therapists/counsellors to fully hear their clients' stories, empathize both cognitively and affectively with their clients, and develop therapeutic relationships. Moreover mindfulness was associated with enhanced levels of therapists' compassion and acceptance of themselves and their clients as well as nonreactive behaviour, and countertransference management during therapy. Counsellors who engaged in mindfulness training have also reported an improvement in their self-care with positive contributions to their physical, emotional and cognitive functions. Despite the lack of empirical evidence on the effects of mindfulness on sport psychology, service delivery, the argument from a counselling perspective was that mindfulness could be a springboard to practitioners' professional development and efficacy in terms of quieting their own "monkey minds" (Hanson, 2009 cited by Ponton, 2012:191) to become fully present with athlete-clients' in an open and nondirective way. Irrespective of the unusual environments in which sport psychology is practised, it is believed that mindfulness will provide sport psychologists with the qualities required to deliberately attend to the experience with the client in a nonstriving manner free from the interferences of their own fears or desires, and ensuring a deeper and fuller understanding of their clients' individual needs. The crucial conclusion was that mindfulness will inspire ASP practitioners with an accepting sense of equanimity and inner wisdom that will perceptively inform their way of being as deemed appropriate in the present situation, instead of inappropriate reactions based on transient thoughts or pre-established theoretical frameworks.

In line with these discussion points, mindfulness was proven to be a strong basis for PC counselling since it was shown to be a behavioural trend grounded on an alert presence, unshakeable acceptance, openness, patience, curiosity and equanimity. Essentially, like a PC counselling approach, mindfulness informs a life-affirming way of being that embodies an innate identification with human nature which generates a caring and kind presence that paves the way for human flourishing (Brito, 2014:356).

The proposal resulting from conducting this literature overview, is that policy makers, sport psychology educators and supervisors should consider the incorporation of customary psychotherapeutic approaches such as the PC counselling approach, along with the novel yet ancient tradition of mindfulness-meditation, into the mastery-based experiences of both trainee

and developing sport psychologist. The information presented here should provide a sound knowledge base for countries such as South Africa that are progressing towards the development of specialised sport psychology degrees and professional accreditation.

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CHAPTER 3

RESEARCH ARTICLE 1: MINDFULNESS: A FOOTHOLD FOR ROGERS'S HUMANISTIC PERSON-CENTRED APPROACH

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Mindfulness: A foothold for Rogers's humanistic person-centred approach

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Abstract

This article probed and contextualised the strong parallels between meditation derived mindfulness and Rogers's humanistic person-centred (PC) approach. This was done through a conceptual and evaluative literature review of the PC framework in relation to definitive descriptions of mindfulness. Elements of mindfulness within the core conditions of PC therapy were explored and verified. Quotations, pragmatic, behavioural descriptions and explications provided evidence of a shared ideology inherent in both concepts via "way of being". The findings suggested that mindfulness cultivates, harmonises and deepens essential therapist qualities in PC therapy. This review article could supply a rationale for significant inferences in the implementation of meditation-inspired activities in the practical preparation of trainee therapists as well as optimising proficiency and refinement in professional practice.

Keywords: mindfulness, meditation; person-centred (PC) approach, therapist.

3.1 Introduction

At present, there appears to be an emergent interest in the interrelatedness between Western schools of psychology and Eastern Buddhist traditions (Robins, 2002; Kumar, 2002; Tophoff, 2006; Bazzano, 2010; McWilliams, 2012; Beitel, Bogus, Hutz, Green, Cecero, & Barry, 2014). Carl Rogers argued that the PC approach embraces a naturalistic phenomenon typified by a profound sense of presence which bears a strong resemblance to oriental views (Rogers, 1961; Rogers, 1979). This notion is largely based on a person-centred (PC) therapist's deep-seated awareness and liberation of the self when consulting with clients to avoid the interference of some preconceived structure of reality or rigid self-concept (Thorne, 2010). The affirmation arising from this notion was that the Eastern meditatively inspired concept of mindfulness is a skill that is associated with increased awareness of the self, and acceptance of the situation at hand without the desire to enforce a preconceived scientific objectivity, especially in the process of service delivery (Ponton, 2012). In recent years, several researchers have linked mindfulness with a more effective therapeutic presence (McCollum & Gehart, 2010; Campbell & Christopher, 2012). Mindfulness amongst therapists has proven not only to improve their levels of self-efficacy, empathy and ability to direct attention (Greason & Cashwell, 2009; Bruce, Manber, Shapiro, & Constantino, 2010), but also to advance their levels of compassion for and acceptance of themselves and others (Christopher & Maris, 2010; McCollum & Gehart, 2010). Mindfulness was also found to contribute to developing therapists' global counselling skills such as establishing a therapeutic relationship, tolerating affect, session management and appropriate self-disclosure (Buser, Buser, Peterson, & Seraydarian, 2012).

This article contends that mindfulness in therapy not only “paves the way for human flourishing” (Brito, 2014, p. 358) but could also provide a strong foothold for effective PC therapy. Despite the apparent possibilities, mindfulness in relation to PC therapy has not been studied in great detail. For this reason, the authors of this paper seek to explore the elements of mindfulness in PC therapy to promote informed dialogue between Western psychology (the PC approach in particular) and Eastern Buddhist-inspired practices such as mindfulness. Improved knowledge and understanding of the interrelatedness between these constructs is likely to advance PC therapy by way of training, education, and professional practice. In this paper the authors will attempt to relate a theoretical framework for the PC approach (which they provide) to core constructs of mindfulness (which they disseminate), since this relation holds particular promise to inform PC therapy. Before mindfulness elements in the PC approach are explored, some background on both constructs is provided since they are remarkably multifaceted.

3.2 Person-centred approach: a theoretical framework

PC therapy emanated from the work of the humanist psychologist Dr Carl Rogers (1902–1987). The PC approach is robustly rooted in a humanistic philosophy, which relies on people's self-actualising capability for therapeutic change, given the proper environment. The quintessential objective of this approach in therapy is to establish a supportive therapeutic climate which permits self-healing and personal growth within the client (Africa, 2011). Unlike concomitant approaches in psychology such as psychoanalysis and behaviourism, the PC approach values the nature of the therapeutic relationship in which the client, instead of the therapist, directs the process of therapy (Rogers, 1952). Rogers explained that the client is the expert of his or her own distress and should therefore be the mechanism that directs the process of healing. Rogers's own clinical experiences, research and observations led to the notion that people have the inherited potential for self-understanding and constructive personality change (self-actualisation) given a definable atmosphere of six "necessary and sufficient" conditions namely: psychological contact between two persons; a client that is incongruent, vulnerable or anxious; a therapist who is congruent or integrated in the relationship; an unconditional positive regard for the client; empathetic understanding of the client's internal frame of reference, and a communication of the therapist's empathetic understanding; and unconditional acceptance of the client (Rogers, 1957). Of the six fundamental and facilitative conditions, therapist congruence, empathic understanding, and unconditional positive regard have evoked the most research interest since they form the core (3rd, 4th and 5th conditions respectively) of the six conditions needed for therapeutic personality change (Rogers, 1957). With a view to underscoring the relevance of this paper, these three conditions, which mostly reflect the therapist's qualities, will be discussed in greater detail.

3.2.1 Therapist congruence

Congruence within the confines of the counselling relationship signifies the therapist's awareness of the self which allows a genuine, wholehearted and honest expression of the actual experiences held at that moment with the client (Rogers, 1957). Therapists' reactions are therefore consistent with their inner thoughts and feelings, and this develops a sense of authenticity. Rogers's personal account of practice verifies this notion: he states that:

"I let myself go into the immediacy of the relationship where it is my total organism which takes over and is sensitive to the relationship, not simply my consciousness. I am not consciously responding in a planful, or analytic way, but simply react in an

unreflective way to the other individual, my reaction being based, (but not consciously) on my total organismic sensitivity to this other person" (Rogers, 1952, p. 343).

This extract reflects the non-directional emergence into the client's subjective world without a desire to fit it into a preconceived notion of reality. Hence, the challenge for therapists here is to make sure that their own needs do not interfere with or gain preference over the client's unique needs and concerns (Petitpas, Giges, & Danish, 1999). Communication of realness, honesty and openness by therapists in this respect has proven to be critical to establishing a collaborative working relationship with clients (Rivera, Phan, Maddux, Wilbur, & Arredondo, 2006).

3.2.2 Empathetic understanding

Empathy is defined as the "therapist's sensitive ability and willingness to understand the client's thoughts, feelings, and struggles from the client's point of view" (Rogers, 1980, p. 85). An African perspective draws on the Pedi idiom "mollo ofisa baori" which means that "only the person exposed to the fire can tell how hot it is" to convey the need for therapists to adopt the frame of reference of their clients in order to experience their inner world (Grobler, Schenck, & du Toit, 2003, p. 48). Therefore, empathy is the ability to see and experience the world from the client's frame of reference in a manner which is constituted by the therapist's unconditional openness to whatever the client discloses about their immediate experiences. A felt sense of the client's inner world enables the therapist to communicate his or her understanding and make inferences about the client's subjective worldview. For that reason, empathy is a skill that requires significant awareness, concentration and communication to accurately communicate the client's experiences.

3.2.3 Unconditional positive regard

Rogers (1957) explained that an unconditional positive regard is one in which a therapist fosters care towards the client regardless of the client's individual experiences and feelings. In other words, the therapist unreservedly accepts all the client's experiences at a particular point in time without any "ifs" or "buts" – no matter what the presenting behaviour is. This implies that the therapist does not have to approve or critically judge the client's actions but prizes their personhood instead (Barret-Lennard, 1998; McLeod, 2008). Therefore, the notion of unconditional acceptance by a therapist is that clients will grow and fulfil their potential when they are truly valued as persons of worth.

The intuitive appeal of the aforementioned is that the PC approach seems rather unorthodox as it holds a very positive and optimistic view of human nature which is underpinned by an utmost respect for individual clients and a value of their self-worth. The PC therapist trusts that the client knows best and that, with the appropriate provision of facilitative circumstances, the client's self-concept will actualise in accordance with his or her organismic valuing process (Patterson & Joseph, 2007), which resonates with Rogers's idea of therapeutic change.

3.3 Mindfulness: what is mindfulness?

Mindfulness as a tradition is rooted in Eastern introspective practices such as Buddhist meditative practice (*Vipassana*), which can be traced back more than 2 600 years in history to the teachings of Buddha, who existed in north-east India (Bodhi, 2011). The teaching by Buddha, referred to as "Dhamma", was established on principles and practices for human beings to overcome suffering (*dukkha*) and gain insight into their pursuit of true happiness and spiritual freedom (*nibbāna*) (Sayādaw, 1977).

A general English rendition of mindfulness from the Pali language *Sati Sampajañña* connotes an estimation of awareness, circumspection, discernment, and retention (Shapiro, 2009). A renowned Western definition of mindfulness described the concept as "paying attention in a particular way: on purpose, in the present, and nonjudgmentally" (Kabat-Zinn, 1994, p. 4). Jon Kabat-Zinn (1994), who was one of the forerunners of integrating mindfulness into Western therapeutic practices, briefly characterised mindfulness as a kind of attention that is underlined by greater awareness, clarity, and acceptance of one's immediate experience. Almost a decade later and after much scientific scrutiny and rigorous evaluation, a consensus meeting between mindfulness teachers, experts and practitioners led to a proposed operational definition which conceptualised mindfulness as "a process of regulating attention in order to bring a quality of non-elaborative awareness to current experience and a quality of relating to one's experience within an orientation of curiosity, experiential openness, and acceptance" (Bishop, Lau, Shapiro, Carlson, Anderson, Carmody, & Velting, 2004, p. 234). These authors also affirmed that mindfulness is a process of dispassion (de-centred perspective) that skilfully allows one to ascertain the rationality and ephemeral nature of one's direct thoughts and feelings (Bishop et al., 2004). A more recent and condensed definition of mindfulness also portrayed a state of general receptivity and full engagement with present-moment experiences (Black, 2011). Within the context of psychology, mindfulness is viewed as an outcome (mindful awareness which

manifests a resolute presence that is free of grasping, repugnance and delusion) that arises from a systematic process (mindful practice which involves deliberate attendance in an open, accepting, and discerning way) in moment-to-moment cognitive, affective, and sensory experiences (Shapiro & Carlson, 2009). Mindfulness is therefore not just the mere allocation of attention to a particular object (as the case is with concentration), but rather a heightened awareness of an unfolding experience that is in co-existence with a non-judgemental, and accepting attitude towards the self and the other (Brown, Marquis, & Guiffida, 2013). In support of Shapiro and Carlson's (2009) view of mindful practice, Gardner and Moore (2007) affirmed that individuals can be taught to become mindful with the frequent engagement of exercises that include various meditation-inspired activities.

The above-mentioned clarification of Rogers's PC approach and Eastern-derived concept of mindfulness underscored collective elements that form the keystones of distinctive phenomena which appear to inspire a shared ideology. The following section will attempt to highlight and verify parallels between these two concepts.

3.4 Mindfulness: a foothold for person-centred counselling

The spiritual and mental concept of "right" mindfulness may seem radically different, perhaps even contradictory to Western psychology. Yet, a number of researchers/therapists have over the years deliberated and advocated the interrelatedness between the facets of mindfulness and various schools of psychology (Robins, 2002; Geller, 2003; Kumar, 2002; Tophoff, 2006; Bazzano, 2010; McWilliams, 2012; Beitel et al., 2014). The inference has been that the core teachings of Buddhism (see, e.g., Sayādaw, 1977) document the understanding of human suffering which, in its constituent parts, is significant in the field of psychotherapy (Robins, 2002). This notion could be strongly connected with the PC therapist, especially if one considers the fact that, in contrast to other psychological approaches, the PC therapist and the client are equal partners – a relationship which requires a cultivated way of being rather than the attainment of expertise (Rogers, 1949; McLeod, 2008). Such intricate practice surely necessitates a conscious and harmonious character to fully proffer the core conditions (congruence, unconditional positive regard and empathetic understanding) needed for therapeutic change as specified by Rogers (Bazzano, 2011).

Similarly, instead of being a contextualised tool, mindfulness is a refinement of awareness, insight, and compassion that paves the way for human flourishing (Brito, 2014). A more specific

argument is that the frequent practice of mindful attendance for moment-to-moment cognitive, affective, and sensory experiences will result in the harbouring of sanity and stability, which is characterised by prevailing qualities in the self, such as being:

- accepting: embracing and accommodating all present-time thoughts and sensations without a desire to resist or push against them
- nonjudgmental: allowing any kind of thoughts and sensations that arise to be without judgment – neither good, bad nor indifferent but just as they are
- patient: having the ability to venerate the natural ebb and flow especially of the self as it evolves through learning, not hastily and without forcing anything
- trusting: accepting our inner wisdom as true and not trying to be any different from the true self
- nonstriving: remaining relaxed in the direct experience, with no hope or intention for anything in particular to happen
- able to let go: separating the self from any thought, feeling or sensation, whether good or bad
- able to remain present with the emergence and evolution of active occurrences, accompanied by (being)
- able to hold a beginner's mind: perceiving each moment, breath, experience as new, regardless of similar past experiences – not allowing what we know to interfere with the direct experience (adapted from *Full catastrophe living* by Jon Kabat-Zinn, 2013, pp. 33–39).

Seemingly, these qualities hold strong parallels with PC therapists' embodied way of being when fostering a climate that permits self-healing and personal growth within the client (Rogers, 1957). Nonetheless, detailed reference to the mindfulness elements/qualities concerning the core conditions of the PC approach could substantiate this contention.

3.4.1 Mindfulness: a way of informing therapist congruence (3rd condition of PC counselling)

Rogers (1957) proposed that PC therapists should be fully aware and accepting of all the experiences presented by clients, in addition to the feelings and attitudes within the self at that point in time. This proposition of PC therapy firmly resonates with the contention of having a fuller “awareness” of one's experience, whilst holding an open and “accepting attitude” to every aspect at that precise moment as proposed by Bishop and colleagues (2004) whose operational

definition of mindfulness is cited in this paper. In therapy, those aspects presented by the client are expected to stimulate a great part of the therapist's own sensations and experience. However, as with mindfulness, the need for accurate awareness of one's self and all that is present (e.g. the client), openness to, and acceptance of arising aspects then forms a cornerstone of the consulting behaviour of PC therapists.

Complementing this behaviour, the view of PC therapists in Rogers (Rogers, 1952) evinces neither the desire to judge or be biased against any aspect that is presented by the client and experienced within, nor the wish to impose or suppress any particular occurrence during therapy. This behaviour resembles the mindfulness-instilled qualities such as perceiving things in a nonjudgmental manner and remaining relaxed or nonstriving in order to stay present with the experience of active occurrences (see these writers' interpretation of Kabat-Zinn (2013) in the preceding pages). Much like mindfulness and similar Eastern teaching, Rogers's PC approach to counselling values an "Oriental attitude" within the therapist (Tophoff, 2006). Rogers (1980) (cited in Tophoff, 2006) explained that "I don't try to control a sunset. I watch it with awe as it unfolds" (p. 130). This view in particular additionally holds a strong parallel with the mindfulness qualities of being patient and letting go, which signifies the ability to adopt a decentred perspective and embrace the natural flow of emergence, without the need to change anything (Kabat-Zinn, 2013). This ties in with the meaning that PC counselling, akin to mindfulness, is accepting and honouring the natural ebb and flow (letting go) in counselling without being influenced by a pre-conceived opinion of reality or a rigidly defended self-concept (beginner's mind) (Thorne, 2010). In other words, the therapist sees each experience with the client as novel and new. Rogers (1952) shared this view, explaining that therapists who liberate themselves of all intellectual inhibitions, conscious thought and analytical thinking will become integrated persons (congruent – 3rd condition) in the relationship with the client. He implies that PC therapists do not knowingly hold any façade and are openly living their thoughts and feelings as they flow within at that precise moment. The result of this openness with the client safeguards the client's experiences with the therapist in an authentic way (Rogers, 1957). In the light of this, it is apparent that congruence in PC counselling is a secondary effect emanating from the therapists' ability to effectively employ mindfulness-like qualities such as holding an accurate awareness of the aspects presented by the client and the feelings flowing within. This coexists with an accepting, nonjudgmental and nonstriving attitude in the emerging situation as each aspect is perceived with a beginner's mind.

3.4.2 Mindfulness: a way of informing unconditional positive regard (4th condition of PC counselling)

Mindfulness also paves the way for PC therapists to move beyond a cognitive understanding of the client's world to a level of embodiment (unconditional *positive regard* – 4th condition) (Bazzano, 2011; Bazzano, 2010). For example, the mindfulness qualities of experiential openness to and unconditional acceptance of present moment experiences garner a much deeper understanding not only of the self but also of its inter-subjective and interdependent relationship with existential phenomena which dissolves all boundaries that define the distinctive self (Padilla, 2010) – thus implying liberation from self-interest for a meaningful awareness of one's interdependence with what is (Beitel et al., 2014), which is believed to result in an embodied presence and natural unconditional *positive regard* for what is in the present-moment experiences (Bazzano, 2011). Similarly, the behaviour of PC therapists bears no barrier of “you-ness” or “me-ness” and is intentionally aimed at becoming one with the client (Rogers, 1979). This signifies that the client's world view is completely and utterly accepted, thereby denoting a demonstration of unconditional *positive regard*. Analysis of recorded conversations with PC therapists, who regularly engaged in *mindful meditation*, sustained the interrelatedness of mindfulness and their ability to offer unconditional openness and embodied presence (Bazzano, 2011). One therapist in particular confessed that *mindful meditation* facilitated the breakthrough in his ability to connect with the world and with others (Bazzano, 2011). A personal account from that author's experience of how *mindfulness meditation* informs his ability to practice as a PC therapist stated that “what I did notice was that if I discontinued meditation practice for a day or two, the quality of attention and empathy I gave to the clients was affected: the quality of my awareness became more opaque, and the ability to be in the present moment with the client did not feel as natural” (Bazzano, 2010, p. 32). With due regard for both Bazzano's (2010) personal account and the collected views of other PC therapists (Bazzano, 2011), it was concluded that *mindful meditation* cultivates an open-hearted way of being that appreciates life's imperfections, which in effect promotes the ability to show a deep care and understanding of both the self and the client. This notion echoes Rogers's (1957) view on empathetic understanding (5th condition) which underscores the therapist's ability to deeply experience the client's world with no self in mind.

3.4.3 Mindfulness: a way of informing empathetic understanding (5th condition of PC counselling)

In view of the preceding, mindfulness provides an explanatory framework for the facility of empathising with the other. Mindfulness, as used here, promotes a decentred perspective on thoughts and feelings, which provides a clearer understanding of the impermanence and transient nature of experience (Geller, 2003; Bishop et al., 2004) – hence enabling one to stay present with a full range of experiences whether they are positive or negative without the possibility of being emotionally overwhelmed or developing a need to resist or judge. This capability allows one to “slide along” with the emerging nature of the experience, providing a richer understanding of what is (Geller, 2003). Bazzano (2010) corroborated this, claiming that mindfulness provides the self with a sense of fluidity that is mouldable to the experiencing situation, which, in turn, allows for a deeper understanding of and acquiescence to phenomena. This view on mindfulness corresponds to Rogers’s (1961, p. 111) notion of an “organismic experiencing” that imparts a sense of oneness with the client rather than a self-existing entity. Mindfulness will therefore facilitate empathetic understanding in PC counselling, thus enabling therapists’ to effectively set aside their own frame of reference in order to see the world through the client’s eyes. Padilla (2010) concurred and explained that compassion for the self and the other is a natural extension of mindfulness as it enables one to experience an “innate affinity with all beings” (p. 8).

This leads to the proposal that mindfulness encapsulates *empathetic understanding* (5th condition) since it embraces a deep enquiry into the existential dilemma of a client’s world view together with a curious and accepting appreciation of human nature (Bazzano, 2010; Bazzano, 2011; Beitel et al., 2014). Researchers have confirmed this notion thus buttressing the association between mindfulness and therapists’ ability to show compassion for and understanding of clients’ perspectives (Davis & Hayes, 2011; Reid, Farragher, & Ok, 2013). In view of the authors’ preceding viewpoint, Table 1 reflects a synthesis of critical findings which document the relevance of *mindfulness meditation* in the facilitation of PC therapy.

Table 3.1: Critical findings on how mindfulness-meditation informs the PC therapist

Study	Method	Concluding remarks
Felder et al. (2014:20). <i>Mindfulness at the heart of existential-phenomenology and humanistic psychology: a century of contemplation and elaboration</i>	Historical review of literature	Mindfulness-based work allows for the cultivation of a simple and pure inner awareness of experience that is also, paradoxically, a broad interconnected consciousness of one's wovenness into the fabric of the world.
Bazzano (2011). <i>The Buddha as a fully functioning person: towards a person-centred perspective on mindfulness</i> Bazzano (2010). <i>Mindfulness in context</i>	Author's narrative combined with analysis of small scale heuristic research study which involved recorded interviews with person-centred therapists (n = 4) with experience in mindful-meditation practices	Mindfulness-meditation promoted therapists': • unconditional, non-judgemental openness • embodied presence and broader awareness of clients • ability to stay with clients - being present to pleasant and grim experiences • curiosity - the ability to stay with a question • compassion - the self-nurturing provided by meditation-promoted natural empathy and unconditional positive regard towards clients • improved therapeutic relationship • awareness of therapist's self-concept.
Tophoff (2006). <i>Sensory awareness as a method of mindfulness training within the perspective of person-centred psychotherapy</i>	A conceptual exploration of literature	Mindfulness mediated by sensory awareness practices promotes a clutter-free, in-the-moment organismic experience for therapists which ensures a deeper connection with clients. Mindfulness is instrumental to PC therapy.

3.5 Conclusion

Established from the above, it is apparent that mindfulness and PC counselling are distinct yet very complementary, especially in view of a collective ideology that intends to inspire an atmosphere for therapeutic change. Mindfulness provides a strong foothold for PC counselling since it was shown to be a behavioural tendency which is based on an alert presence, unshakeable acceptance, openness, patience, curiosity and equanimity. Mindfulness, like the PC approach, informs a life-affirming way of being that embodies an innate identification with human nature that in essence garners acceptance, congruence and compassion – hence the belief that mindfulness not only forms the pivotal ingredient, but also acts as the catalyst (process guide) which promotes the core conditions in effective PC (non-directive) therapy. In essence,

the phenomenological and existential stance taken by the authors of this review is that mindfulness inspires the PC therapist to be grounded in a prodigious way and become aware of the wider organismic reality which is liberated of distortion, bias, skewed acuities or rigid self-concept. The PC therapist is enabled to find affinity with what is and to experience a total organismic sensitivity to the unique inner thoughts and feelings of a client during therapy. In view of the fact that the PC approach is primarily grounded in the therapist's being truthfully human, it appears sensible to cultivate such a profound way of being with meditation-inspired activities. In the light of this, the overriding principles of mindfulness and PC counselling mentioned in this paper will surely provide strong support and motive for the incorporation of meditation-inspired activities in the training of PC therapists as well as the potential value of other Buddhist-derived (*mindfulness meditation*) approaches in therapy such, as the dialectical behaviour therapy (DBT) (Linehan, 1993), and acceptance commitment therapy (ACT) (Hayes, Strosahl, & Wilson, 1999), which in essence are founded on the principle of acceptance of all aspects of expression and experience (Padilla, 2010).

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CHAPTER 4

RESEARCH ARTICLE 2: ESSENTIAL COMPETENCIES IN CONTEMPORARY APPLIED SPORT PSYCHOLOGY: COMPARATIVE PERSPECTIVES FROM SOUTH AFRICA AND THE UNITED KINGDOM

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Essential competencies in contemporary applied sport psychology: Comparative perspectives from South Africa and the United Kingdom

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Abstract

Investigation of essential competencies in present-day sport psychology practice is critical to keeping the training, education and regulation standards of applied sport psychology (ASP) practitioners at the forefront of research (Fletcher & Maher, 2013). Moreover, investigation is also needed to offer a new rationale for promoting academic inquiry in developed and developing contexts. This study identified essential competencies in contemporary sport psychology practice and explored the comparative views of a purposefully selected sample (n=9) of expert ASP practitioners/psychologists. Data were gathered by means of semi-structured interviews with stakeholders in South Africa (SA) and the United Kingdom (UK). Interview data were analysed using thematic content analyses. Main findings suggested that a relational and dependable character, a client-centred focus, an all-encompassing counselling skills-set (facilitative and restorative), and explicit expertise in the domains of psychology, sport and sport science are indispensable to current sport psychology practice. Views generated by both stakeholders were remarkably similar and overlapped considerably, which indicated the advanced levels of sport psychology praxis in both contexts. It was recommended that behavioural indicators (personal character) and certain skills prerequisites merit special consideration for candidates entering ASP training and practice. An interdisciplinary training model in ASP with acquired competency in both kinesiology and psychology-based training should become the accepted standard in the training and development of practitioners for the purpose of garnering an inclusive capacity to render client-centred services.

Keywords: Applied sport psychology (ASP), competencies, contemporary practice, practitioners.

4.1 Introduction

Professional competence is perceived as “the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served” (Epstein & Hundert, 2002:227). Competence is therefore a candidate’s overall capability to perform critical work-tasks in a defined setting. Competence in any particular profession is instituted by an interactive and unified constellation of skills, knowledge, behaviour, strategies, values, attitudes and abilities which are formally referred to as competencies (Moore, Cheng & Dainty, 2002; Rubin, Bebeau, Leigh, Lichtenberg, Nelson, Portnoy & Kaslow, 2007). Competencies, therefore, encapsulate whole person qualities/skills that are determined and evaluated against contextualized standards associated with sustained performance criteria (Fletcher & Maher, 2013) which in view of applied sport psychology (ASP) are the qualities/skills essential for safe and effective practice (Tenenbaum, Lidor, Papaianou & Samulski, 2003; Fletcher, 2015).

A recent movement towards a competency-based understanding in ASP emphasized the developmental and contextual nature of competence and suggested that a minimum threshold of competencies relevant to current sport psychology practice be continually reviewed and aligned to training to ensure safe and effective service delivery (Fletcher & Maher, 2013). This contention follows a review and identification of generic limitations in existing training documentation and recognized competence standards in ASP such as the Association of Applied Sport Psychology’s (AASP) certification criteria (AASP, 2015), American Psychology Association (APA) Division 47 Self-Assessment Checklist (APA, 2005), International Society for Sport Psychology (ISSP) competencies position stand (Tenenbaum et al., 2003), and the athlete-counselling competencies proposed by Ward, Sandstedt, Cox and Beck (2005). Pervading these varying competence standards in ASP are the effects of the general education and training models in two distinct academic domains namely kinesiology/sport science, and psychology which focus on performance enhancement and therapy-based work respectively (Cremades, Tashman & Quartiroli, 2014). The consequence of this has been the prevailing lack of global understanding of the much-needed competencies in ASP as manifested in the broad, undefined and ambiguous nature of current practices (Aoyagi, Portenga, Poczwardowski, Cohen & Statler, 2012; Baker, 2014; Cremades et al., 2014). Moreover, this structure in education and training has given rise to discontent and turf wars between practitioners coming from a psychology background and those holding a kinesiology/sport science qualification (Baker, 2014; Portenga, Aoyagi, Balague, Cohen & Harmison, 2011).

Nonetheless, current opinions have acknowledged the multidisciplinary nature of ASP (Aoyagi, Czech, Portenga, Metzler & Poczwadowski, 2009; Aoyagi et al., 2012) resulting in an interdisciplinary (kinesiology/sport science and psychology) compromise: practitioners are being trained to be proficient in performance enhancement and therapy-based work (Baker, 2014) by bodies such as the British Psychology Society (BPS) Chartered Sport & Exercise Psychologist, (BPS, 2011). As a result the title ‘Sport Psychologist’ in most parts of the world has become a licensed profession which requires practitioners to possess a certain minimum education, training and supervised experience.

Despite the significant strides in developing interdisciplinary curricula in sport psychologists’ education, the majority of programs are still said to be inadequately preparing trainees for all the essential competencies (Fletcher & Maher, 2013; Tod & Lavallee, 2011) and that trainees’ competencies are restricted to the home discipline of the programme due to “cursory exposure” to the “other” discipline (Aoyagi et al., 2012:34). Additionally, at this stage there is no international or common consensus on the specializations (sport, exercise, and performance) within the field of ASP, which is believed to be the main reason for inconsistent and diverse training models, practice standards, and methods of service delivery within and among countries (Cremades et al., 2014). A further argument is that professional certification is questionable when there is no clear distinction between performance interventions and therapy-based work, since they are distinct undertakings which require unique sets of skills and knowledge, especially when working with an athlete population (Aoyagi et al., 2012). Hence, generally speaking, ASP is snared in confusion over what (in terms of philosophies, theoretical paradigms and models) exactly encapsulates and delimits professional sport psychology practice (Aoyagi et al., 2012, Cremades et al., 2014; Eubank & Hudson, 2013). As a result, the chances of truly knowing what actually constitutes a competence – or best practice for that matter – are slim. The implications are that practitioners might offer inconsistent and diverse services that may not only obscure clients’ perceptions about what they do but also elicit legal repercussions which complicate the title of “psychologist” (Aoyagi et al., 2012; Baker, 2014). In view of this, Wrisberg, Simpson, Loberg, Withycombe & Reed (2009) (as cited in Aoyagi et al., 2012) caution that unprincipled services in an evolving profession such as Sport Psychology could very easily be misconstrued, resulting in a depreciation of the field instead of being the subjective view of a certain individual.

ASP in SA is not formally recognised as there is no registration category of “Sport Psychologist” with the Health Professions Council of South Africa (HPCSA – regulatory body for all medical

and mental health practitioners) (SASSEP, 2015). Sport psychology services in this context are rendered on a part-time or full-time basis by practitioners with an educational background in psychology (clinical, counselling, educational, research) and/or sport science domains (biokinetics, human movement, sport or exercise science) (Edwards & Barker, 2015; Whitton, 2011). On the contrary, in the UK, sport and exercise psychology (SEP) is a recognized vocation which has been awarded chartered status (CPsychol) by The British Psychology Society (BPS) (Division Sport & Exercise Psychology – S&EP) in 2004 – thus, implying that S&EP in the UK is structurally underpinned by professional training, standards of proficiency, codes of conduct, ethics and practice, and registration with the BPS, which serves as the golden standard for anyone who wishes to legally practise as a sport and exercise psychologist. In the UK, the Health and Care Professions Council (HCPC) is currently (since 2009) the statutory regulatory body for all practitioner psychologists (including sport and exercise psychologists), requiring BPS accredited S&EP programs (such as the BPS's own Qualification in Sport and Exercise Psychology – QSEP stage 1 & 2) to ensure competence in a portfolio of key roles that are underpinned by the HCPC published Standards of Proficiency for Practitioner Psychologists (HCPC, 2012:3) (See the BPS website www.bps.org.uk for admission requirements and course undertakings towards accreditation).

The BPS's required competencies for accreditation (BPS, 2011) are described in the following key roles (KR): KR 1: Develop, implement, and maintain personal and professional standards and ethical practice; KR 2: Apply psychological and related methods, concepts, models, theories, and knowledge derived from reproducible findings; KR 3: Research and develop new and existing psychological methods, concepts, models, theories, and instruments in occupational psychology; KR 4: Communicate psychological knowledge, principles, methods, needs, and policy requirements. However, although the BPS's training route towards becoming a Chartered Sport and Exercise Psychologist is not flawless (Eubank & Hudson, 2013) it has been dually recognized within the UK and internationally (Edwards & Barker, 2015). Accreditation by the British Association of Sport and Exercise Science (BASES) in the UK is reserved for practitioners who work in sport, and exercise psychology related careers (e.g. sport psychology researcher/lecturer in higher education, and/or consultant for sport performers) who hold a BASES recognized undergraduate degree in Sport Science and an MSc with 2 to 6 years of supervised practice in a particular branch of sport sciences such as biomechanics, physiology, psychology, and/or an interdisciplinary discipline at an MSc level (Cotterill, 2011; Niven & Owens, 2007).

It is evident that the practice of sport psychology has reached an age of professional liability. In reality the boundaries between performance enhancement services and addressing issues which require clinical or counselling expertise in sport psychology practice remain vague and unclear (SASSEP, 2015) – hence the lingering, critical need to identify essential competencies in effective sport psychology practice in order to delineate practice and comment on the necessary training and/or ongoing support to harmonize, develop and promote professional service delivery (Cremades *et al.*, 2014), especially in an unregulated and developing context such as South Africa. Also needed is comparative evaluation of practitioners' views on effective sport psychology service delivery in various developmental contexts with the view to promoting both national and international education and training standards in ASP over and above the contribution to the meagre volume of comparative research on this topic (Edwards & Barker, 2015). Therefore, this study attempts to answer the following research questions: “What are the essential competencies in contemporary ASP practice?” and “What are the comparative views of SA and UK expert ASP practitioners?” The rationale for benchmarking expert views in ASP held in SA with that of the UK is because of UK's significant strides in the development of sport and exercise psychology (i.e. training, education, research and practice) in recent years mainly taking into account the statutory recognition (chartered status and professional regulation by UK's HCPC) and well developed accreditation systems (BPS) that are presently in place (Morris, Alfermann, Lintunen & Hall, 2003, Eubank, Niven & Cain, 2009). A further motive is the similar peak organisations in sport (i.e. for rugby, cricket, athletics and soccer) that exist within these countries as a result of British colonialism in SA in the eighteenth century (Miller, Lawrence, McKay & Rowe, 2001). The results could provide valuable insight into the essential competencies needed in current ASP service delivery, which may better define areas of professional practice in the field, and proffer significant inferences for streamlining and harmonizing education, training and regulation standards of sport psychologists in the contexts of both developed and developing nations.

4.2 Methodology

4.2.1 Design

In view of the divergent and rather scant international perspectives on competencies required in contemporary ASP, this study was deemed best suited to qualitative exploration. An explorative approach to the inquiry will enable the investigators in this study to collect rich, thick and descriptive data that describe participants' intricate and relative experiences which are envisaged to promote the formation of a paradigmatic standpoint on the explored phenomenon (Edwards,

2010; Silverman, 2006). In order to elicit participants' values and beliefs on competent sport psychology practice, an interpretative paradigm of semi-structured interviews was adopted. The specific method of interviews will encourage participants to offer profound personal insight that encapsulates subjective meaning in contextual situations (Kvale & Brinkmana, 2008 as cited in Fletcher & Arnold, 2011).

Hence, the ontological position was that exploring and comparing the views of expert practitioners from dissimilar contexts such as country, education and training background, clientele et cetera would provide a rich and meaningful account of essential competencies in ASP since these compare service delivery across greater parts of the world. Epistemologically this required an approach embedded in the principles of a descriptive phenomenological stance which prompted interview questions to be asked in a non-leading, depersonalised manner. Furthermore, the researchers intentionally attempted to "bracket" the text by confronting both participants and data without pre-conceived notions (including biases, personal conceptions, and other prejudice) in order to understand and elucidate the true essence of participants' perceptions (Bhattacharjee, 2012; Carter & Little, 2007). To elaborate the methods used for this investigation, the following sections are included: participants, data collection, and data analyses. Methodologically, the research was pursued in an explorative, interpretive and qualitative way for the purpose of stimulating further enquiry using alternative paradigms and perspectives.

4.2.2 Participants

For the purpose of this investigation, the term *ASP practitioner* was applied when collectively referring to accredited sport and exercise psychologists/psychologists/mental skills trainers in both SA and the UK. Two female and seven male participants (n=9) aged between 33 and 65 of Caucasian origin participated in this investigation. Participants from SA (n=4) were HPCSA registered psychologists (clinical n=3; counselling n=1 with a European Masters degree in Sport Psychology). One of the SA sample participants is also a BPS Chartered and HCPC registered Clinical, Sport and Exercise Psychologist. Four participants from the UK were BPS and HCPC registered psychologists (Chartered Sport and Exercise Psychologists n=2; Clinical n=1; Occupational who was working towards chartered S&EP accreditation n=1), whilst one participant was a BASES accredited Sport Scientists (n=5). One participant from the UK sample was also an HPCSA registered Clinical Psychologist. Seven participants had a qualification at PhD level and two at Master's degree levels. Three participants consulted with athlete-clients on a full-time basis whilst six were academic staff in sport and exercise psychology/psychology programmes at universities which provided part-time consultation.

Initially, expert ASP practitioners were purposefully identified in SA and the UK from the SA S&EP emailing list, and the co-author's (registered psychologists with the HPCSA & BPS, HCPC) professional network respectively. The idea behind a purposeful sampling approach is to identify expert ASP practitioners who are knowledgeable at answering subject related questions and who will provide valuable insight into the study phenomenon (Vanderstoep & Johnston, 2009). For the purpose of this study, expert status is defined by licensure as a practitioner psychologist with a track record of working with professional and non-professional athletes for a minimum duration of five years or, qualified sport scientists (kinesiology trained) who have rendered sport psychology services to professional and non-professional athletes for a minimum of ten years. These criteria helped ensure that, although participants had different training backgrounds, they had developed a certain skills-set working with athletes. The sample size for this qualitative research was dependent on reaching an adequate level of data saturation (Creswell, 2013). All participants were English speaking at a native or near-native level and preferred to have the interviews conducted in English.

4.2.3 Data collection

The primary investigator collected the data by means of individual face-to-face semi-structured interviews which were scheduled at a location and time convenient for each participant. An interview guide was developed containing structured open-ended and probing questions which were asked to explore participants' views on essential competencies in contemporary sport psychology practice (a copy of the interview guide can be obtained on request from the first author). Question topics included views on effective practice, proficiency requirements, clients' preferences and expectations during consultation, and competencies which differentiate effective from less effective sport psychology practitioners.

The investigator provided an electronic copy of the interview guide to each participant at least two to three days prior to the confirmed interview meeting. Only data available to the interviewer's awareness were utilized to describe the essence of the ASP practitioners' "lived experiences" (Lindlof, 1995:236). Each interview lasted approximately 45 minutes to an hour and was recorded with a reliable digital voice recorder. All interviews were transcribed verbatim by a professional transcriptionist and sent to each participant for confirmation of accuracy. Once confirmation was received, the investigator did a preliminary interpretation of the data (187 pages typed at 1.5 spacing) and returned relevant transcripts to participants for member checking. The interview questions were formulated on the grounds of related literature published

over the last decade and reviewed by experts in the field for its applicability which was adapted accordingly. The interview guide was pilot tested with an ASP practitioner whose status is similar to the inclusion criteria set for the sample to ensure that questions are understood correctly and would potentially elicit meaningful responses. The primary investigator reflected his personal feelings and impressions in field notes along with other factual information that was noticed during each interview.

4.2.4 Analysis of data

The meagre knowledge of essential competencies in contemporary ASP encouraged investigators to analyse interview data by means of a thematic content analysis approach, which is a technique for systematically transcribing the content from spoken or written material (Creswell, 2013). Tesch's (1990:142-145) eight-step analysis method was followed whilst Atlas Ti.7 (code-based computer software program) was used to manage and handle the data (Burnard, Gill, Stewart, Treasure & Chadwick, 2008). Following the transcription of interview recordings, the process involved: 1) carefully reading through all the transcripts and making notes on key aspects as they came to mind, in an attempt to gain a collective sense of the data gathered. 2) The longest transcript from each sample grouping (SA & UK pile) was selected and read through again as notes in margins of words, theories or short phrases were made to summarize what was being said. This was done for several transcripts from each sample pile. 3) Descriptive wording and phrases with the highest frequency were captured on a clean set document which was subsequently worked through in an attempt to eliminate all duplications. 4) Similar topics were clustered together and abbreviated as higher-order themes which were then electronically assigned to fitting segments of text in each of the interview transcripts by means of Atlas Ti. 5) New topics and codes that emerged were added to the initial organizing scheme, and these finally categorized as lower-order themes. 6) A filter option was applied to Atlas Ti, which displayed separate network views for the coded data of the SA and UK samples. 7) higher-order themes were subsequently assembled into suitable general dimensions. 8) Finally, an export option of all themes into excel format (frequency analysis) was applied in Atlas Ti to illustrate the number of occurrences in participants' responses. A co-coder was used to verify the results through consensus discussions.

4.2.5 Ethical consideration

Ethical clearance was obtained from North-West University's Health Research Ethical Committee before the commencement of the study (NWU-00061-14-S1). Signed informed

consent was obtained at the interview site prior to the individual interviews. Participants were assured that they did not have to answer any questions or divulge information which made them uncomfortable. The investigator attempted to establish a trusting relationship with participants from the outset by being open about the purpose and procedures of the investigation and providing elaborative answers to questions about the investigation. Codes were assigned to the selected interview respondents to use when describing and reporting the results. The signing of a confidentiality agreement between the researcher and other professional service providers such as transcriptionist, and co-coder was requested prior to their involvement in the data collection process.

4.2.6 Trustworthiness

The following methods as recommended by Shenton (2004) and Creswell (2013) were implemented to ensure the accuracy and rigor of findings: First, definite and comprehensive detail was provided concerning the research design and implementation (operational detail of data gathering) of the current investigation in an attempt to ensure the dependability of results. Second, a triangulation of data sources was used as field notes were merged with interview responses from all participants considered to be experts in the field, followed by an SA versus UK comparison to ensure the confirmability of results. Third, a member-checking procedure was employed to check for both accuracy and clarity of responses to address the aspect of credibility. Fourth, credibility was further ensured by way of confirming emergent dimensions and themes in validation discussions between the primary investigator and an experienced sport psychology researcher who was independent of the analysis process. Fifth, in support of the latter an audit trail of all raw-data quotes was presented for external scrutiny. Finally, consistent with the recommendations made by Thomas, Nelson and Silverman (2011), participants' comments will be extensively quoted in the results section of this investigation to allow readers to judge the accuracy and trustworthiness of the authors' concluding remarks. In contributing to these qualitative validity criteria, results have also been displayed in hierarchical content to give readers added opportunity to evaluate and interpret data in a meaningful and self-interpretative way (Biddle, Markland, Gilbourne, Chatzisarantis & Sparkes, 2001) and to ensure transferability judgment of potential appliers (Lincoln & Guba, 1985). To ensure anonymity, participants were identified with a country code (SA or UK) followed by a number 2-10 (e.g. SA02).

4.3 Results

Applicable to the research questions formulated in this investigation, four major dimensions with supporting higher-order and lower-order themes were distilled from participants' views on essential competencies in contemporary sport psychology practice, namely: relational and dependable character, a client-centred focus, restorative and facilitative skills, and knowledge of psychology, sport science and sport (Tables 1-4). Presented dimensions and themes reflect central and summarised viewpoints generated from opulent data. Inclusive individual responses and/or supporting responses from participants in each sample grouping will be provided in verification of themes. Due to space restrictions, only the most salient themes will be elaborated on.

Table 4.1: ASP practitioners' views on essential competencies in contemporary practice:
Relational and dependable character

SA sample (n=4)			UK sample (n=5)		
Higher-order theme	Lower-order theme	Frequency	Higher-order theme	Lower-order theme	Frequency
Ethics (27)	Demonstrated competence (n=4);	9	Ethics (21)	Trustworthiness (n=5);	13
	Honesty (n=4);	7		Demonstrated competence (n=2);	6
	Trustworthy (n=4);	7		Integrity (n=1)	2
	Integrity (n=2)	4			
Dynamism (8)	Being abreast of the latest developments / willingness to learn (n=2)	5	Dynamism (10)	Being abreast of the latest developments / willingness to learn (n=2)	4
Good interpersonal skills (14)	Fostering a trusting relationship (n=4);	9	Good interpersonal skills (18)	Good interpersonal qualities (n=3);	4
	Good interpersonal qualities (n=3)	5		Fostering a trusting relationship (n=4); Fitting in with the team (n=3)	11 3
Interest in clients (9)	Genuine care for / interest in client (n=3);	5	Interest in client (7)	Genuine care for / interest in client (n=3);	5
	Becoming one with client (n=2)	4		Becoming one with client (n=2)	2
Passion (11)	Passion for the profession (n=3);	9	Passion (5)	Going the extra mile (n=2);	3
	Going the extra mile (n=2)	2		Passion for the profession (n=2)	2
Personal conduct (3)	Self-care (n=1)	3	Personal conduct (6)	Stable life (n=1);	3
				Being organized (n=1)	3

Relational and dependable character

Relational and dependable character consisted of six higher-order themes: ethics, dynamism, good interpersonal qualities, interest in clients, passion, and personal conduct.

Both the SA and UK samples placed significant emphasis on personal qualities that reflect *ethical behaviour* such as the demonstration of competence, integrity, and being trustworthy. These – plus getting clients to divulge their true feelings – were regarded as the cornerstones of professional practice. SA02 explained that:

“if the athlete can trust you then he will open up to you. I had athletes who would come for a session and a second session and the real issue they want to solve only came in the third session. So what they do is, they check out the way you work: “Are you trustworthy first?” and “Do you show integrity?” before they determine if you’re competent enough.”

A supporting exemplar taken from UK09 stated:

“You do all the surface stuff but you can’t really address the stuff underneath unless you have genuine trust. And in order to do that I suppose you can try to help things along the way by being trustworthy, you know, so then you’ve got to show them that you’re going to keep things confidential.”

A view mutual to all participants was that clients desire sport psychologists/practitioners who can assure their confidentiality (trustworthy). SA participants also added that clients appreciate practitioners who are honest enough to tell them when they do not have knowledge in a particular area to comment on or make a referral to someone else who *does*. These qualities such as practitioner honesty and trustworthiness were also frequently associated with the establishment of a trusting relationship with clients (still to be discussed under the interpersonal skills category).

Another salient theme within this dimension was the ability to be *dynamic*. A view common to the samples was that it is imperative to stay abreast of the latest research and developments in the field and maintain a strong strength of mind to continue learning. An interview with SA02 revealed:

“I attend a lot of conferences, a lot of courses and do a lot of reading and studying... because then the more knowledge I have..., it’s not that I become a jack of all trades, I just know how to help my client in the best way.”

An interviewee, UK06 stated:

“I’ve learned very quickly that unless you stay dynamic and on top of things, you are going to fall behind. So never stop learning.”

Good interpersonal skills was a theme grounded within the data. Both samples’ participants emphasised the importance of interpersonal qualities and the ability to foster a trusting relationship with clients. Verifying this, SA03 commented:

“The person (practitioner) who will stand out is one who can establish a trusting relationship with the athlete; that’s number one for me.”

UK09 concurred saying:

“Honestly, it’s just the ability to get on with people... the more I work within the applied fields, the more I think it’s not necessarily about being able to be good at what you do, it’s about being able to get on with people.”

The instrumental role that practitioners’ interpersonal qualities play in dictating the effectiveness of therapy was captured in a statement by UK08 who argued:

“Time and time again within literature, there’s been no difference between the efficacies of one therapy compared to another, but the key factor is the rapport you can gain with your client.”

Three UK participants acknowledged that, when working in a team setup, it is essential for a practitioner to fit in with the team and get along with coaches and team staff as this promotes interpretative value and longevity.

Table 4.2: ASP practitioners’ views on essential competencies in contemporary practice:
Client-centred practice philosophy

SA sample (n=4)			UK sample (n=5)		
Higher-order theme	Lower-order theme	Frequency	Higher-order theme	Lower-order theme	Frequency
Cognitive Behavioural Therapy (11)	Mental skills training (n=3);	9	Cognitive Behavioural Therapy (3)	Mental skills training (n=2)	3
	Mindfulness, Acceptance & Commitment (MAC) intervention (n=1)	3			

SA sample (n=4)			UK sample (n=5)		
Higher-order theme	Lower-order theme	Frequency	Higher-order theme	Lower-order theme	Frequency
Humanistic qualities (20)	Ability to empathize (n=3);	4	Humanistic qualities (26)	Ability to empathize (n=3);	7
	Athlete-centred (n=3);	6		Athlete-centred (n=5);	15
	Accepting (n=2);	4		Be a sounding board (n=2)	4
	Human before athlete (n=3)	6			
Integrative approach (11)	Holistic approach (n=3);	6	Integrative approach (14)	Flexible (n=4);	6
	Flexibility (n=3);	3		Authentic (n=1);	2
	Global coherence (n=1)	2		Holistic (n=1);	1
				Positive Psychology (n=1);	3
				Social Cognitive Behavioural Therapy (n=1)	2

Client-centred practice philosophy

Client-centred practice philosophy consisted of three higher-order themes: cognitive behavioural therapy, humanistic qualities, and integrative approach. The most salient of the higher-order themes was practitioners' ability to adopt a *humanistic stance* when working with clients. The capacity to emphasise and understand clients' individual needs was one of the most grounded themes in participants' views on competent practice. For example, when SA02 was asked which personal characteristic contributes mostly to positive therapy outcome, she replied:

"My empathy, my ability to emphasise with a person [client]."

SA02 continued explaining that:

"I treat every single one [client] as a unique individual. Because that's what they are."

Elaborating on this, UK08 added:

"I think listening and the empathy is absolutely vital, so if I was meeting someone [ASP practitioner] for the first time, it would be right this guy is willing to listen and actually understand... that for me would be absolutely vital."

Furthermore, three SA and five UK participants verified that their approach is client-led and that an ASP practitioner has to treat a client as a person and not as an athlete (three SA participants). Two SA participants also argued that one has to be accepting of each client's unique needs. SA05:

“So yes, I think number one for me, as I said, is treating them as a person not just as an athlete ... Yeah that is more traditional Rogerian kind of therapy. I don’t think there has to be any judgment. Athletes are judgmental enough of themselves. They are their own worst enemies. They certainly don’t need me telling them this is wrong. So there is no judgment and you would say, “If this is what you are thinking then this is what you are thinking. Let’s work on it.””

Three UK participants claimed that many athletes want them to be a soundboard against which they can just express their views and issues. UK08 reported:

“I’m just a, just someone to listen to their objectives and I think it’s key for them to have that sounding board sometimes... the ability to quickly grasp and understand what they’re going through emotionally and performance wise.”

Integrative approach was the second most grounded theme within this dimension. Three SA and four UK participants agreed that being flexible in one approach will enable one to address clients’ individual needs. Some SA and UK participants also reported that it is essential for ASP practitioners to support and develop the whole person (holistic) instead of being blindly captivated by issues known to the sports environment. To do this, they argued it is essential for a practitioner to integrate various knowledge items, approaches and skills into one’s practice philosophy to be able to address the whole person [client] in ensuring optimal functioning. SA02:

“I have a very holistic approach... I need to have; my toolbox is full. I mean from mindfulness right to narrative therapy or solution focus therapy or many things to a basic knowledge about nutrition, injuries and rehabilitation.”

In these situations, competence is reflected in a practitioner’s ability to get a feel for a client’s presenting issues and to dichotomise them from an integrative perspective. One SA participant in particular underscored the quality of global coherence in order to fully understand clients’ natures and render services which are not only directed to the heart but also relevant to the client’s underlying issues. Of the same opinion, one UK sample participant also emphasized the importance of integrating different forms of knowledge and being flexible in adjusting one’s knowledge to clients’ diverse issues. UK06 revealed that:

“Personally I prefer a very holistic approach.... Absolutely every time out of your comfort zone, because some of the basics would stay the same but the detail will always

be different so you have to be sort of sharp and able to adjust and adapt... so where initially I tried to have the recipe and fit people in there, I quickly realised, well not quickly actually – over a matter of years, that it doesn't work like that, you have to find ways of adjusting to the client."

Another two participants in the UK sample reported integrating humanistic principles with a positive psychology, and cognitive social behavioural approach respectively. Notwithstanding, an aspect which was fairly grounded within the UK sample data was the importance of practising in a congruent manner. It was evident that, irrespective of the practitioners' views on the value of altered approaches in contemporary practice, the need for ASP practitioners to be congruent (authentic) and practice in a sincere way is central to competent practice. UK09:

"I think enabling somebody to work in a way which sits well with their core values, so having that philosophy in that way is really quite central to making an effective practitioner. What I don't think should happen, is, I don't think there should be a list of competencies. You must understand this theory or you must understand that theory, no. I think you should say something like, 'I understand your philosophy' and then demonstrate that you can work within that philosophy. And find techniques within that philosophy, so it becomes more of a personal journey than a dictated way of working."

Table 4.3: ASP practitioners' views on essential competencies in contemporary practice:
Restorative and facilitative skills

SA sample (n=4)			UK sample (n=5)		
Higher-order theme	Lower-order theme	Frequency	Higher-order theme	Lower-order theme	Frequency
Counselling skills (22)	Attentive listening (n=3);	7	Counselling skills (18)	Attentive listening (n=2);	8
	Differentiation (n=2);	5		Good counselling skills (n=3);	5
	Reading nonverbal cues (n=2);	2		Challenging / confrontational skills (n=2);	3
	Cultural sensitivity (n=2);	2		Self-disclosure (n=2)	2
	Translating clients' thoughts (n=1);	4			
	Self-disclosure (n=1)	2			

SA sample (n=4)			UK sample (n=5)		
Higher-order theme	Lower-order theme	Frequency	Higher-order theme	Lower-order theme	Frequency
Knowledgeable educator's skills (13)	Offering practical skills (n=4);	8	Knowledgeable educator's skills (14)	Offering expert advice (n=3);	6
	Offering expert advice (n=3);	3		Offering practical skills (n=3);	5
	Contextualizing thinking & speaking (n=2)	2		Conceptualizing knowledge in succinct way (n=3)	3
Mindful awareness (30)	Being mindful of situation at hand (n=4);	11	Mindful awareness (9)	Managing the self in consultation (n=4);	7
	Self-awareness (n=3);	7		Self-awareness (n=1);	1
	Managing the self in consultation (n=3);	5		Being mindful of situation at hand (n=1)	1
	Self-care (n=3)				
	Arranging regular discussions with peers (n=1);	4		Reflecting on each session (n=1);	1
Self-reflection (6)	Reflecting on each session (n=1)	2	Self-reflection (2)	Arranging regular discussions with peers (n=1)	1

Restorative and facilitative skills

Restorative and facilitative skills consisted of four higher-order themes: counselling skills, knowledgeable educator's skills: mindful awareness, and self-reflection. The most frequently cited higher-order theme within this dimension was *counselling skills*. Common agreement amongst most of the SA participants was that successful consultation rests on the ability to identify clients' individual needs by means of attentive listening to what clients say, as well as accurate attention to clients' nonverbal messages. Furthermore, cultural sensitivity, differentiation, and the ability to translate clients thoughts in a succinct way were also grounded themes in data gathered. SA04:

"You have to be a fantastic listener, with the listening skills of clarification, summarization – those skills that allow your clients to express themselves... So, what I am saying is: 'What makes a good sport psychologist? You have got to listen to your client.'"

Interestingly one SA participant indicated that self-disclosure during consultation contributes to favourable therapy outcomes. SA05:

“Some self-disclosure is what they [clients] appreciate. When they know that I might say, ‘When I was competing I also did this. OK, it’s not just you; we all do it.’ So they often do appreciate some self-disclosure.”

Supporting this notion, two UK sample participants also acknowledged self-disclosure as facilitative to therapy outcomes. UK10 claimed that:

“Sometimes I share an element of myself with the performers, so I might tell them about experiences that I’ve had in sport because I think you have to reveal something of yourself.”

The majority of the UK sample participants regarded good counselling skills as essential to competent sport psychology service delivery, while two participants underscored the ability to challenge or confront clients’ way of reasoning, and identify their individual needs by way of attentive listening. UK06:

“The ability to listen first... I think first seek to understand and then to be understood, because very often and especially early in one’s career, you are very eager to show what your worth is.”

Mindful awareness was another salient higher-order theme within this dimension. SA sample data underscored that being mindful of the self (self-awareness) and the situation at hand, as well as the ability to manage this aspect of oneself is imperative to competent practice. An ASP practitioner should present a liberated self in the moment of therapy when a client seeks clear understanding. SA03 insisted that:

“... self-awareness of who you are and who your client is, is very important. If you can do that, you will sit with every client right from the start and you won’t push your own agenda but focus on what’s important for that athlete because your client comes first and your client is not you.”

The need for overall self-care such as attending to one’s own needs, emotions and wellbeing was also highlighted by three participants in this sample. Similar themes such as being able to manage the self in consultation, along with being mindful of the self and the emerging situation with the client were grounded in the UK sample data. UK09 opined:

“Things that surprised me going into sport psychology are how much people pick up on small cues. So clients know that you’re not OK, clients understand that, or clients know

that maybe you don't like them or, that you do like them; they pick up on those very small cues – that's why I think managing yourself is imperative.”

Table 4.4: ASP practitioners' views on essential competencies in contemporary practice:

Well-informed about psychology, sport science and sport

SA sample (n=4)			UK sample (n=5)		
Higher-order theme	Lower-order theme	Frequency	Higher-order theme	Lower-order theme	Frequency
Strong psychological background (19)	Registered psychologists (n=4);	9	Psychological background (15)	Knowledgeable about psychology (n=4);	9
	Skilled in psychological approaches (n=3);	6		Background in clinical psychology (n= 2);	4
	Background in clinical psychology (n=3)	4		Skilled in psychological approaches (n=2)	2
Sport - specific knowledge (14)	Experience of working in a variety of sports (n=3);	6	Sport-specific knowledge (14)	Sport experience (n=2);	4
	Sport experience (n=1);	5		Sport specific knowledge (n=3)	10
	Sport -specific knowledge (n=1)	3			
Training in Sport Science (5)	Knowledgeable about Sport Science (n=2)	5	Training in Sport Science (10)	Knowledgeable about Sport Science (n=4);	7
				Understanding of sport psychology within sport science (n=2)	3

Well-informed about psychology, sport science and sport

Well-informed about psychology, sport science and sport consisted of three higher-order themes: strong psychological background, sport-specific knowledge, and training in sport science. *Strong psychological background* was the most cited higher-order theme within this dimension. SA participants' compiled views on proficiency requirements in ASP practitioners which conveyed that being a registered psychologist who understands the underlying mechanisms of human behaviour, and is skilled in psychological approaches is first and foremost to ASP. SA02 explained:

“Because you work with human beings and because you work with emotions, the thoughts, the way of doing, their behaviour, the cognitive functioning, you need to understand and know psychology. That is your foundation – so first of all, be a registered psychologist and second of all you need to know about sport sciences... so, if I wasn't a registered psychologist with all that psychological background, I would have lost this

client because nothing would have happened... once the person is sorted, then I go to his sport performance.”

Furthermore, three participants from this sample felt that their background in clinical psychology contributed to their overall competence. SA05 commented:

“In South Africa, as we know, there is no category “sports psychologist”. But being only a clinical psychologist absolutely helped me one hundred percent to be a better sport psychologist. As I say, it’s because you are dealing with people.”

Whereas the earlier themes were grounded within the data gathered from the UK sample; views on this aspect were divergent. Four UK participants pointed out that knowledge of psychology is essential in ASP but that being a psychologist without schooling in sport science will not ensure competent practice. UK09 explained:

“I think people going into sport need to understand sport. I don’t think a general psychology practitioner is really able to go in and understand things with the psychology of training. I think you have to understand the context in which they work. I think you have to understand how elite sports work. So for me I think you need to understand sport science”.

The essential feeling from these participants was that sport science and basic psychology schooling should overlap at some stage during training to ensure competent practice. One participant in particular who teaches in a BPS accredited S&EP Masters program argued that the sport science graduate would be better equipped to practice competently than the psychology graduate. On the contrary, one participant (UK06) from the sample also placed significant emphasis on clinical psychology knowledge, and explained:

“Because you work with people, it’s very difficult to separate the clinical from the performance side. These things do overlap. And we like to, in textbooks and written material, keep these things separate. But they are all very much enmeshed so you can’t really separate them”.

This particular participant also elaborated on his own professional development and stated that:

“I think if I sort of try and quantify it, I’d say initially I used 80% the sport psych recipe and 20% clinical knowledge and then the balance probably shifted to 30% sport

psychology specific things, but 70% of clinical experience in terms of (again), the underlying dynamics of how people function”.

Another salient higher-order theme within this dimension was *sport-specific knowledge*. Three SA participants suggested that practitioners with experience working in a variety of sports would be able to make a greater impact on service delivery. SA03 argued:

“I think the more experience sport psychologists have in a variety of sports, the more effective they will be. I think you can pick up so many more skills and ideas around your intervention from other sports than just specializing in one type of sport”.

Another participant from this sample reported that her background competing at an elite level of sport contributed to her understanding most of the obstacles athletes struggle with. The participant even implied that her experiences as a professional athlete have inspired her to pursue a career in sport psychology. Only one participant felt that sport-specific knowledge advances competence in practice.

UK sample participants held comparable views, reporting that a background in sport participation (sport experience) as well as sport-specific knowledge is definitely required to successfully implement sport psychology interventions and helps to establish a connection with clients because they can easily relate to what one says if it is explained within their sporting context. UK08 stated:

“In a sporting environment, I think you’ve got to be able to talk the language. I went to a full-time football environment, having played football to a great standard – you know, semi sort of professional standard and, being able to talk their language, I think initially buys you some credibility... you can talk, you can tract for all language, you can talk about players, and people see that straight away.”

UK07 added:

“The better psychologists, obviously the real expert psychologists, will have a better knowledge of those specific sports.”

UK09 commented on this:

“Whatever you do in psychology has to fit in with the requirements of the sport.”

Evidently the SA and UK views partially overlap with both samples valuing practitioners who have experience as an athlete. Surprisingly, SA participants favoured knowledge and work experience in a variety sport whereas UK participants placed more emphasis on sport-specific knowledge.

Sport science background. Overall, having sport science training blended with psychology training was a top priority for competent practice for the majority of participants in the SA and UK samples. SA04:

“I think you must have certain basics which would be majors in psychology and in sport science – ideally,”

Although SA participants steadfastly believed that a strong psychological basis (being a registered psychologist first) is imperative, the need for additional schooling in sport science was underscored as fundamental in effective practice. SA02:

“So, first of all, a registered psychologist and second of all, you need to know about sport science. You have to have knowledge there”.

In contrast, two UK participants believed that an understanding of sport psychology from a sport science background would contribute more to competent practice. UK07:

“I think a competent, effective sport psychologist is someone who has studied sport psychology from a sport science background and has an affinity with the interdisciplinary side of sport. The sport-scientist-educated psychologist has more knowledge about who is involved in the athlete’s life, whom they can use, and what an athlete’s little idiosyncrasies are.”

Nevertheless, when the participants were asked whether competent sport psychology practice is more reliant on schooling in psychology than on sport science, all affirmed that the practitioner must have a foot firmly grounded in each of these fields of training. SA02:

“One foot in psychology, one foot in sport science and you have to know about sport.”

UK07 reported:

“I think it’s not an either or, really. I’ve got a very straight belief about this one. I think you need both competencies.”

Comparatively speaking, participants in this investigation accentuated the significance of accumulating distinct training in and knowledge of the theoretical underpinnings (knowledge-based standards) of psychology, sport science (sport psychology within sport sciences) disciplines and being able to apply sport-specific interventions. Nonetheless, participants in this investigation reported that background knowledge and experience of sport was also regarded as a cornerstone of competent practice.

4.4 Discussion

The purpose of this investigation was to identify essential competencies associated with contemporary sport psychology practice and to disseminate the comparative views offered by SA and UK ASP practitioners. Dimensions emerging from interview responses suggested that competence in contemporary sport psychology service delivery is primarily reflected in a relational and dependable character, a client-centred focus, definite counselling skills-set (restorative and facilitative skills) and explicit expertise within the fields of psychology, sport and sport science. Essentially, the views provided by SA and UK practitioners were overlapping and remarkably similar. Nonetheless, strong parallels between the views of these two stakeholders were also documented in another comparative study which explored national perceptions of professional philosophy, education and training, supervision, ethical guidelines and decision making in S&EP (Edwards & Barker, 2015). The extensive overlap in views found in this investigation could largely be ascribed to the expert status of the participants recruited and the accustomed level of praxis due to experience in working with comparable athlete populations. Elementary differences in viewpoints (sub-themes) in relation to competent practice such as the importance of being a registered psychologist offered by the SA sample could mainly be ascribed to their different professional registration status and education background which is rooted within conventional psychology disciplines (e.g. clinical, counselling) owing to the lack of formal training and professional accreditation in sport psychology.

Nevertheless, salient themes within data such as being ethical, which entailed competencies such as trustworthiness, honesty and integrity are standards expected by professional regulatory councils for health-care providers. More specifically, the UK's HCPC (2012) Standards of Conduct, Performance and Ethics expects health-care providers such as sport psychologists, to overtly keep clients' interests at heart and comport themselves with honesty and integrity in maintaining the public's confidence in services offered. The standards also require sport psychologists to be trustworthy and to respect the confidentiality of clients. Interestingly, an

investigation reporting on athlete-clients' perceptions of sport psychologists' effectiveness has revealed that honesty and trustworthiness were some of the most desirable sport psychologists' characteristics (Anderson, Knowles & Gilbourne, 2004). Participants' strong views on the competency of willing to learn and the importance of keeping knowledge and skills up to date are warranted since keeping abreast of latest developments not only conforms to current standards in professional practice (HCPC, 2012) but is also regarded as mandatory to circumvent incompetence or being caught out as professionally 'impaired' (Olkin & Gaughen, 1991; Reamer, 1993).

Supportive of the participants' views on interpersonal skills, Andersen, Van Raalte and Brewer (2000) acknowledged that the interpersonal style and personality of sport psychology consultants is the driving force behind effective service since this forms a central part of athlete care. Views generated from a sample (N=13) of New Zealand sport psychology consultants also underscored the ability to build a connection and establish a collaborative professional consulting relationship, as essential elements contributing to effective service delivery (Sharp & Hodge, 2011). Surprising, yet not unexpected, the ability to relate effectively and meaningfully to others is a skill highlighted in Rodolfa, Bent, Eisman, Nelson, Rehm and Ritchie's (2005) cube model which describes competency development in professional psychology. Nor are participants' strong views on humanistic qualities such as the ability to emphasize, being a soundboard, and adopting a client-centred approach surprising. Despite the relevance of mental-skills approaches in conventional ASP textbooks and education programs (Weinberg & Gould, 2015), there is a long-standing support for a client-centred approach in sport psychology (Collins, Evans-Jones & O'Connor, 2013; Corlett, 1996; Petitpas, Giges & Danish, 1999). In a vein similar to the responses of these participants, is a sustained contention that being an athlete is secondary to being a person, which implies that ASP practitioners ought to understand and support the person so that the person can function as an athlete (Bond, 2002; Taylor, 2008). And another, corroborating, outlook, emanating from Fifer, Henschen, Gould and Ravizza (2008:357) avers that the client in sport psychology consulting "has to know you care before they care what you know". Analogous to participants' views in this study, Lindsay, Breckon, Thomas and Maynard (2007) argued that perceiving and treating clients solely as athletes could impede their optimal functionality as persons fulfilling the role of athletes. And then there is the relevance of a holistic approach in efforts to optimise the whole person in ASP which is probably based on the multi-dimensional nature of athletes and the overpowering influence that non-performance identity domains have on an athlete's performance (Friesen & Orlick, 2011; Miller & Kerr, 2002). Participants' sentiments about the importance of attentive listening in sport psychology practice

are greatly supported by relevant literature. Owton, Bond and Tod (2014) conceded that it is common practice when working with athlete-clients, for trainee and novice ASP practitioners to act as expert advisers based on knowledge of rigid recipe-like problem-solving approaches. However, analyses of interviews with expert sport psychologists who worked with athletes during the most anticipated sporting events in the world (e.g. Olympic games), reported that sport psychologists tend to misjudge clients' true needs when they attempt to 'fix' matters, and, echoing the views of participants documented in this study, suggested that practitioners should spend more time listening and facilitating the athletes through the process because only then will they discover the essential nature of clients' issues (Arnold & Sarkar, 2015). Also advocating participants' views on mindful awareness, Ponton (2012) maintained that mindful attention to the present moment with the client would enable counsellors to formulate a rich and meaningful concept of the whole, that is, to combine the client's individual needs with one's own.

Finally the notion of having explicit psychology, and sport sciences expertise resonates with the stand taken by the International Society of Sport Psychology (ISSP) on required competencies in sport and exercise psychology practice (Tenenbaum et al., 2003). Similarly, participants' high regard for sporting experience is not only supported by the AASP certification criteria (AASP, 2015) for sport psychology consultants, but also verified by investigations documenting that athlete-clients tend to favour practitioners who can relate to them as athletes (e.g. sport experience, knowledge of the sport) (Anderson, Miles, Robinson & Mahoney, 2004; Lubker, Visek, Geer & Watson II, 2008; Lubker, Visek, Watson, & Singpurwalla, 2012).

Various competencies (such as being skilled in domains covering therapeutic work, performance enhancement, and sport-specific insight) which have emerged in this investigation, provide substantial verification of the promotion of an interdisciplinary (psychology and kinesiology/sport sciences) approach to sport psychology training for the development of competence in practice (Aoyagi et al., 2012; Cremades et al., 2014; Fletcher & Maher, 2013). It is indicative of the multidimensional competencies associated with contemporary practice (as revealed by the study themes) that, while not decisively defining sport psychology into two distinct service delivery models (i.e. performance-based and therapeutic-based interventions as recommended by Aogai and colleagues [2012]), considerable efforts should be made to define training models that adequately school ASP practitioners in the realms of both psychology and kinesiology.

This investigation, however, also draws attention to personality-related competencies needed by practitioners in contemporary practice, which are not developed by formal training (such as the ability to provide empathy, good interpersonal skills, a stable character, passion, personal conduct, willingness to learn, genuine interest in the client, and sport participation experience and related knowledge). It is therefore a viewpoint which signifies the importance of personal character screening (behavioural indicators) and rigid selection criteria of prospective ASP trainees by formal sport psychology training programs – thus upholding the contention that identifiable personality qualities, personal skills and abilities are prerequisites for candidates entering training and practice (Hatcher & Lassiter, 2007). At the very least, this viewpoint is supported by the observations of both Sakinofsky (1979) and Andersen et al. (2000), which alluded to the inability of formal training programs to develop or refine qualities that are not congenital in a trainee. Adding to this notion, a recent ASP expert panel discussion noted that current training programs are fixated on content interventions whereas the focus should shift towards the trainees’ “soft skills” in service delivery such as interpersonal skills and relationship building in consultancy (Hemmings, 2015:11). Yet, supporting the views of Andersen et al. (2000), it is also viable to recommend that sufficient supervision during training as well as ongoing peer consultation become prime facets of ASP of providing trainees and professionals with opportunities to learn and examine how their own personal character dictates their interactions with athlete-clients. The notion of modern-day sport psychology services trending towards a client-centred approach is also verified by the views of the participants. In validation of the affirmations of Tod and Andersen (2005) and Collins et al. (2013), this study concedes that humanistic elements and client-centred services form the cornerstones of contemporary sport psychology practice.

It could be argued that comparing findings from existing research into the views of practitioners and service seekers on effective sport psychology practice, and strong parallels with the current position on professional policies and competencies checklist lends credibility to emergent dimensions and themes generated from the data in the current investigation. However, there are a few matters concerning the scope of the current findings that warrant consideration – for example, a general deficiency in diversity regarding the participants’ ethnicity and gender together with a clear separation in views of participants who consult on a full-time versus part-time basis versus being an academic versus rendering services to the public versus being contracted to a specific sport team. Presenting participants with the interview guide prior to the face-to-face interview and allowing them to become acquainted with the interview questions could be another issue since participants’ responses might have been rehearsed and less

spontaneous than they would have been without exposure to the guide. Nevertheless the probability of creating rapport, accurate reflection, and observation of interview data was enhanced with a personal face-to-face interview at the convenience of each participant in the investigation (Silverman, 2013).

4.5 Conclusion

Findings reported by this investigation underscored a selection of competencies as functional and foundational to contemporary sport psychology practice. Awareness and understanding of these competencies by existing and novice practitioners within the field could offer valuable insight and guidance (practice measure) in their pursuit towards professional development in terms of evaluating what they know, are doing or should be doing in their work with clients (Ward et al., 2005), especially bearing in mind the needed stimulus for ongoing support or training within the field (Eubank & Hudson, 2013; McEwan & Tod, 2015). From a training point of view, the essential competencies identified here could also promote academic enquiry/inform future efforts in establishing a benchmark in sport psychology training as well as drawing attention to elements that merit special consideration such as the personal character and skills of practitioners. The latter in particular, bears significance to efforts in proposing/developing accredited sport psychology qualifications in the recent curriculum reform performed by South African Universities (Council on Higher Education - CHE, 2013). Furthermore, findings could provide impetus for scrutiny, streamlining and adaptation of current or developing training models and regulation in ASP into a progressive pathway which focuses on specific methods that address the development of competencies essential and relevant to contemporary practice. Such informed efforts would ensure significant strides in the “modern pilgrimage toward the maturation of ASP” (Fletcher & Maher, 2013:276).

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CHAPTER 5

RESEARCH ARTICLE 3: EXPLORATORY STUDY OF MINDFULNESS IN MODERN-DAY SPORT PSYCHOLOGY CONSULTING RELATIONSHIPS

(Note: The full length article of this brief report is presented in Appendix J, p. 217)

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Exploratory study of mindfulness in modern-day sport psychology consulting relationships.

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Abstract

This study explored sport psychology practitioners' mindfulness in relation to the quality of consulting relationships and value within contemporary practice. A total of 34 sport psychology practitioners from South Africa (n=22, females=41%) and United Kingdom (n=12, females=25%) (Private practice=68%; 15+ years' experience=44%) participated in this study. Data were gathered, using the Five Factor Mindfulness Questionnaire (FFMQ-SF), Working Alliance Inventory Short-Revised Form (WAI-SRT), and interviews. Inferential statistics (Spearman's rank order correlation) and thematic content analyses were employed to analyse the data. Higher levels of practitioners' mindfulness were associated with superior consulting relationships with positive correlations identified between observing, describing, nonreacting ability, and quality of the therapeutic bond, agreement on goals, and agreement on goals and tasks with clients respectively. Thematic analysis suggested mindfulness to facilitate accurate attending to present-moment experiences, and empathetic understanding of clients' unique needs.

Keywords: applied sport psychology (ASP), consulting relationship, mindfulness, sport psychology practitioner.

5.1 Introduction

Practitioners' conscious awareness of present-moment experiences during consultation is important for a therapeutic bond with clients (Andersen & Mannion, 2011). 'Mindfulness' as a personal resource for psychology practice is premised on the awareness of the self and characterised by an inner sense of inquisitiveness, experiential openness, and acceptance (Bishop et al., 2004). Brown and Ryan (2003) proposed that most individuals have the capacity to demonstrate mindfulness but that this capacity varies according to dispositional differences in awareness and responsiveness to present-moment experiences. This would be true in the case of applied sport psychology (ASP) practitioners (Giges, 2011). Nevertheless, the bond (consulting relationship) between a sport psychologist and his/her athlete-client has been acknowledged as indispensable for any positive outcomes to occur – whether it be “performance enhancement or decreased depression” (Williams & Andersen, 2012, p. 140) which signifies the practitioner-athlete relationship to be the ‘main intervention’ in contemporary practice (Tod & Andersen, 2005). There is research evidence for the utility of mindfulness psychotherapy (Bruce, Manber, Shapiro, & Constantino, 2010; Davis & Hayes, 2011; Ryan, Safran, Doran, & Muran, 2012) in this regard.

This study sought to explore sport psychology practitioners' mindfulness levels in relation to the quality of consulting relationships with clients, as well as its significance in modern-day practice. Evidence remains that ASP practitioners often find themselves not being fully present in their encounters with clients as their attention is overloaded with competing demands associated with professional responsibilities and personal psychological resources (Andersen & Mannion, 2011, Williams & Andersen, 2012). Mindfulness skills have evidence in the context of/and performance of athletes (Gardner & Moore, 2007; Bernier, Thienot, Cordon, & Fournier, 2009) and coaches (Hall, 2013). There is potential for sport psychologists to routinely apply mindfulness skills with their athletes/clients - including empathetic reflection, mirroring, and attentive listening (Andersen & Mannion, 2011). Hence, it is supposed that mindfulness practice/activities in the schooling of sport psychology practitioners to have the benefit to result in effective service delivery in an evolving sport environment.

Notwithstanding, little or no empirical evidence has been documented on mindfulness in the context of ASP for enhancing the quality of the consulting relationship. This study is guided by the following questions: “What is the relationship between practitioners' mindfulness' levels and

their perceived consulting (working) relations with clients?” and “What is the worth of mindfulness in contemporary sport psychology practice?”

Answers to these questions would inform the education and training of sport psychology practitioners to promote their consulting relationships with clients. The evidence would also be relevant to addressing the continuing education needs of sports psychology practitioners.

5.2 Methods

The current study adopted a sequential, exploratory, mixed-methods research approach in which a cross-sectional survey design was combined with analyses of ASP practitioners’ views on mindfulness.

5.2.1 Participants and setting

Twenty-five ASP practitioners (n=18 from South Africa; n=7 from UK; males=60%; females=40%; Master’s and PhD holders=92%; full-time practitioners=56%, with consulting experiences ranging from five years to 20 years=84%) participated in the assessment of the relationship between practitioners’ mindfulness and the perceived quality of the consulting relationship. Each had three recent client consultations in mind when completing the questionnaires. About half of the respondents reported having engaged in mindfulness practices for six months and more, which ranged from prayer to surfing. Thirty-two per cent of the respondents practised mindfulness meditation while another eight per cent reported having engaged in frequent Hatha Yoga and transcendental meditation practices. Additionally, nine purposively selected ASP practitioners (n=4 from South Africa; n=5 from UK; males=78%; females=22%; PhD holders=78%; full-time practitioners=33%; with consulting experience ranging from five years to 20 + years=100%) participated in semi-structured interviews.

5.2.2 Ethical procedures

Ethical approval was obtained from the Health Research Ethical Committee of North-West University (NWU) before the commencement of the study (NWU-00061-14-S1). Participants, who individually consented to the study, were assured that participation was voluntary. They did not have to divulge any information which made them uncomfortable, and were free to withdraw from the study up to the formal publication of results. Data were collected using online questionnaires and individual interviews.

5.2.3 Instruments

Participants self-reported their demographics. They also completed the Five Facet Mindfulness Questionnaire Short Form (FFMQ-SF: Baer et al., 2008) and Working Alliance Inventory Short-Revised Form – therapist’s version (WAI-SRT: Horvath & Greenberg, 1989). A subsample of the participants (n=4 from SA; n=5 from UK) participated in semi structured interviews on the essential competencies associated with contemporary sport psychology practice (Jooste, Kruger, Steyn, & Edwards, 2016).

The **FFMQ-SF** is a 24-item measure consisting of five aspects related to everyday mindful experiences of which four items correspond to *observing* (e.g. “I notice the smells and aromas of things”), and five items correspond to *describing* (e.g. “I’m good at finding the words to describe my feelings”), *nonreactivity to inner experiences* (e.g. “I watch my feelings without getting carried away by them”), *acting with awareness* (e.g. “It seems I am running on automatic without much awareness of what I’m doing”), and *nonjudging* of inner experiences (e.g. “I make judgments about whether my thoughts are good or bad”) respectively. Items are scored on a 5-point Likert-type scale ranging from 1 (*never or very rarely true*) to 5 (*very often or always true*), with high scores reflecting higher levels of mindfulness. Bohlmeijer et al. (2011) reported high internal consistency reliabilities for scores from all five scales with alpha coefficients ranging from .75 for nonreactivity to inner experiences to .87 for describing. The reliability of scores from the FFMQ-SF in the present sample ranged from .56 to .80.

The **WAI-SRT** therapist’s/counsellor’s version is a measure of the perceived quality of the working alliance with a client. Items of the WAI-SRT are constructed so that four items correspond to *quality of therapeutic bond* (e.g. “I appreciate ___ as a person”) and three items correspond to *agreement on tasks* (e.g. “___ and I agree about the steps to be taken to improve his/her situation”), and *agreement on goals* (e.g. “We are working towards mutually agreed-upon goals”) respectively. The items are scored on a Likert scale ranging from 1 (*seldom*) to 5 (*always*), with high scores reflecting a strong working alliance. Hatcher and Gillaspay (2006) reported internal consistency reliabilities of .85 to .92 for scores from the WAI. The reliability of scores for this questionnaire in the present sample ranged from .77 to .86.

5.2.4 Interview

Nine purposively selected ASP practitioners completed face-to-face semi structured interviews on aspects of mindfulness they applied. They also addressed the extent to which they found mindful practices helpful to their work.

5.3 Data analysis

Spearman's rank-order correlation was employed to determine the correlation between the total scores and subscale scores from the mindfulness and consulting relationship surveys. Interviews were thematically analysed following the procedures outlined by Braun and Clarke (2006). The process involved the following: (1) transcribing the interviews and reading through each transcript a couple of times for self-familiarisation; (2) developing codes beside points of interest on transcripts, followed by collation of data extracts that recount each of the codes; (3) organising codes into themes; and (4) reassessing and refining themes to ensure an accurate representation of the data-set.

5.4 Results and discussion

Tables 5.1 and 5.2 present the descriptive statistics of the study variables. As can be observed from Table 1, a moderately positive correlation ($r=0.539$, $p=0.005$) exists between the total mindfulness scores and ratings on the quality of the consulting relationships. These data suggest that the higher the practitioner's mindfulness score, the better the quality of his/her consulting relationship with clients. A significant, positive correlation ($r=0.441$; $p=0.027$) was observed between the Observing subscale of the FFMQ and Bond subscale of the WAI-SRT (Table 2). This means that practitioners who are able to 'grace' with the emergence and development of events (internal and external stimuli) during consultation are more capable of connecting with their clients. The Describing subscale of the FFMQ and the Goal subscale of the WAI-SRT were also positively related ($r=.437$; $p=.029$) which suggest that practitioners' ability to accurately label their thoughts and experiences is helpful in devising mutually agreed objectives for therapy with clients. Similar positive relationships were observed between the Nonreacting subscale of the FFMQ and the Task score on the WAI-SRT ($r=0.402$; $p=0.046$) as well as between Nonreacting FFMQ scores and Goal scores on the WAI-SRT ($r=0.453$, $p=0.023$). This suggests that practitioners' objective indifference to (detachment from) their own thoughts or feelings during consultation contributes to the quality of the perceived relationship with clients (consensual agreement on task and goals for consultation).

Table 5.1: Correlations between Practitioners' Total Mindfulness Scores (FFMQ-SF) and Summated Ratings on the Consulting Relationships (WAI-SRT)

Correlations			FFMQ-SF Total Mean	WAI-SRT Total Mean
Spearman's rho	FFMQ-SF Total	Correlation Coefficient	1.000	.539**
		Sig. (2-tailed)		.005
		N	25	25
	WAI-SRT Total Mean	Correlation Coefficient	.539**	1.000
		Sig. (2-tailed)	.005	
		N	25	25

*. Correlation is significant at the 0.05 level (2-tailed).
 **. Correlation is significant at the 0.01 level (2-tailed).

Table 5.2: Correlations between the Subscales of the FFMQ-SF and the WAI-SRT

Correlations			WAI-SRT Task Ave	WAI-SRT Goal Ave	WAI-SRT Bond Ave
Spearman's rho	FFMQ-SF Observing	Correlation Coefficient	.372	.369	.441*
		Sig. (2-tailed)	.067	.069	.027
		N	25	25	25
	FFMQ-SF Describing	Correlation Coefficient	.373	.437*	.338
		Sig. (2-tailed)	.067	.029	.099
		N	25	25	25
	FFMQ-SF Nonreacting	Correlation Coefficient	.402*	.453*	.375
		Sig. (2-tailed)	.046	.023	.065
		N	25	25	25
	FFMQ-SF Awareness	Correlation Coefficient	.382	.297	.092
		Sig. (2-tailed)	.060	.149	.662
		N	25	25	25
	FFMQ-SF Nonjudging	Correlation Coefficient	-.201	-.137	-.027
		Sig. (2-tailed)	.336	.515	.898
		N	25	25	25

*. Correlation is significant at the 0.05 level (2-tailed).
 **. Correlation is significant at the 0.01 level (2-tailed).

The positive relationships between the mindfulness and client consultation qualities could be explained by the fact that increased attention to and awareness of present-moment experiences may permit greater insight into client issues in the consulting relationship (Brown & Ryan, 2003; Germer, 2004). Mindfulness in this instance could be conceded to allow practitioners to cultivate a meaningful ‘feel for’ and ‘listening to’ their clients’ issues during consultation, which consequentially fosters a stronger bond as clients feel ‘felt’, understood or heard (Siegel, 2007, Ryan et al., 2012).

Participant sport psychologists spoke of the worth of mindfulness in contemporary sport psychology practice as follows:

“When I as a psychologist work with my athlete client, I am fully focused on that client, just like, for example, I want my tennis player to be fully focused on the ball, because you need to be fully focused. If my mind is cluttered then I miss little things. I miss a tone of voice, I miss a facial expression, I miss what he/she says, or what he/she is not saying?” (Participant # 2; SA)

“So, if I am with a client, I’ve really got to bracket out biases and listen to the other person ... So then, I am unimportant and/or, for example, if I am working with mainly less privileged people, oppressed people, I’ve got to be very open to show my vulnerability” (Participant # 4; UK).

From these data, it would seem the sport psychologists perceived the importance of self-awareness in their appreciation of underlying meaning of clients’ stories during consultation. Furthermore, they appear to acknowledge their mindful awareness during consultation to also enable nonjudgmental acceptance of clients’ concerns – freed from any preordained interpretations. These findings are consistent with Epstein’s (1995) writings on an ideal observational presence adopted by therapists (“thoughts without a thinker”) with a view to directing their attention, while engaging in self-exploration, toward promoting accurate awareness of present-moment experiences during consultation with clients. Sport psychology practitioners’ accurate awareness and labelling of this immediate consulting experience may well be connected to a certain level of translucent honesty that is experienced by clients which, in sport psychology literature, has been identified by athletes as a sought-after practitioner quality needed for the development of effective consulting relationships (Sharp & Hodge, 2014).

Sport psychology is an emerging profession in South Africa (Whitton, 2011; SASSEP, 2015). Findings from this study provide preliminary evidence for including mindfulness in sport psychology training and education programmes aimed to enhance effective working relations with clients.

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CHAPTER 6

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS AND LIMITATIONS

6.1 Summary

The literature indicates that a unified conceptualisation and understanding of applied sport psychology remains indefinable, which is the primary reason for the inconsistent state of international standards in the education, training, accreditation, regulation and application of sport psychology. Nonetheless, the latest trends in sport psychology service delivery reveal that clients value practitioners who go beyond the confines of conventional performance enhancement approaches (for example, PST) and render humanistic client-centred services which promote conditions for therapeutic growth such as the establishment of a trusting relationship. In this respect, the Eastern meditation-derived concept of mindfulness has been associated with enhanced levels of awareness, openness to experiences, self-efficacy, acceptance, relationship development skills, empathy and compassion for the self and others. Amongst these and more, mindfulness has been shown to promote therapists' therapeutic presence, thus paving the way for humans to flourish.

The first aim of the study was to probe and contextualise the parallels between Eastern meditation-derived mindfulness and Rogers's humanistic person-centred (PC) approach. Secondly, the study aimed to identify the essential competencies in contemporary sport psychology practice and to explore the comparative views of ASP practitioners in South Africa and United Kingdom. Thirdly, the study was geared to explore the significance of mindfulness in contemporary sport psychology practice. Lastly the study aimed to assess the relationship between sport psychology practitioners' dispositional mindfulness and the quality of the consulting relationship.

Chapter 2 consists of a literature review where applied sport psychology, person-centred counselling, and mindfulness are discussed. This review provided a detailed discussion on

conceptualising contemporary sport psychology practice in view of the education and training of applied sport psychologists, standpoints on professional practice and associated competencies in effective service delivery. A theoretical framework for person-centred counselling and mindfulness, including its relevance to current sport psychology practice, was also provided. The literature study revealed that there is a definite lack of accurate understanding and conceptualisation of applied sport psychology. This has resulted not only in wavering national and interstate standards for educating and “credentialing” practitioners, but also in leaving the field marred by charlatan practices. The literature overview also highlighted the inadequacy of current sport psychology training models to teach sport psychologists the necessary consultation skills such as addressing clients’ person-related issues or the rendering of services that extend beyond the confines of rudimentary mental-skills training/sport-science approaches. An additional verification was that modern-day sport psychology service delivery endorses Rogers’s construal of therapy, which signifies an appreciation of clients’ own resources for self-fulfilment, growth and behaviour change, regardless of the defining role of clients (athletes or coaches). And a final disclosure was that mindfulness is not only a facilitating quality in therapeutic endeavours but also a means of spearheading ASP practitioners’ inner wisdom, which perceptively informs their way of being with clients (accurate awareness of the self and the client, nonreacting, and caring).

Chapter 3 is presented in article format which was peer reviewed, accepted and published in the *Psychology Journal of Africa (PJA)*, Dec 2015, Vol. 25, No. 6, 554-559. The aim of this chapter was to probe and contextualize the strong parallels between Eastern meditation-derived mindfulness and Rogers’s humanistic person-centred approach. This was carried out by means of a conceptual and evaluative review of literature on the PC framework in relation to definitive descriptions of mindfulness. The basic conclusion was that mindfulness and PC counselling share a collective ideology, the main outcome of which is to inspire behavioural qualities associated with therapeutic change. Both concepts promote behaviour that is geared to an alert presence, unbendable acceptance, openness, patience, curiosity and equanimity. In a manner that resembles the PC approach, mindfulness engenders a life-affirming way of being that embodies an innate identification with human nature which, in effect, promotes unconditional acceptance, congruence and compassion.

Chapter 4 comprises an article which identified the essential competencies in contemporary sport psychology practice and explored the comparative views of expert practitioners/psychologists within the field. The article was peer reviewed, accepted and published in the *African Journal of*

Physical Activity and Health Sciences (AJPHEs), March 2016, Vol. 23, No. 1.1, pp.1-34. Data were gathered by means of semi-structured interviews with a purposefully selected sample (N=9) of sport psychology practitioners/psychologists from South Africa (N=4) and the United Kingdom (N=5). The sample consisted of two female and seven male participants (N=9) aged between 33 and 65 of Caucasian origin, of whom seven had a qualification at PhD level and two at Master's degree level. Interview recordings were transcribed verbatim by a professional transcriptionist and sent for member checking. Upon confirmation and verification of the data, the investigators conducted a thematic content analysis of the data in accordance to the eight-step analysis method outlined by Tesch (1990:142-145). Emergent themes suggested that competence in contemporary sport psychology service delivery is linked with a relational and dependable character, a client-centred focus, a definite counselling skills-set (restorative and facilitative skills) and explicit expertise within the fields of psychology, sport and sport science. Essentially, the views provided by SA and UK practitioners were overlapping and remarkably similar, which verifies not only the communal requirements of effective service delivery (such as clients' needs) but also the advancement of sport psychology praxis in both developing and developed contexts. With the adoption of an interpretive approach to analysing the data, arising from modern developments in ASP and in relation to existing literature, came the realisation that modern-day sport psychology practice entails an integrated set of knowledge (cross-discipline, sport-specific), skills and personal character.

Chapter 5 displays the results of an article accepted for publication in the *Journal of Psychology in Africa (JPA)*, October 2016, Vol. 26. No. 5, pp. 477-480 on findings regarding the relationship between applied sport psychology practitioners' (ASP) dispositional mindfulness and the quality of the consulting relationship. Discoveries relating to the significance of mindfulness in contemporary sport psychology practice were also presented. A sequential exploratory mixed-methods research approach was adopted for research pertaining to this chapter. More specifically, a cross-sectional survey design was combined with analyses of ASP practitioners' (N=9) views on mindfulness which were distilled from a preceding qualitative investigation on essential competencies in contemporary practice (see Chapter 4). Twenty-five ASP practitioners (N=18 from SA & N=7 from UK) also completed online questionnaires which captured their demographic information, responses to the Five Factor Mindfulness Questionnaire (FFMQ-SF), and perceptions on the quality of the consulting relationship (Working Alliance Inventory Short Revised Therapist Version - WAI-SRT) with three distinct members of their clientele (N=75) in mind. This specific sample consisted of 15 males and 10 females of which eight percent were qualified at Honours degree level, 56 percent at Masters Degree level and 36 percent at PhD

level. Sixty percent of the respondents held professional registration with the Health Professions Council of South Africa (HPCSA) whilst 16 percent were registered with the British Association of Sport and Exercise Science (BASES) and Health and Care Professions Council (HCPC) in the UK respectively. Inferential statistics along with Spearman's rank-order correlation were used to determine whether there were any relationships between the mindfulness inventory and working alliance scale scores. Qualitative data were subjected to a thematic content analysis (phases outlined by Braun & Clarke, 2006) which focused on the value of mindfulness in participants' descriptions of competent sport psychology practice. Results derived from the correlation analysis (quantitative data) revealed a significant relationship between practitioners' total mindfulness scores and total mean ratings on the quality of the consulting relationship. Positive interscale correlations between the mindfulness measure and the Working Alliance Inventory were also identified (for example, practitioners' ability to observe, describe and not react to inner experiences are positively associated with the quality of the therapeutic bond, agreement on goals, and agreement on goals and tasks with clients respectively). The analysis of interview responses (qualitative data) revealed that mindfulness facilitates effective sport psychology practice by way of accurately attending (attunement) to present-moment experiences such as the practitioner's self in conjunction with the client and their presenting issues, and empathetic understanding of clients' unique concerns. The emergent themes sustained the correlations between practitioners' mindfulness processes and their perceptions of the quality of the consulting relationship – which further intensifies the practical worth of promoting practitioners' mindfulness levels in effective modern-day sport psychology practice. The advantage of adopting an exploratory mixed-methods research approach in this chapter was corroborated since the reported worth of mindfulness in sport psychology practice was verified by significant correlations between practitioners' mindfulness levels and aspects underpinning the quality of the working alliance (the consulting relationship practitioners have with their clients).

6.2 Conclusions

The following conclusions are based on the propositions/hypothesis and the results of the study.

PROPOSITION 1: Strong parallels between Eastern meditation-derived mindfulness and Rogers's humanistic person-centred (PC) approach will be verified.

Deep connections and similarities were noted between the attitudinal behaviours associated with mindfulness and Rogers's humanistic philosophy in pursuit of facilitating therapeutic change. In essence, the results revealed that mindfulness inspires PC therapy by enabling associated therapists to experience the organismic sensitivity, acceptance and openness to both the client's inner world and the associated experiences during therapy. In the light of the fact that PC therapy is founded on the therapist's authenticity, a utilitarian stance would be to cultivate such a profound 'way of being' with meditation-inspired activities. Centred on this vantage point, the potential value of Eastern meditation (Buddhist)-derived approaches in therapy such as the dialectical behavioural therapy (DBT) by Linehan (1993), and acceptance commitment therapy (ACT) by Hayes, Strosahl, and Wilson (1999) are encouraged in humanistic therapeutic endeavours – hence, the acceptance of the hypothesis.

PROPOSITION 2: The essential competencies in contemporary sport psychology practice amongst ASP practitioners practising in South Africa/UK will accentuate the collective properties of honesty and trustworthiness, relationship building, self-awareness (knowing, understanding & managing the self), sport-specific knowledge, and sensitivity within sport culture.

Although most of the findings resemble competencies noted in the hypothesis (such as honesty, trustworthiness, sport-specific knowledge, sensitivity within sport culture), results revealed that additional competencies such as a definite counselling skills-set, client-centred focus and an obvious proficiency within the fields of psychology and sport science are also considered to be essential in contemporary sport psychology practice. The hypothesis can therefore be partly accepted for the reason that additional competencies are regarded as indispensable to modern-day sport psychology service delivery. The conclusion, then, is that the discovered competencies offer a valuable practice to rate existing and novice practitioners in their pursuit of professional development in terms of assessing their current standard of practice. Additionally, knowledge and understanding of the underscored competencies provide a supervisory standard for guiding the formation of a professional practice philosophy – especially considering the much-needed stimulus for ongoing support and training in safeguarding relevant and competent practice. Competencies revealed by this study could also promote academic enquiry and inform future efforts to establish a benchmark in sport psychology training as well as drawing attention to elements that merit special consideration in the selection of practitioners, such as their personal character and skills.

PROPOSITION 3: Mindfulness processes will feature very significantly in contemporary sport psychology service delivery amongst ASP practitioners practising in South Africa/the UK.

Results of this study validate the worth of mindfulness in contemporary sport psychology practice since they were reportedly associated with practitioners' ability not only to sense clients' unique needs during consultation but also to become more aware of their own meddling deliberations and inner chatter which so often influence their way of being with clients. Practitioners recounted that mindfulness serves the purpose of attunement to the content and underlying meaning of clients' concealed needs, which offers an enhanced sense of presence and capacity to respond to clients in more appropriate ways. A further revelation was that mindfulness promotes a sense of self-deliverance during consultation, which promotes an unstructured openness and acceptance towards clients. In view of the aforementioned findings, the hypothesis is accepted.

HYPOTHESIS 4: There will be a significantly positive relationship between practitioners' dispositional mindfulness, and the quality of the consulting relationship (athlete-centred service delivery) amongst a group of ASP practitioners living in South Africa/the UK.

Results of the above hypothesis revealed a strong positive relationship between ASP practitioners' total dispositional mindfulness scores and the combined ratings of the perceived quality of the consulting relationship with various (three) members of clientele in mind. Numerous positive interscale correlations between the involved measures were also noted. Findings showed that practitioners' ability to notice their internal and external experiences (observe) was positively associated with the quality of the connection (bond) established with clients. Practitioners' ability to label (describe) their felt sensations and experiences in words, correlate with the likelihood of reaching agreement on goals needed for change with clients. Finally, practitioners' ability to detach themselves from inner thoughts and feelings (nonreaction) correlated positively with the agreement on tasks required and goals needed for change with clients. The hypothesis is therefore accepted since ASP practitioners' mindfulness qualities are directly related to their ability to establish and foster constructive consulting relationships with clients.

By and large, the study results reveal that meditation-derived mindfulness has gained a worthy foothold for humanistic PC therapy because it cultivates, harmonises and deepens important therapist qualities (ways of being) conducive to therapeutic change. The personal qualities (relational and dependable character), sporting background (sport experience/sport-specific knowledge), practice philosophy (client-centred), and vocational expertise (counselling skills, knowledge of psychology and kinesiology) of sport psychology practitioners are also emphasized in contemporary practice. Knowledge of this field provides a valuable yardstick for emerging/experienced practitioners as well as a significantly logical reason for existing/or developing sport psychology education and training models. Thus there is an increased focus on specific criteria for admitting trainees to similar programmes promoted by these results. Additionally, the study's results advocate the worth of mindfulness processes (dispositional mindfulness) in sport psychology service delivery since they facilitate practitioners' awareness of (accurate attunement to) their organismic reality (the self and client) during consultation, their ability to free the 'self' of distortions, bias or rigid self-concept, thus showing compassion towards clients. The significance of mindfulness in relation to these benefits has received added confirmation from being positively associated with ASP practitioners' ability to establish more constructive consulting relationships with clients – all of which substantiates viewing the integration of academically oriented mindfulness practices/activities in sport psychology training and development programmes as an added laboratory for honing practitioner qualities in pursuit of effective sport psychology practice in the modern age.

6.3 Recommendations and limitations

6.3.1 As regards the noted parallels between mindfulness and Rogers's person-centred approach, the recommendation is that efforts should be employed to incorporate meditation-inspired activities into the practical preparation of trainee therapists. Meditation-inspired activities could also provide alternative means of augmenting refinement and expertise in professional practice associated with therapeutic endeavours. Considering the collective ideologies shared between mindfulness and Carl Rogers's view of a fully functioning person, the researcher suggests that formal mindfulness-promoting activities adopt therapeutic endeavours in order to spur therapists on to pursuing alleviation of human suffering.

6.3.2 When it comes to the focus on exploring the essential competencies in current sport psychology practice, the suggestion is that certain traits such as the personal character and skills

of incumbent sport psychology trainees merit special consideration for acceptance into programmes that officially train and qualify applied sport psychologists. Furthermore, there should be a good balance of cross-discipline integration between psychology and sport science departments in the education, training and supervisory function of applied sport psychologists. To all intents and purposes, informed efforts should be made to streamline and adapt current or developing sport psychology training models and to guide practitioners into a progressive pathway which concentrates on universal methods that promote the development of competencies indispensable and relevant to contemporary sport psychology practice.

6.3.3 Recommendations regarding the identification of the relationship between practitioners' dispositional mindfulness and the quality of the consulting relationship are that mindfulness-inspired practices/activities should be considered in sport psychology training and development programmes for the purpose of cultivating sport psychology practitioners' 'presence' during consultation. The essential vision is for academically oriented mindfulness practices/activities to suffice as an additional platform for testing the battle against the many challenging conditions under which modern-day sport psychology services are rendered. In terms of the findings which revealed that mindfulness endorses a sense of self-awareness and present-moment attunement during consultation (therapeutic presence), as well as facilitating the innate ability of practitioners to establish effective working relations with clients, mindfulness screening and practices in present-day training, education and regulation of sport psychology practitioners should definitely be included.

Despite the fact that this study was carefully planned and executed, there were some evident limitations which need to be addressed in case future related studies are planned. Thomas, Nelson, and Silverman (2005, p. 58) define a limitation as a "possible shortcoming or influence that either cannot be controlled or is the result of the delimitations imposed by the investigator". All research investigations have limitations.

Recommendations to deal with such limitations are as follows:

6.3.4 Firstly, a more diverse sample of participants in terms of ethnicity and gender should be considered when exploring the views on essential competencies in modern-day sport psychology practice. The separation and comparison of participants who consult on a part-time and full-time basis should also be considered to reveal findings which could advance understanding of the competencies identified in the current study. Furthermore there should be a comparison between

the views of practitioners who work in a team setup and practitioners who do independent, individual consulting in order distinguish clearly between the qualities needed when working alongside coaches and members of the support staff. Major challenges with collecting these types of qualitative data were the widespread geographical areas that had to be travelled within SA and the UK to conduct individual interviews with expert sport psychology practitioners in view of their preference for being interviewed in person rather than via Skype or telephone. However, meeting each participant in person has eased the follow-up communication as in the confirmation of the content of interviews and analyses. Another advantage was that strong rapport was established with participants and a great deal was learned about the environment in which they function and what their client-base consists of (for example, contracting union, university centre, and private practice).

6.3.5 A closely linked factor was the fact that the interview guide was presented (e-mailed) to the participants prior to the face-to-face interviews and this could have allowed the respondents to become acquainted with the interview questions which may have resulted in their responses being premeditated. The logical recommendation is for future studies to take precautions to ensure participant responses are more spontaneous.

6.3.6 Another shortcoming was the low number of participants who participated in the evaluation of the relationship between practitioners' mindfulness and the quality of the consulting relationship. A list of 130 sport psychology practitioners from the South African Sports Confederation and Olympic Committee's (SASCOC) list of recognised sport psychology practitioners, the South African sport psychology emailing list, the British Association of Sport and Exercise Sciences's (BASES) list of accredited sport scientists specialising in sport psychology practice, and the UK's Health and Care Professions Council (HCPC) website (BPS registered sport and exercise psychologists) was collated. Only 25 participants successfully completed the online questionnaires, following formal requests for their participation, which consisted of five emails (over five weeks) and a follow-up telephone call to each of those with listed contact numbers. Persuading sport psychology practitioners to complete one of the questionnaires (Working Alliance Inventory Short Form Therapist Version - WAI-SRT) after three separate consultations with three different clients, proved to be a real challenge. Because of the meagre number of sport psychology practitioners in South Africa, similar future investigations could include larger samples of sport psychology practitioners from both developing and developed contexts to promote the generalizability of results. A distinction between these contexts for the refinement of such knowledge could also be explored.

6.3.7 A further, related shortcoming was the disinclination of the participating ASP practitioners to grant access to three members of their clientele in order to gather the respective clients' collective views on the consulting relationship. A typical response from the sport psychology practitioners was that they were not willing to burden their clients with the task of completing a questionnaire (be it on hard copy or online via their own pc/smart device) since it would intrude on their personal time and finances (data costs). Another concern was a potential threat to their clients' anonymity if they allowed the investigator to send a participation request (via text or email) to their clients. Some even maintained that the mere fact of no direct benefit accruing to the client through participation in the study made them reluctant to exert any effort to recruit or identify three willing clients. Consequently the study could not report clients' ratings of the quality of the consulting relationship (WAI: Client Form) and consultation interaction (Barrett-Lennard Relationship Inventory: Client Form OS-40-BLRI) for the sport psychology practitioner involved, and only reported the practitioner's opinion of the quality of the consulting relationship. Future investigation into the quality of this type of consulting relationship is advised – to assess the views of participating clients in conjunction with those of sport psychology practitioners (perhaps in a team set-up) to ensure more objective and nuanced findings on the quality of the consulting relationship.

**APPENDIX A: INFORMATION LEAFLET AND WRITTEN INFORMED
CONSENT FORM FOR PARTICIPANTS WHO WERE REQUESTED TO
PARTICIPATE IN SEMI-STRUCTURED INTERVIEWS**

**ATHLETE-COUNSELLING COMPETENCIES OF APPLIED SPORT PSYCHOLOGY
PRACTITIONERS AND THE ROLE OF MINDFULNESS IN ATHLETE-CENTRED
SERVICE DELIVERY**

Primary Investigator: Mr J Jooste (MA Human Movement Science; B Ed Hons; B Tech Officiating and Coaching Science, Certificate in Sport Psychology); e-mail: joostej1@yahoo.com

Promoter: Prof A Kruger (PhD), Department of Biokinetics, Recreation and Sport Sciences, North-West University, South Africa; e-mail: ankebe.kruger@nwu.ac.za

Co-promoters: Prof BJM. Steyn (DPhil & PhD), Department of Biokinetics, Sport & Leisure Sciences, University of Pretoria, South Africa; bjm.steyn@up.ac.za

Dr DJ Edwards (PhD & DPhil) HPCSA Registered Clinical Psychologist, HCPC-UK Registered Clinical Psychologist; BPS Chartered Psychologist, University Zululand Research Fellow South Africa; edwards.davidjohn@googlemail.com

**WRITTEN INFORMED CONSENT BY EXPERT APPLIED SPORT PSYCHOLOGY
PRACTITIONERS TO BE A RESEARCH PARTICIPANT**

(Qualitative phase)

I am Julius Jooste, a PhD student from the North-West University (South Africa) working on a study that explores the essential athlete-counselling competencies in contemporary sport psychology practices, and assessing the significance of mindfulness processes in sport psychology service delivery as well as the relationship between practitioner mindfulness and athlete-centred service delivery. I would like to invite you to give consent and participate in the first phase of my study. To follow is information about the study so that you can make an informed decision.

1. PURPOSE OF THE STUDY

The primary purpose of this qualitative phase of the study is to explore the current essential athlete-counselling competencies of applied sport psychology (ASP) practitioners in South Africa and the United Kingdom. You are being asked to participate in this qualitative phase of the study because your expert views and particular nature of practice in sport psychology are very valuable to me. A minimum of ten participants will be selected for this phase of the study, if it happens that you have shown interest to participate and do not get selected for an interview, you will be invited to participate in the subsequent instrument development or quantitative phase of the study.

2. PROCEDURE

If you agree to be in this study you will be expected to do all of the following:

- Partake in a forty-five to sixty minute semi-structured interview with the primary investigator either in person or via Skype which will be scheduled at a time and neutral location suited to your convenience to gather your views regarding essential athlete-counselling competencies in current sport psychology practice. The interview will be voice recorded and transcribed verbatim where after the transcripts and the investigator's inferences of the dialogue will be sent to you for your reflection and confirmation before it will be considered for analyses;
- Give consent to partake in the study and allow the primary investigator to use the data for research purposes.

3. RISKS/DISCOMFORTS

The study should pose no foreseeable risk to you, since the interview questions are not of a sensitive nature. However, some of your privacy might be lost as a result of a face to face interview with the primary investigator of this study but your name will never be made known and your data will be handled as confidential as possible. No individuals' identifiers will be used in any publications resulting from this study and only the team of researchers will work with the information that you share. Participation in this study is voluntary and you have the right to withdraw from the study at any point in time up until the analysed data is formally reported without providing a reason for doing so and without the application of any consequences. You will be allowed access to personal results if so requested. All the evidence of the interview such as the voice recording, field notes, and transcripts will be electronically stored on a password protected computer at the premises of the North-West University's Potchefstroom campus.

Access to the data will be limited to the members of the research team. The data will be kept for five years after the reporting of results where after it will be destroyed.

4. BENEFITS

There will be no direct benefits for you, however, you will receive an e-mailed copy of all publications resulting from the data gathered. Furthermore, the verification of essential athlete-counselling competencies in this study could potentially provide a valuable knowledge base for formulating specific training objectives and standards for ASP practitioners. This could also allow sport psychology to continue to evolve as a speciality area within the broader field of professional psychology. Analysed interview responses on this topic will be used to develop a context-specific measure of mindfulness in applied sport psychology that could be valuable for the assessment of mindfulness-based meditation interventions in sport psychology practice.

5. COSTS

There should be no cost to you as a result of your participation in this study. You have the privilege to decide the logistics (for example, in-person or via Skype, location, time of day) surrounding the interview to maximize your convenience and minimize any potential loss of income, travel expenditure, and interference with personal responsibilities.

6. PAYMENT

You will receive no payment for participation.

7. QUESTIONS

You are welcome to contact the student: Mr. Julius Jooste (+27 12 844 008931; joostej1@yahoo.com) or study promoter: Prof Ankebé Kruger (+27 18 299 1793; ankebe.kruger@nwu.ac.za) if you have any further questions concerning your involvement in this study or consent. You are also welcome to contact the Health Research Ethics Committee of the Faculty of Health Sciences via Ms Carolien van Zyl at +27 18 299 2094, Carolien.VanZyl@nwu.ac.za.

8. FEEDBACK OF FINDINGS

The findings of the research will be shared with you by means of electronic mail as soon as it is available. You are welcome to contact us regarding the findings of the research.

WRITTEN INFORMED CONSENT FORM

PARTICIPATION IN THIS RESEARCH IS VOLUNTARY.

You are free to decline to be in this study, or to withdraw at any point before the analysed data is formally reported on even after you have signed the form to give consent without any consequences.

Should you be willing to participate you are requested to sign below:

I _____ hereby voluntarily consent to participate in the above mentioned study. I am not coerced in any way to participate and I understand that I can withdraw at any time should I feel uncomfortable during the study. I also understand that my name will not be disclosed to anybody who is not part of the study and that the information will be kept confidential and not linked to my name at any stage. I also understand what I might benefit from participation as well as what might be the possible risks and should I need further discussions someone will be available.

Date

Signature of the participant

Date

Signature of the person obtaining consent

APPENDIX B: PROTOCOL FOR SEMI-STRUCTURED INTERVIEW



Faculty of Health Sciences

INTERVIEW PROTOCOL

PROJECT: Athlete-Counselling Competencies of Applied Sport Psychology Practitioners and the Role of Mindfulness in Athlete-Centred Service Delivery.

OBJECTIVE: To Explore the Essential Athlete-Counselling Competencies of ASP Practitioners Practicing in South Africa / the United Kingdom.

Time: _____

Date: _____

Place: _____

Interviewer: _____

Interviewee: _____

Consent form signed? Yes: _____ No: _____

Notes to interviewee:

I want to thank you for taking the time to meet with me today. My name is Julius Jooste and I would like to talk to you about your experiences and perceptions concerning essential athlete-counselling competencies in contemporary sport psychology practice. The interview should take between forty- five minutes to an hour. I will be taping the session because I don't want to miss any of your comments. Although I will be taking some notes during the session, I can't possibly write fast enough to get it all down. Because we're on tape, please be sure to speak up so that we don't miss your comments. All responses will be kept confidential. This means that your interview responses will only be shared with a transcriptionist and co-coder and we will ensure that any information we include in our report does not identify you as the respondent. Remember, you don't have to talk about anything you don't want to and you may end the interview at any time.

Are there any questions about what I have just explained?

Are you willing to participate in this interview?

(Adapted from Boyce & Neale, 2006)

Questions:

1. Please describe in as much detail as possible the role of an applied sport psychology practitioner (ASP) in contemporary practice?

Reflection by interviewer: _____

2. What proficiency requirements do you think should a qualifying sport psychologist meet before pursuing a career in private practice?

Probe: What are the specific reasons for your answer?

Reflection by interviewer: _____

3. How did your professional philosophy / approach to sport psychology service delivery change over the years?

Probe: Why?

Do you have an example of this?

Reflection by interviewer: _____

4. What are your clients' expectations of you when in consultation?

Reflection by interviewer: _____

5. What differences or similarities are there in clientele e.g. amateur vs. professional athletes, team vs. individual athletes, males vs. females and coaches?

Reflection by interviewer: _____

6. Which competencies do you think will differentiate effective from less effective sport psychology practitioners?

Probe: Please explain that further?

Reflection by interviewer: _____

7. What advice would you give a neophyte ASP practitioner that wishes to pursue a career in applied sport psychology practice?

Probe: Do you have further advice pertaining specifically to managing the self in consultation?

Reflection by interviewer: _____

8. **Based on your experience, what qualities do athletes-clients look for in an applied sport psychology practitioner?**

Reflection by interviewer: _____

9. **Please describe a particular recent consultation with an athlete client lately that sparked significant growth (therapeutic change) within the client?**

Probe: What personal characteristics from your side contributed to this particular consultation?

Reflection by interviewer: _____

The end

Closure

Thank you for your participation. Again, your anonymity is assured and your responses to the all the preceding questions will be treated as confidential.

Can I perhaps follow-up with you again for you to confirm the transcribed responses and analysed data of our interview today? Yes___; No___

**APPENDIX C: INFORMATION LEAFLET AND WRITTEN INFORMED
CONSENT FORM FOR PARTICIPANTS WHO WERE REQUESTED TO
COMPLETE THE ONLINE QUESTIONNAIRES**

**ATHLETE-COUNSELLING COMPETENCIES OF APPLIED SPORT PSYCHOLOGY
PRACTITIONERS AND THE ROLE OF MINDFULNESS IN ATHLETE-CENTRED
SERVICE DELIVERY**

Primary Investigator: Mr J Jooste (MA Human Movement Science; B Ed Hons; B Tech Officiating and Coaching Science, Certificate in Sport Psychology); e-mail: joostej1@yahoo.com

Promoter: Prof A Kruger (PhD), Department of Biokinetics, Recreation and Sport Sciences, North-West University, South Africa; e-mail: ankebe.kruger@nwu.ac.za

Co-promoters: Prof BJM Steyn (DPhil & PhD), Department of Biokinetics, Sport & Leisure Sciences, University of Pretoria, South Africa; bjm.steyn@up.ac.za

Dr DJ Edwards (PhD & DPhil) HPCSA Registered Clinical Psychologist, HCPC-UK Registered Clinical Psychologist; BPS Chartered Psychologist, University Zululand Research Fellow South Africa; edwards.davidjohn@gmail.com

**WRITTEN INFORMED CONSENT BY APPLIED SPORT PSYCHOLOGY
PRACTITIONERS / COUNSELLORS TO BE A RESEARCH PARTICIPANT**

(Quantitative phase)

I am Julius Jooste, a PhD student from the North-West University (South Africa) working on a study that explores the essential athlete-counselling competencies in contemporary sport psychology practices, and assessing the significance of mindfulness processes in sport psychology service delivery as well as the relationship between practitioner mindfulness and athlete-centred service delivery. I would like to invite you to give consent and participate in the second phase of my study. To follow is information about the study so that you can make an informed decision.

1. PURPOSE OF THE STUDY

The primary purpose of this quantitative phase of the study is to determine the relevance of mindfulness processes in sport psychology service delivery amongst applied sport psychology (ASP) practitioners, and assess the relationship between dispositional mindfulness and athlete-centred service delivery amongst a group of counsellor-athlete client dyads living in South Africa / the United Kingdom. You are being asked to participate in this quantitative phase of the study because your expert views and particular nature of practice in sport psychology are very valuable to me.

2. PROCEDURE

If you agree to be in this study you will be expected to do all of the following:

- Complete a web-based test battery consisting of questionnaires that is accessible through the URL reflecting on separate consultations with three athlete-clients which will contain Likert-scale response questions that will gather demographic information, assess your dispositional mindfulness as well as your perceived working relationship with each athlete-client. A link to the web page will be sent to you via e-mail or sms. The test battery will take no longer than fifteen minutes to complete and can be filled out via your internet connected smart device, pc or laptop;
- Grant the primary investigator of this study permission to collect data concerning the consulting experience (with a particular interest in athlete-centred service delivery) from three athletes-clients that are currently under your charge. In this regard, you will be expected to identify these athlete-clients and obtain their permission to share their contact details with the primary investigator of this study **or** Alternatively you could forward the email / sms containing the link to the test-battery to the client yourself;
- Give consent to partake in the study and allow the primary investigator to use the data gathered for research purposes.

3. RISKS/DISCOMFORTS

The study should pose no foreseeable risk to you, since the questions are not of a sensitive nature. However, some of your privacy might be lost during this study due to the fact that the research team will know your name, but your name will never be made known to anyone else and your data will be handled as confidential as possible. No individuals' identifiers will be used in any publications resulting from this study and only the team of researchers will work with the information that you share. Participation in this study is voluntary and you have the right to withdraw from the study at any point in time up until the analysed data is formally reported on

without providing a reason for doing so and without the application of any consequences. You will be allowed access to personal results if so requested. All the data such as the questionnaire responses will be electronically stored on a password protected computer at the premises of the North-West University's Potchefstroom campus. Access to the data will be limited to the members of the research team. The data will be kept for five years after the reporting of results where after it will be destroyed.

4. BENEFITS

There will be no direct benefits for you, however, you will receive an e-mailed copy of all publications resulting from the data gathered. Furthermore, the verification of the relevance of mindfulness in applied sport psychology and its relationship to athlete-centred service delivery in this study could potentially provide a valuable knowledge base for formulating specific training objectives and standards for ASP practitioners. This could also allow sport psychology to continue to evolve as a speciality area within the broader field of professional psychology.

5. COSTS

The cost to you as a result of your participation in this study should be minimal and limited to your time and data cost completing the web-based test battery.

6. PAYMENT

You will receive no payment for participation.

7. QUESTIONS

You are welcome to contact the student: Mr Julius Jooste (+27 12 844 008931; joostej1@yahoo.com) or study promoter: Prof Ankebé Kruger (+27 18 299 1793; ankebe.kruger@nwu.ac.za) if you have any further questions concerning your involvement in this study or consent. You are also welcome to contact the Health Research Ethics Committee of the Faculty of Health Sciences via Ms Carolien van Zyl at +27 18 299 2094, Carolien.VanZyl@nwu.ac.za.

8. FEEDBACK OF FINDINGS

The findings of the research will be shared with you by means of electronic mail as soon as it is available. You are welcome to contact us regarding the findings of the research.

WRITTEN INFORMED CONSENT FORM

PARTICIPATION IN THIS RESEARCH IS VOLUNTARY.

You are free to decline to be in this study, or to withdraw at any point until the analysed data is formally reported even after you have given consent without any consequences.

Should you be willing to participate you are requested to sign below:

I _____ hereby voluntarily consent to participate in the above mentioned study. I am not coerced in any way to participate and I understand that I can withdraw at any time should I feel uncomfortable during the study. I also understand that my name will not be disclosed to anybody who is not part of the study and that the information will be kept confidential and not linked to my name at any stage. I also understand what I might benefit from participation as well as what might be the possible risks and should I need further discussions someone will be available.

Date

Signature of the participant

Date

Signature of the person obtaining consent

APPENDIX D: ONLINE QUESTIONNAIRES



TEST BATTERY: ASP PRACTITIONER / COUNSELLOR

DEMOGRAPHIC SHEET

Instructions: Please fill out the following spaces or tick the appropriate box where required

Gender: Male ☐; Female ☐

Country: South Africa ☐; the UK ☐

Highest degree acquired: _____

Years of counselling experience: 5 – 9 yrs. __; 10 – 14 yrs. __; 15 – 20 yrs. __; 20 + yrs. ____

Primary work setting: _____; Professional affiliation: _____

Any known medical condition that could impair your ability to accurately respond to Likert-type response questions: yes ☐; no ☐

2. Five Facet Mindfulness Questionnaire – Short Form (FFMQ-SF) (Bohlmeijer *et al.*, 2011).

Instructions: Below is a collection of statements about your everyday experience. Using the scale below, please indicate how frequently or infrequently you've had each experience in the last month. Please answer according to what really reflects your experience rather than what you think your experience should be.

Please respond to each item by marking one box per row with an "X"	Never or very rarely true	Not often true	Sometimes true, sometimes not true	Often true	Very often or always true
1. I'm good at finding the words to describe my feelings.					
2. I can easily put my beliefs, opinions, and expectations into words.					
3. I watch my feelings without getting carried away by them.					
4. I tell myself that I shouldn't be feeling the way I'm feeling. (R)					
5. It's hard for me to find the words to describe what I'm thinking. (R)					
6. I pay attention to physical experiences, such as the wind in my hair or the sun on my face.					
7. I make judgments about whether my thoughts are good or bad. (R)					
8. I find it difficult to stay focused on what's happening in the present moment. (R)					
9. When I have distressing thoughts or images, I don't let myself be carried away by them.					
10. Generally, I pay attention to sounds, such as clocks ticking, birds chirping, or cars passing.					

Please respond to each item by marking one box per row with an "X"	Never or very rarely true	Not often true	Sometimes true, sometimes not true	Often true	Very often or always true
11. When I feel something in my body, it's hard for me to find the right words to describe it. (R)					
12. It seems I am running on automatic without much awareness of what I'm doing. (R)					
13. When I have distressing thoughts or images, I feel calm soon after.					
14. I tell myself I shouldn't be thinking the way I'm thinking. (R)					
15. I notice the smells and aromas of things.					
16. Even when I'm feeling terribly upset, I can find a way to put it into words.					
17. I rush through activities without being really attentive to them. (R)					
18. When I have distressing thoughts or images, I can just notice them without reacting.					
19. I think some of my emotions are bad or inappropriate and I shouldn't feel them. (R)					
20. I notice visual elements in art or nature, such as colors, shapes, textures, or patterns of light and shadow.					
21. When I have distressing thoughts or images, I just notice them and let them go.					
22. I do jobs or tasks automatically without being aware of what I'm doing. (R)					

Please respond to each item by marking one box per row with an "X"	Never or very rarely true	Not often true	Sometimes true, sometimes not true	Often true	Very often or always true
23. I find myself doing things without paying attention. (R)					
24. I disapprove of myself when I have illogical ideas. (R)					

3. Mindfulness Practice - History Questionnaire

Instructions: Below is a list of categories representing a variety of mindfulness practices that you may or may not have experience with in your life. Using the 1-5 scale below, please click the number that best represents the amount of time you have ever spent with these practices.

1	2	3	4	5
Less than 6 months	7 months – 2 years	3 – 5 years	6-10 years	11 or more years

- | | |
|-------------------------------------|-----------|
| 1. Tai Chi/Qui Gong | 1 2 3 4 5 |
| 2. Hatha Yoga | 1 2 3 4 5 |
| 3. Mindfulness Meditation/Vipassana | 1 2 3 4 5 |
| 4. Transcendental Meditation | 1 2 3 4 5 |
| 5. Devotional Practices (list)..... | 1 2 3 4 5 |
| 6. Other practices (list)..... | 1 2 3 4 5 |
| 7. Other practices (list)..... | 1 2 3 4 5 |
| 8. Other practices (list)..... | 1 2 3 4 5 |

4. Working Alliance Inventory – Short Revised – Therapist version (WAI-SRT) (Hatcher & Gillaspy, 2006)

Respond to the statements below keeping in mind your recent consulting experience with:

Client no: 1 (Name only) _____ Date _____

Measurement Point (number of consultation): ____ in the past three months

Instructions: On the following page there are sentences that describe some of the different ways you might think or feel about your client. As you read the sentences mentally insert the name of client no:1 in place of _____ in the text. Please take your time to select (✓) the most appropriate response option under each item.

1. ____ and I agree about the steps to be taken to improve his/her situation.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

2. I am genuinely concerned for ____'s welfare.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

3. We are working towards mutually agreed upon goals.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

4. ____ and I both feel confident about the usefulness of our current activity in therapy.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

5. I appreciate ____ as a person.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

6. We have established a good understanding of the kind of changes that would be good for ____.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

7. ____ and I respect each other.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

8. ____ and I have a common perception of his/her goals.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

9. I respect ____ even when he/she does things that I do not approve of.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

10. We agree on what is important for ____ to work on.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

5. Working Alliance Inventory – Short Revised – Therapist version (WAI-SRT) (Hatcher & Gillaspy, 2006)

Respond to the statements below keeping in mind your recent consulting experience with:

Client no: 2 (Name only) _____ Date _____

Measurement Point (number of consultation): ____ in the past three months

Instructions: On the following page there are sentences that describe some of the different ways you might think or feel about your client. As you read the sentences mentally insert the name of client no: 2 in place of _____ in the text. Please take your time to select (✓) the most appropriate response option under each question.

1. ____ and I agree about the steps to be taken to improve his/her situation.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

2. I am genuinely concerned for ____'s welfare.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

3. We are working towards mutually agreed upon goals.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

4. ____ and I both feel confident about the usefulness of our current activity in therapy.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

5. I appreciate ____ as a person.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

6. We have established a good understanding of the kind of changes that would be good for ____.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

7. ____ and I respect each other.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

8. ____ and I have a common perception of his/her goals.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

9. I respect ____ even when he/she does things that I do not approve of.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

10. We agree on what is important for ____ to work on.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

6. Working Alliance Inventory – Short Revised – Therapist version (WAI-SRT) (Hatcher & Gillaspy, 2006)

Respond to the statements below keeping in mind your recent consulting experience with:

Client no: 3 (Name only) _____ Date _____

Measurement Point (number of consultation): ____ in the past three months

Instructions: On the following page there are sentences that describe some of the different ways you might think or feel about your client. As you read the sentences mentally insert the name of client no: 3 in place of _____ in the text. Please take your time to select (✓) the most appropriate response option under each question.

1. ____ and I agree about the steps to be taken to improve his/her situation.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

2. I am genuinely concerned for ____'s welfare.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

3. We are working towards mutually agreed upon goals.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

4. ____ and I both feel confident about the usefulness of our current activity in therapy.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

5. I appreciate ____ as a person.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

6. We have established a good understanding of the kind of changes that would be good for ____.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

7. ____ and I respect each other.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

8. ____ and I have a common perception of his/her goals.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

9. I respect ____ even when he/she does things that I do not approve of.

①	②	③	④	⑤
Seldom	Sometimes	Fairly Often	Very Often	Always

10. We agree on what is important for ____ to work on.

⑤	④	③	②	①
Always	Very Often	Fairly Often	Sometimes	Seldom

-The End-

Please double check and make sure that you have responded to every item. Thank you for participating in this study!

APPENDIX E: SUBMISSION GUIDELINES FOR THE JOURNAL OF PSYCHOLOGY IN AFRICA (JPA)

JOURNAL OF PSYCHOLOGY IN AFRICA

Instructions to authors

Editorial policy

Submission of a manuscript implies that the material has not previously been published, nor is it being considered for publication elsewhere. Submission of a manuscript will be taken to imply transfer of copyright of the material to the owners, Africa Scholarship Development Enterprise. Contributions are accepted on the understanding that the authors have the authority for publication. Material accepted for publication in this journal may not be reprinted or published without due copyright permissions. The Journal has a policy of anonymous peer review. Papers will be scrutinised and commented on by at least two independent expert referees or consulting editors as well as by an editor. The Editor reserves the right to revise the final draft of the manuscript to conform to editorial requirements.

Publishing ethics

By submitting to the *Journal of Psychology in Africa* for publication review, the author(s) agree to any originality checks during the peer review and production processes. A manuscript is accepted for publication review on the understanding that it contains nothing that is abusive, defamatory, fraudulent, illegal, libellous, or obscene. During manuscript submission, authors should declare any competing and/or relevant financial interest which might be potential sources of bias or constitute conflict of interest. The author who submits the manuscript accepts responsibility for notifying all co-authors and must provide contact information on the co-authors.

The Editor-in-Chief will collaborate with Taylor and Francis using the guidelines of the Committee on Publication Ethics [<http://publicationethics.org>] in cases of allegations of research errors; authorship complaints; multiple or concurrent (simultaneous) submission; plagiarism complaints; research results misappropriation; reviewer bias; and undisclosed conflicts of interest.

Manuscripts

Manuscripts should be written in English and conform to the publication guidelines of the latest edition of the American Psychological Association (APA) publication manual of instructions for authors.

Submission

Manuscripts should be prepared in MSWord, double spaced with wide margins and submitted via email to the Editor-in-Chief at elias.mpofu@sydney.edu.au. Before submitting a manuscript, authors should peruse and consult a recent issue of the *Journal of Psychology in Africa* for general layout and style.

Manuscript format

All pages must be numbered consecutively, including those containing the references, tables and figures. The typescript of a manuscript should be arranged as follows:

- Title: this should be brief, sufficiently informative for retrieval by automatic searching techniques and should contain important keywords (preferably <13).

- Author(s) and Address(es) of author(s): The corresponding author must be indicated. The author's respective addresses where the work was done must be indicated. An e-mail address, telephone number and fax number for the corresponding author must be provided.
- Abstract: Articles and abstracts must be in English. Submission of abstracts translated to French, Portuguese and/ or Spanish is encouraged. For data-based contributions, the abstract should be structured as follows: Objective – the primary purpose of the paper, Method – data source, participants, design, measures, data analysis, Results – key findings, implications, future directions and Conclusions – in relation to the research questions and theory development. For all other contributions (except editorials, book reviews, special announcements) the abstract must be a concise statement of the content of the paper. Abstracts must not exceed 150 words. The statement of the abstract should summarise the information presented in the paper but should not include references.
- Text: (1) Per APA guidelines, only one space should follow any punctuation; (2) Do not insert spaces at the beginning or end of paragraphs; (3) Do not use colour in text; and (4) Do not align references using spaces or tabs, use a hanging indent.
- Tables and figures: These should contain only information directly relevant to the content of the paper. Each table and figure must include a full, stand-alone caption, and each must be sequentially mentioned in the text. Collect tables and figures together at the end of the manuscript or supply as separate files. Indicate the correct placement in the text in this form <insert Table 1 here>.

Figures must conform to the journals style. Pay particular attention to line thickness, font and figure proportions, taking into account the journal's printed page size – plan around one column (82 mm) or two column width (170 mm). For digital photographs or scanned images the resolution should be at least 300 dpi for colour or greyscale artwork and a minimum of 600 dpi for black line drawings. These files can be saved (in order of preference) in PSD, PDF or JPEG format. Graphs, charts or maps can be saved in AI, PDF or EPS format. MS Office files (Word, Powerpoint, Excel) are also acceptable but DO NOT EMBED Excel graphs or Powerpoint slides in a MS Word document.

Referencing

Referencing style should follow latest edition of the APA manual of instructions for authors.

- References in text: References in running text should be quoted as follows: (Louw & Mkize, 2012), or (Louw, 2011), or Louw (2000, 2004a, 2004b). All surnames should be cited the first time the reference occurs, e.g., Louw, Mkize, and Naidoo (2009) or (Louw, Mkize, & Naidoo, 2010). Subsequent citations should use et al., e.g. Louw et al. (2004) or (Louw et al., 2004). 'Unpublished observations' and 'personal communications' may be cited in the text, but not in the reference list. Manuscripts submitted but not yet published can be included as references followed by 'in press'.
- Reference list: Full references should be given at the end of the article in alphabetical order, using double spacing. References to journals should include the author's surnames and initials, the full title of the paper, the full name of the journal, the year of publication, the volume number, and inclusive page numbers. Titles of journals must not be abbreviated. References to books should include the authors' surnames and initials, the year of publication, full title of the book, the place of publication, and the publisher's name. References should be cited as per the examples below:

Reference samples

Journal article

Peltzer, K. (2001). Factors at follow-up associated with adherence with adherence with directly observed therapy (DOT) for tuberculosis patients in South Africa. *Journal of Psychology in Africa*, 11, 165–185.

Book

Gore, A. (2006). *An inconvenient truth: The planetary emergency of global warming and what we can do about it*. Emmaus, PA: Rodale.

Edited book

Galley, K. E. (Ed.). (2004). *Global climate change and wildlife in North America*. Bethesda, MD: Wildlife Society.

Chapter in a book

Cook, D. A., & Wiley, C. Y. (2000). Psychotherapy with members of the African American churches and spiritual traditions. In P. S. Richards

& A. E. Bergin (Ed.), *Handbook of psychotherapy and religiosity diversity* (pp 369–396). Washington, DC: American Psychological Association.

Magazine article

Begley, S., & Murr, A. (2007, July 2). Which of these is not causing global warming? A. Sport utility vehicles; B. Rice fields; C. Increased solar output. *Newsweek*, 150 (2), 48–50.

Newspaper article (unsigned)

College officials agree to cut greenhouse gases. (2007, June 13). *Albany Times Union*, p. A4.

Newspaper article (signed)

Landler, M. (2007, June 2). Bush's Greenhouse Gas Plan Throws Europe Off Guard. *New York Times*, p. A7.

Unpublished thesis

Appoh, L. (1995). The effects of parental attitudes, beliefs and values on the nutritional status of their children in two communities in Ghana (Unpublished master's thesis). University of Trondheim, Norway.

Conference paper

Sternberg, R. J. (2001, June). Cultural approaches to intellectual and social competencies. Paper presented at the Annual Convention of the American Psychological Society, Toronto, Canada.

Lead authors will receive a complimentary issue of the journal issue in which their article appears. The Journal does not place restriction on manuscript length but attention is drawn to the fact that a levy is charged towards publication costs which is revised from time to time to match costs of manuscript development production. Instructions for remitting the publication levy are provided to lead or corresponding authors by the Editorial Assistant of the journal.

**APPENDIX F: SUBMISSION GUIDELINES FOR THE AFRICAN
JOURNAL FOR PHYSICAL ACTIVITY AND HEALTH SCIENCES
(AJPHEs)**

GUIDELINES FOR AUTHORS

AIM

The African Journal for Physical Activity and Health Sciences (AJPHEs) is a peer-reviewed journal established to:

- i) provide a forum for health specialists, researchers in physical activity, professionals in human movement studies as well as other sport-related professionals in Africa, the opportunity to report their research findings based on African settings and experiences, and also to exchange ideas among themselves. Research-related contributions by specialists in physical activity and health sciences from other continents are also welcome.
- ii) afford the professionals and other interested individuals in these disciplines the opportunity to learn more about the practice of the disciplines in different parts of the continent.
- iii) create an awareness in the rest of the world about the professional practice in the disciplines in Africa.

GENERAL POLICY

AJPHEs publishes research papers that contribute to knowledge and practice, and also develops theory either as new information, reviews, confirmation of previous findings, application of new teaching/coaching techniques and research notes. Letters to the editor relating to the materials previously published in AJPHEs could be submitted within 3 months after publication of the article in question. Such letter will be referred to the corresponding author and both the letter and response will be published concurrently in a subsequent issue of the journal.

Manuscripts are considered for publication in AJPHEs based on the understanding that they have not been published or submitted for publication in any other journal. In submitting papers for publication, corresponding authors should make such declarations. Where part of a paper has been published or presented at congresses, seminars or symposia, reference to that publication should be made in the acknowledgement section of the manuscript.

AJPHEs is published quarterly, i.e. in March, June, September and December. Supplements/Special editions are also published periodically.

SUBMISSION OF MANUSCRIPT

Original manuscript and all correspondence should be addressed to the Editor-In-Chief:

Professor L. O. Amusa
Centre for Biokinetics, Recreation
and Sport Science, University of Venda,
P. Bag X5050, Thohoyandou 0950 Republic
of South Africa

Tel: +27 15 9628076/+27729883817
Fax: +27 15 9628861
E-mail: amusalbw@yahoo.com

Articles should be submitted electronically, i.e. via e-mail attachment. However, the corresponding author should ensure that such articles are virus free. AJPHEs reviewing process normally takes 4-6 weeks and authors will be advised about the decision on submitted manuscripts within 60 days.

In order to ensure anonymity during the reviewing process authors are requested to avoid self- referencing or keep it to the barest minimum.

PREPARATION OF MANUSCRIPT

Manuscripts should be type written in fluent English (using 12-point Times New Roman font and 1½ line-spacing) on one side of white A4-sized paper justified fully with 3cm margin on all sides. In preparing manuscripts, MS-Word, Office 2007 for Windows should be used. Length of manuscripts should not normally exceed 12 printed pages (including tables, figures, references, etc.). For articles exceeding 12 typed pages US\$ 10.0 is charged per every extra page. Authors will be requested to pay a publication fee to defray the very high cost of publication. The pages of manuscripts must be numbered sequentially beginning with the title page. The presentation format

should be consistent with the guidelines in the publication format of the American Psychological Association (APA) (6th edition).

Title page

The title page of the manuscript should contain the following information:

Concise and informative title.

Author(s') name(s) with first and middle initials. Authors' highest qualifications and main area of research specialisation should be provided.

Author(s') institutional addresses, including telephone and fax numbers.

Corresponding author's contact details, including e-mail address.

A short running title of not more than 6 words.

Abstract

An abstract of 200-250 words is required with up to a maximum of 5 keywords provided below the abstract. Abstract must be typed on a separate page using single line spacing, with the purpose of the study, methods, major results and conclusions concisely presented. Abbreviations should either be defined or excluded.

Text

Text should carry the following designated headings also using single line spacing: Introduction, materials and methods, results, discussion, acknowledgement, references and appendices (if appropriate).

Introduction

The introduction should start on a new page and in addition to comprehensively giving the background of the study it should clearly state the problem and purpose of the study. Authors should cite relevant references to support the basis of the study. A concise but informative and critical literature review is required.

Methodology

This section should provide sufficient and relevant information regarding study participants, ethics/informed consent, instrumentation, research design, validity and reliability estimates, data collection procedures, statistical methods and data analysis techniques used. Qualitative research techniques are also acceptable.

Results

Findings should be presented precisely and clearly. Tables and figures must be presented separately or at the end of the manuscript and their appropriate locations in the text indicated. The results section should not contain materials that are appropriate for presentation under the discussion section. Formulas, units and quantities should be expressed in the *systeme internationale (SI)* units. Colour printing of figures and tables is expensive and could be done upon request at authors' expense.

Discussion

The discussion section should reflect only important aspects of the study and its major conclusions. Information presented in the results section should not be repeated under the discussion. Relevant references should be cited in order to justify the findings of the study. Overall, the discussion should be critical and tactfully written.

References

The American Psychological Association (APA) format should be used for referencing. Only references cited in the text should be alphabetically listed in the reference section at the end of the article. References should not be numbered either in the text or in the reference list.

Authors are advised to consider the following examples in referencing:

Examples of citations in body of the text:-

For one or two authors; Kruger (2003) and Travill and Lloyd (1998). These references should be cited as follows when indicated at the end of a statement: (Kruger, 2003); (Travill & Lloyd, 1998).

For three or more authors cited for the first time in the text; Monyeki, Brits, Mantsena and Toriola (2002) or when cited at the end of a statement as in the preceding example; (Monyeki, Brits, Mantsena & Toriola, 2002). For subsequent citations of the same reference it suffices to cite this particular reference as: Monyeki et al. (2002). Multiple references when cited in the body of the text should be listed chronologically in ascending order, i.e. starting with the oldest reference. These should be separated with semi colons. For example, (Tom, 1982; McDaniels & Jooste, 1990; van Heerden, 2001; de Ridder et al., 2003).

References

In compiling the reference list at the end of the text the following examples for journal references, chapter from a book, book publication and electronic citations should be considered:

Examples of journal references:

Journal references should include the surname and initials of the author(s), year of publication, title of paper, name of the journal in which the paper has been published, volume and number of journal issue and page numbers.

For one author: McDonald, A.K. (1999). Youth sports in Africa: A review of programmes in selected countries. *International Journal of Youth Sports*, 1(4), 102-117.

For two authors: Johnson, A.G. & O'Kefee, L.M. (2003). Analysis of performance factors in provincial table tennis players. *Journal of Sport Performance*, 2(3), 12-31.

For multiple authors: Kemper, G.A., McPherson, A.B., Toledo, I. & Abdullah, I.I. (1996). Kinematic analysis of forehand smash in badminton. *Science of Racket Sports*, 24(2), 99-112.

Examples of book references:

Book references should specify the surname and initials of the author(s), year of publication of the book, title, edition, page numbers written in brackets, city where book was published and name of publishers. Chapter references should include the name(s) of the editor(s) and other specific information provided in the third example below:

For authored references: Amusa, L.O. & Toriola, A.L. (2003). *Foundations of Sport Science* (2nd ed.) (pp. 39-45). Makhado, South Africa: Leach Printers.

For edited references: Amusa, L.O. & Toriola, A.L. (Eds.) (2003). *Contemporary Issues in Physical Education and Sports* (2nd ed.) (pp. 20-24). Makhado, South Africa: Leach Printers.

For chapter references in a book: Adams, L.L. & Neveling, I.A. (2004). Body fat characteristics of sumo wrestlers. In J.K. Manny & F.O. Boyd (Eds.), *Advances in Kinanthropometry* (pp. 21-29). Johannesburg, South Africa: The Publishers Company Ltd.

Example of electronic references:

Electronic sources should be easily accessible. Details of Internet website links should also be provided fully. Consider the following example:

Wilson, G.A. (1997). Does sport sponsorship have a direct effect on product sales?

The Cyber-Journal of Sport Marketing (online), October, 1(4), at <http://www.cad.gu.au/cjsm/wilson.html>. February 1997.

PROOFREADING

Manuscript accepted for publication may be returned to the author(s) for final correction and proofreading. Corrected proofs should be returned to the Editor-In-Chief electronically within one week of receipt. It will be assumed that the publication should go ahead if no response is received from the corresponding author within one week. Minor editorial corrections are handled by AJPHES.

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**APPENDIX G: PUBLICATION CONFIRMATION FROM THE JOURNAL
OF PSYCHOLOGY IN AFRICA (JPA)**



Journal of Psychology in Africa
South of the Sahara, the Caribbean and Afro-Latin America

September, 2015

TAX INVOICE # 20151444

Julius Jooste
North-West University
Physical Activity, Sport and Recreation
(PhASRec) Republic of South Africa
Potchefstroom, 2520

Dear Julius Jooste:

Congratulations on the publication acceptance of your manuscript this **08 September 2015** as follows:

Mindfulness: A foothold for Rogers's humanistic person-centred approach

Your manuscript is scheduled to publish in **Volume 25 (6)** of the JPA this **December 2015**. Your Manuscript Processing Charge is invoiced. Please pay by **September 20, 2015**

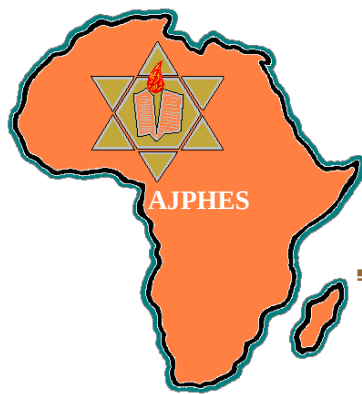
When you wire the money please make sure that your bank places your name, not just the university affiliation, on the wire transfer so that we can match the payment invoice we receive with your wire transfer. Instruct your institution/pay or to provide you with confirmation of payment to forward to me as proof of payment.

Thank you,
Professor Elias Mpofu,
PhD, DEd Editor

Editor in Chief: Professor Elias Mpofu, Faculty of Health Sciences, University of Sydney, Lidcombe, NSW 1825 AUSTRALIA

The Journal of Psychology in Africa is accredited by the International Bibliography of the Social Sciences (IBSS) and ISI. It is abstracted by Psychological Abstracts and Sociological Abstracts.

**APPENDIX H: PUBLICATION CONFIRMATION FROM THE AFRICAN
JOURNAL FOR PHYSICAL ACTIVITY AND HEALTH SCIENCES
(AJPHEs)**



AFRICAN JOURNAL FOR PHYSICAL ACTIVITY AND HEALTH SCIENCES (AJPHERD)

Centre for Biokinetics, Recreation and Sport Science,
University of Venda

5 March 2016

J. Jooste^{1,2}, A. Kruger², B.J.M. Steyn³ and D.J. Edwards⁴

C/o Mr J. Jooste

1Department of Sport, Rehabilitation and Dental Sciences, Tshwane University of Technology, Pretoria, South Africa.

2Physical Activity, Sport & Recreation (PhASRec), North-West University, Potchefstroom, South Africa.

4Department of Psychology, University of Zululand, KwaDlangezwa, South Africa. E-mail: jooste1@tut.ac.za

Dear Mr Jooste,

ESSENTIAL COMPETENCIES IN CONTEMPORARY APPLIED SPORT PSYCHOLOGY: COMPARATIVE PERSPECTIVES FROM SOUTH AFRICA AND THE UNITED KINGDOM

I am pleased to inform you that the above-cited paper submitted for publication in AJPHERD has been accepted. The article will be published in AJPHERD Vol. 23(1) March 2016.

You are kindly requested to attend to the attached invoice, which is meant to defray the very high cost of publication. You are also requested to sign the enclosed authors' agreement form and mail it to the Editor-In-Chief at the above address.

Thank you. Yours sincerely,

Sgd.

Prof. L.O. Amusa

For Editor-In-Chief, AJPHERD

**APPENDIX I: PUBLICATION CONFIRMATION FROM THE JOURNAL
OF PSYCHOLOGY IN AFRICA (JPA)**



Journal of Psychology in Africa
South of the Sahara, the Caribbean and Afro-Latin America

June 10, 2016

TAX INVOICE # 2016057

Julius Jooste
North-West University
Physical Activity, Sport and Recreation
(PhASRec) Republic of South Africa
Potchefstroom, 2520

Dear Julius Jooste:

Congratulations on the publication acceptance of your manuscript this **June 2016** as follows:

Exploratory study of mindfulness in modern-day sport psychology consulting relationships

Your manuscript is scheduled to publish in **Volume 26 (5)** of the JPA this **October 2016**. Your Manuscript Processing Charge is invoiced. Please pay by **June 25, 2016**

When you wire the money please make sure that your bank places your name, not just the university affiliation, on the wire transfer so that we can match the payment invoice we receive with your wire transfer. Instruct your institution/pay or to provide you with confirmation of payment to forward to me as proof of payment.

Thank you,
Professor Elias Mpofu,
PhD, DEd Editor

Editor in Chief: Professor Elias Mpofu, Faculty of Health Sciences, University of Sydney, Lidcombe, NSW 1825 AUSTRALIA

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**APPENDIX J: ARTICLE 3: EXPLORATORY STUDY OF MINDFULNESS
IN MODERN-DAY SPORT PSYCHOLOGY CONSULTING
RELATIONSHIPS (FULL LENGTH VERSION)**

Exploratory study of mindfulness in modern-day sport psychology consulting relationships

Julius Jooste^{1, 2}, Ankebé Kruger², Barend J. M. Steyn³ and David J. Edwards⁴

Corresponding author:

Julius Jooste

Email: jooste1@tut.ac.za;

Telephone line: +27 12382 5472;

Fax line: +27 12382 5801

Tshwane University of Technology

Department of Sport, Rehabilitation and Dental Sciences

Republic of South Africa

Pretoria

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¹Department of Sport, Rehabilitation and Dental Sciences, Tshwane University of Technology, South Africa; ²Physical Activity, Sport and Recreation (PhASRec), North West University, South Africa; ³Department of Sport and Leisure Studies, University of Pretoria, South Africa; ⁴Department of Psychology, University of Zululand, South Africa.

Submitted to the Journal of Psychology in Africa (JPA) on 28 April 2016

Abstract

This study explored sport psychology practitioners' mindfulness in relation to the quality of consulting relationships and value within contemporary practice. A total of 34 sport psychology practitioners from South Africa (n=22, females=41%) and United Kingdom (n=12, females=25%) (Private practice=68%; 15+ years' experience=44%) participated in this study. Data were gathered, using the Five Factor Mindfulness Questionnaire (FFMQ-SF), Working Alliance Inventory Short-Revised Form (WAI-SRT), and interviews. Inferential statistics (Spearman's rank order correlation) and thematic content analyses were employed to analyse the data. Higher levels of practitioners' mindfulness were associated with superior consulting relationships with positive correlations identified between observing, describing, nonreacting ability, and quality of the therapeutic bond, agreement on goals, and agreement on goals and tasks with clients respectively. Thematic analysis suggested mindfulness to facilitate accurate attending to present-moment experiences, and empathetic understanding of clients' unique needs.

Key words: applied sport psychology (ASP), consulting relationship, mindfulness, sport psychology practitioner

Introduction

‘Mindfulness’ is a concept derived from ancient Eastern Buddhist traditions (meditative practices) which in its original (Buddhist) context implies “a contextualised set of attitudes, exercises and practices that are employed to facilitate a deeper understanding of the illusion of a solid and separate self, which is believed to be a fundamental source of suffering” (Brito, 2014: 1). ‘Suffering’ (or ‘Dukka’ in the Pali language) in Buddhist context alludes to human beings’ “pervasive unsatisfactory” feeling or “disquietude” which emanates from the inherent desire to cling to both internal (i.e. pride, self-esteem, ego) and external (i.e. significant other, fame) objects or to continuously achieve and be more (Sayādaw, 1977). Mindfulness in this respect is not a solution to suffering but rather a transformative way of acknowledging it (Germer, 2004). Discovery and pragmatic integration of Eastern contemplative practices into the evolved scientific framework of Western traditions for the mitigation of distress in humans (i.e. psychology) has promoted more elaborate and functional conceptualisations of mindfulness which suggest that it is a process of non-elaborative awareness of the self in relation to one’s immediate experiences embodied by an inner sense of inquisitiveness, experiential openness, and acceptance (Bishop, Lau, Shapiro, Carlson, Anderson, Carmody, ... & Devins, 2004). In the light of this, Brown and Ryan (2003) have recognised that most individuals have the capacity to demonstrate mindfulness but that this capacity varies according to dispositional differences in individual motivation for receptive awareness and attention to present-moment experiences, as well as the extent of obstruction caused by a range of internal and external factors.

In sport psychology practice, a tendency for practitioners’ conscious awareness of present-moment experiences with clients to be plagued by various impeding factors, has been discerned. One such factor is a defence against a fragile and ultimately false self, as practitioners’ own desires or attachments such as the strife for professional identity, force them to pursue some preconceived scientific objectivity or rigid self-concept. This ‘disquietude’ within practitioners inadvertently obstructs an accurate understanding of their clients’ individual needs (Tod & Bond, 2010; Thompson & Andersen, 2012; Williams & Andersen, 2012). So often neophyte and even seasoned practitioners behave like expert advisers in that they feel that they have to ‘fix’ their clients or solve clients’ problems to prove their degree of expertise (Williams & Andersen, 2012; Arnold & Sarkar, 2015). In all probability, this approach stems not only from the ever-present idealistic ‘quick fix’ expectation of many coaches, athletes, and contracting unions alike, but also from current training models that overemphasise cognitive behavioral therapy (CBT) in the form of mental skills training (MST) approaches (which includes imagery training, relaxation, self-talk, arousal regulation etc.) in

the quest to enhance athletes'/clients' performance (Andersen, 2009; Weinberg & Gould, 2015). Also, unlike, say, conventional psychotherapy practice, ASP promotes multiple challenges in that it tends to take place in extemporised environments such as tour buses, locker rooms, playing fields or hotels (Waumsley, Hemmings, & Payne, 2010) where it nestles among other boundary-blurring role expectations (Jones, Evans, & Mullen, 2007; Williams & Andersen, 2012) and wearying conditions such as travelling with sport teams or spending long periods away from family. Incidents such as these contribute not only to ASP practitioners' experiencing increased pressure, inadequacy, or being overwhelmed (Andersen, Van Raalte, & Brewer, 2001) but also to an exaggerated reconstructed sense of self during consultation that hinders the promotion of a therapeutic presence (Andersen & Mannion, 2011). Referring to this, Giges (2012:311) stated that sport psychologists' honest assertions about their clients' behaviour are robustly influenced by their own life experiences which not only distort their perception of athlete-clients' individual needs but also hamper the formation of a therapeutic bond with clients.

In acknowledgement of the therapeutic bond, researchers have highlighted a need for sport psychologists to become more attuned to themselves and their clients to establish open and trusting consulting relationships in order to foster an environment that allows clients to determine the direction and outcome of therapy (Tod & Bond, 2010; Collins, Evans-Jones, & O'Connor, 2013). It is worth noticing that Williams and Andersen (2012:140) underscored this approach to contemporary sport psychology practice, asserting that the consulting (therapeutic) relationship between a sport psychologist and an athlete-client is essential for any positive outcome to occur – whether it be “performance enhancement or decreased depression”. There is an additional concession, namely that contemporary sport psychology practice agrees on the practitioner becoming the primary ‘consulting tool’ and the practitioner-athlete relationship the ‘main intervention’ (Tod & Anderson, 2005).

As research into effective sport psychology practice is refined, it has become apparent that applied sport psychology practitioners are expected to match the performance of the athlete or coach they are consulted by. Nevertheless, evidence remains that ASP practitioners often find themselves not being present in their encounters with clients so that their attention constantly collapses as a result of their impeding self (ego) (Andersen & Mannion, 2011, Williams & Andersen, 2012). Yet, the ‘way of being’ which is so often influenced by one’s desires, needs and personal responsibility, is acknowledged to play a vital role in accurately addressing clients’ individual needs and/or establishing a trusting consulting relationship. These arguments, together with the recent contention that insufficient time is being spent on teaching modern-day sport psychologists to be with their

athlete/clients and to incorporate behavioural techniques which include empathetic reflection, mirroring, and attentive listening (Andersen & Mannion, 2011), the following research questions are postulated: “How significant is practitioner mindfulness in effective contemporary sport psychology practice?” and “What is the relationship between practitioners’ dispositional mindfulness and their perceived consulting (working) relationship with clients?”

Despite the advances in identifying the value of mindfulness in related fields such as facilitating the role of psychotherapists (Bruce, Manber, Shapiro, & Constantino, 2010; Davis & Hayes, 2011; Greason & Welfare, 2013; Ryan, Safran, Doran, & Muran, 2012), and performance of athletes (Gardner & Moore, 2007; Bernier, Thienot, Cordon, & Fournier, 2009) and coaches (Hall, 2013) in sport, little to no empirical study has attempted to identify the actual implication of mindfulness in contemporary sport psychology practice or its relevance to the quality of the consulting relationship. Because of the effectiveness of mindfulness practices in related fields, more investigations assessing its relevance in sport psychology service delivery should be conducted for the continuous advancement of the discipline. Consequently, the aims of this research were to quantitatively assess the relationship between practitioner dispositional mindfulness and the perceived quality of the consulting relationship with clients, and to qualitatively explore the significance of mindfulness in contemporary sport psychology practice. It is posited that this study could validate the worth of mindfulness practice in the education and training of sport psychology practitioners as well as contribute to current understanding of the qualities needed in the promotion of establishing a working relationship with clients which proves to be a prerequisite for effective service delivery. Scrupulous insight into this topic could also facilitate qualified practitioners’ on-going development in professional practice.

Methods

Research design

The current study adopted a sequential, exploratory, mixed-methods research approach in which a cross-sectional survey design was combined with analyses of expert ASP practitioners’ views on mindfulness which were distilled from a preceding qualitative investigation into essential competencies in contemporary practice (Jooste, Kruger, Steyn, & Edwards, 2016).

The epistemological stance for distilling expert sport psychology practitioners’ responses pertaining to mindfulness was phenomenologically descriptive given that such participants would know first-hand about the intricate and interpersonal role mindfulness plays in the demands associated with current sport psychology practice. Hence, an explorative interpretative paradigm

was adopted to reflect participants' contextualised responses revealed through personal insight and subjective meaning (Kvale, 2008). The ontological view was that experts in the field would be most capable of providing meaningful accounts of mindfulness processes essential in modern-day practice. This qualitative enquiry was adjoined by further investigation (quantitative research) to assess the relationship between practitioners' dispositional mindfulness and the practitioners' perceptions concerning the quality of the consulting relationship with three clients by means of online questionnaires.

This research design was selected in order to centralise expert ASP practitioner views on the selected topic, which would expand on/explain the quantitative results for more nuanced findings that could essentially contribute to and strengthen the paradigmatic standpoint on the bearing of mindfulness on a more novel area such as contemporary sport psychology service delivery.

Participants

Twenty-five ASP practitioners (n=18 from SA & n=7 from UK) participated in the assessment of the relationship between practitioners' mindfulness and the perceived quality of the consulting relationship. This sample consisted of 15 males and 10 females of which 8% were qualified at Honours level, 56% at Master's level and 36% at PhD level. Eight per cent reported a study background in Sport Sciences; 56% in Psychology and 36% in both Psychology and Sport Sciences. Sixteen per cent of the respondents had consulted for less than four years, 52% had consulting experiences ranging between 5 and 20 years, and 32% reported consulting experience of 20 plus years. Sixty per cent of the respondents held professional registration with the Health Professions Council of South Africa (HPCSA) whilst 16% were registered with the British Association of Sport and Exercise Science (BASES) and Health and Care Professions Council (HCPC) in the UK respectively. Most of the participants (56%) consulted on a full-time basis in which a few (24%) were contracted by a professional team/organisation. The remainder (20%) of the respondents were academically employed and consulted on part-time or ad-hoc bases. Half (50%) of the respondents reported having engaged in mindfulness practices for six months and more, which ranged from prayer to surfing. Thirty two per cent of the respondents practised mindfulness meditation whilst another 8% reported having engaged in frequent Hatha Yoga and transcendental meditation practices.

Nine purposively selected ASP practitioners from South Africa (n=4) and United Kingdom (n=5) participated in semi-structured interviews. The sample consisted of females (n=2) and males (n=7) of Caucasian ethnicity of which seven were qualified at a PhD level and two at Masters level, with four being registered with the UK's HCPC, one with the BASES and four with the HPCSA.

Ethical procedures

Ethical approval was obtained from the Health Research Ethical Committee of North West University (NWU) before the commencement of the study (NWU-00061-14-S1). Participants who completed the online questionnaires were instructed to familiarise themselves with information pertaining to the investigation such as the aims, benefits and requirements, which was posted as an opening page on the web. Thereafter the participants were requested to click on the button reading “I agree to participate in this study”, which automatically conveyed their compliance with participating in the study and allowed them access to completing the questionnaires. Interview respondents had to provide signed informed consent at the interview site prior to the individual interviews. Both sample participants were assured that participation is voluntary. They did not have to divulge information which made them uncomfortable, and were free to withdraw from the study up to the formal publication of results.

Data collection

Quantitative data

Quantitative data were gathered by means of online questionnaires (powered by Google forms) accessible via a web link URL address which was emailed and SMS messaged to a total of 130 practitioners appearing on the South African Sports Confederation and Olympic Committee’s (SASCOC) lists of recognised sport psychology practitioners/psychologists, South African Sport Psychology email list, as well as the BASES register, and web-listed British Psychology Society (BPS) Chartered Sport and Exercise Psychologists. A test announcement was e-mailed/SMS messaged to the participants a week before the questionnaires appeared on the web, informing the participants about the importance of the study and the value of their participation. Thereafter, five weekly reminder e-mails/SMS messages were sent to those participants who had not responded after the electronic distribution of the test URL. Participants had been prompted to complete the web-based questionnaires via an internet connected smart device, personal computer or laptop which to a certain extent also required an evaluation of views experienced directly after separate consultations with three clients. The online questionnaires consisted of a Demographic Questionnaire (DQ), and two standardised measures which included the Five Facet Mindfulness Questionnaire – Short Form (FFMQ-SF) by Bohlmeijer, ten Klooster, Fledderus, Veehof, and Baer (2011), and the Working Alliance Inventory – Short Revised – Therapist version (WAI-SRT) by Hatcher and Gillaspay (2006) to assess practitioners’ dispositional mindfulness along with their personal views on the quality of the consulting relationship.

DQ - The demographic questionnaire requested the following information: gender, country of practice, highest degree acquired, years of consulting experience, primary work setting, and professional affiliation. Participants' experiences in various mindfulness practices (i.e. Tai Chi, Hatha Yoga, Mindfulness Meditation/Vipassana) were also captured by means of a 5-point Likert-type rating scale with response options ranging from 1 (*less than 6 months*) to 5 (*11 or more years*). Open spaces were provided to allow participants' to add related practices to be evaluated on the same scale.

FFMQ -SF – The Five Facet Mindfulness Questionnaire (Baer, Smith, Lykins, Button, Krietemeyer, Sauer, ... & Williams, 2008) is a widely used measure of dispositional mindfulness which integrates items from five independently developed mindfulness questionnaires by means of a factor analytic approach. The current investigation employed the short form of the original 39-item FFMQ, which consists of 24 items and has been shown to strongly correlate to the full version with scores ranging from $r=.89$ to $r=.98$ for resembling subscales (Bohlmeijer et al., 2011). Items of the FFMQ-Short Form represent five aspects related to everyday mindful experiences of which four items correspond to *observing* (e.g. "I notice the smells and aromas of things"), and five items correspond to *describing* (e.g. "I'm good at finding the words to describe my feelings"), *nonreactivity to inner experiences* (e.g. "I watch my feelings without getting carried away by them"), *acting with awareness* (e.g. "It seems I am running on automatic without much awareness of what I'm doing"), and *nonjudging* of inner experiences (e.g. "I make judgments about whether my thoughts are good or bad") respectively. Composed items from all five scales are measured on a 5-point Likert-type scale ranging from 1 (*never or very rarely true*) to 5 (*very often or always true*), with high scores reflecting higher levels of mindfulness. The questionnaire has demonstrated high internal reliabilities for all five scales with alpha coefficients ranging from .75 for non-reactivity to inner experiences to .87 for describing (Bohlmeijer et al., 2011).

WAI-SRT - The current investigation employed the short-revised form (10 items) of the original 39-item Working Alliance Inventory (WAI – Horvath & Greenberg, 1989) which has been extensively used as a measure of the therapeutic alliance between client and therapist/counsellor. There are two versions of the WAI: the client version, and the therapist's/counsellor's version which independently assesses the perceived quality of the alliance. The therapists' self-reported version was employed for this study which required participants to indicate their level of agreement with each of the items on a Likert scale ranging from 1 (*seldom*) to 5 (*always*), with high scores reflecting a strong working alliance. The items of the revised short form are constructed so that four items correspond to *quality of therapeutic bond* (e.g. "I appreciate ____ as a person") and three items to

correspond to *agreement on tasks* (e.g. “___ and I agree about the steps to be taken to improve his/her situation”), and *agreement on goals* (e.g. “We are working towards mutually agreed-upon goals”) respectively. Hatcher and Gillaspay (2006) have reported high correlating scores for the revised short form against the full version amongst two separate samples (Total WAI $r=.94$ & $.95$; Bond scales $.94$ & $.91$; Goal scales $.91$ & $.86$ and Task scales $.83$ & $.87$). Internal consistency for WAI-SRT has also been found to be high among these respective samples with total score alphas being $.91$ and $.92$ and subscale score alphas ranging between $.85$ to $.90$ (Hatcher & Gillaspay, 2006). The current investigation required ASP practitioners to complete the WAI-SRT questionnaire on three occasions (after consultation with three respective clients) in order to determine an equitable and collective viewpoint on the quality of the consulting relationship experienced with various clients.

Qualitative data

Face-to-face interviews were conducted by the primary investigator of this study which was scheduled to take place at a neutral location in accordance with each participant’s own convenience. An interview guide consisting of structured open-ended and probing questions was utilised for this initial exploration.

Analysis

Quantitative data

The collected quantitative measurements were captured on a computer and analysed by means of the IBM SPSS version 22.0. Frequency analysis was used to describe the sample and to give an indication of their individual mindfulness practices. Inferential statistics were used to determine whether there were any relationships between the concepts tested by the indexes. Spearman’s rank-order correlation was employed to determine the correlation between the total scores and the subscale scores of the two questionnaires. The Mann-Whitney U-test was used to determine whether statistically significant differences existed between practitioners who participate in mindfulness practices (for at least six months) and those who do not. Cronbach’s Alpha values were computed (Table 1) for both the standardised measures (FFMQ-SF & WAI-SRT) employed in the investigation to ensure the reliability of these measures for the particular data-set (Thomas, Nelson, & Silverman, 2011).

<Insert table 1 here....>

Qualitative data

Qualitative data were subjected to a thematic content analysis which focused on the import of mindfulness in participants' descriptions of competent sport psychology practice. The data were analysed by the first author who has adopted a realist method with the intention of examining the semantic meaning of participants' responses. Guided by the phases outlined by Braun and Clarke (2006), the process involved the following: (1) transcribing the interviews and reading through each transcript a couple of times for self-familiarisation; (2) development of codes beside points of interest on transcripts, followed by collation of data extracts that recount each code; (3) organising codes into themes; and (4) reassessing and refining themes to ensure an accurate representation of the data-set.

The following methods recommended by Shenton (2004) were employed to ensure the trustworthiness of qualitative data presented: emergent themes were accepted after 90% consensus was reached in a meeting between the first author and a co-author who each did a separate analysis of three (33.33%) of the transcripts in an attempt to ensure the confirmability of results. The aspect of credibility was addressed by means of sending all transcripts for member checking as well as presenting an audit trail of all raw-data quotes for external scrutiny. Detailed descriptions of the study phenomenon as well as the contextual nature of participants are provided in this paper to enable readers to view the transferability of results. Furthermore, detail concerning the research design and its methodological implementation is explicitly provided to address the matter of dependability. Adhering to Thomas, Nelson, and Silverman's (2011) recommendations, the authors have in addition quoted participants' responses in the results section of this investigation for readers to judge the truthfulness of the assumptions and concluding remarks.

Results

Quantitative data

The results of the Spearman rank-order correlations are presented in Tables 2 and 3. Only statistically significant correlations were reported. A moderate positive correlation ($r=0.539$, $p=0.005$) was found between the total mindfulness scores and ratings on the quality of the consulting relationships (Table 2) – thus suggesting that the higher the practitioner's mindfulness score, the better the quality of his/her consulting relationship with clients. Four statistically significant correlations were found between the subscales of the two questionnaires (Table 3). A positive correlation ($r=0.441$; $p=0.027$) between the Observing subscale of the FFMQ and Bond subscale of the WAI-SRT was noted. A positive correlation ($r=0.437$; $p=0.029$) was also identified

between the Describing subscale of the FFMQ and the Goal subscale of the WAI-SRT. The Nonreacting subscale of the FFMQ also correlated positively ($r=0.402$; $p=0.046$) with the Task score on the WAI-SRT. Finally, there was a positive correlation ($r=0.453$, $p=0.023$) between Nonreacting FFMQ scores and Goal scores on the WAI-SRT. These findings imply that sport psychology practitioners' ability to observe, describe and not react to inner experiences are closely associated with the quality of the therapeutic bond, agreement on goals, and agreement on goals and tasks with clients respectively. The results of the Mann-Whitney tests indicated that there was no statistically significant difference between the mindfulness scores of those practitioners who engaged in mindfulness practices and those who did not.

<Insert Table 2 here....>

<Insert Table 3 here....>

Qualitative data

Qualitative findings concerning the worth of mindfulness were grouped into two major themes, namely; attunement to present-moment experiences, and empathetic understanding. A single response deemed to be most inclusive of collective responses will be provided under each theme in the qualitative verification of the significance of mindfulness in contemporary sport psychology practice.

Attunement to present-moment experiences

(Subthemes: client-centred focus; awareness of the self)

Participants regarded practitioner mindfulness as a cornerstone of effective practice founded on the essential undertaking of accurately sensing each client's unique needs at a particular point in time amidst the awareness of one's own intrusive deliberations and inner 'noise' (i.e. expectations, worries, preferences, values, personal responsibilities, time schedule). The ability to become aware of one's inner experiences while accurately sensing the content and underlying meaning of clients' stories provided a feeling of presence which not only enhanced the capacity to respond to clients but also helped to gain insight into their concealed needs. These two factors reportedly pave the way toward more meaningful exchange during consultation.

Participant # 2; SA: “When I as a psychologist work with my athlete client, I am fully focused on that client, just like for example, I want my tennis player to be fully focused on the ball, because you need to be fully focused. If my mind is cluttered then I miss little things. I miss a tone of voice, I miss a facial expression, I miss what he/she says, or what he/she is not saying?”

Empathetic understanding

(Subthemes: self-liberation; compassion for client)

Furthermore, participants acknowledged how their mindful awareness of themselves during consultation also enables them to adopt a sense of self-deliverance (selflessness) which promotes an unstructured openness and acceptance towards clients’ concerns – freed from any preordained interpretations which are mostly sculpted by their own issues.

Participant # 4; UK: “So, if I am with a client I’ve really got to bracket out biases and listen to the other person ... So then, I am unimportant and/or, for example, if I am working with mainly less privileged people, oppressed people, I’ve got to be very open to show my vulnerability.”

Discussion

The positive relationship discovered between practitioners’ total mindfulness scores and mean ratings on the working alliances with clients essentially suggests that ASP practitioners who are higher in trait mindfulness could be more capable of establishing constructive consulting relationships in practice. Even though this notion needs further exploration in the domain of sport psychology, it is worth mentioning that research findings in psychotherapy literature affirm that therapists’ dispositional mindfulness fosters the development of positive relational experiences with patients (Bruce et al., 2010; Ryan et al., 2012). This particular finding among sport psychology practitioners is striking since the early formation of a strong relationship with clients is considered one of the most robust elements in treatment outcome (Sexton & Whiston, 1994; Friesen & Orlick, 2010).

Noteworthy patterns emerged when the correlations between the FFMQ-SF and the WAI-SRT subscales were examined. The positive relationship between practitioners’ ability to observe, and the quality of therapeutic bond suggest that practitioners who are able to ‘grace’ with the emergence and development of events (internal and external stimuli) during consultation are more capable of connecting with their clients. Based on the contention that increased attention and awareness to present-moment experiences permit greater enrichment and insight (Brown & Ryan,

2003), Germer, 2004), it may be conceded that observation in this instance allows practitioners to cultivate a meaningful ‘feel for’ and ‘listening to’ their clients’ issues during consultation which consequentially fosters a stronger bond as clients feel ‘felt’, understood or heard (Siegel, 2007, Ryan et al., 2012).

The association between describing and self-reported agreement on goals scale reflects that practitioners’ ability to accurately label their thoughts and experiences is helpful in devising mutually agreed objectives for therapy with clients. This could be due to a more exact portrayal of what practitioners are thinking and experiencing when confronted with clients’ issues which, in effect, fosters greater potential for dialogue and perceived understanding by clients. Practitioners’ accurate labelling of their immediate consulting experience in this respect may well be connected to a certain level of translucent honesty that is experienced by clients which in sport psychology literature has been identified by athletes as a sought-after practitioner quality needed for the development of effective consulting relationships (Sharp & Hodge, 2014).

Finally, the positive correlations between the nonreacting subscale of the FFMQ-SF with agreement on task and goal scores on the WAI-SRT suggests that practitioners’ objective indifference to (detachment from) their own thoughts or feelings during consultation contributes to the quality of the perceived relationship with clients (consensual agreement on task and goals for consultation). This association is reasonable since analyses of interviews held with expert sport psychologists (n=15) who have collectively accumulated more than 200 years consulting experience with Olympic athletes, revealed that reactivity to thoughts and feelings during consultation often result in a misidentification of athlete-clients’ true needs (Arnold & Sarkar, 2015). Consequently, these authors recommended that ASP practitioners adopt a nonreactive and attentive approach in service delivery, which allows clients a springboard towards healing since, after all, they are the ones who know best. A supposition can therefore be made that practitioners’ tolerant behaviour towards the fleeting nature of their own thoughts and experiences during consultation accommodates a better understanding of clients’ unique needs which inadvertently translates into more consensual and collaborative agreement on the tasks and goals suitable for each client.

Interview results revealed that mindfulness plays a notable role in promoting effective modern-day sport psychology practice. Emergent themes signified that mindfulness during consultation allows for a more accurate attunement to what appears to be in the foreground (i.e. clients’ individual needs) as distinct from inherent sensations and experiences (i.e. the ‘noise’ engendered by one’s own inner chatter). Another essential function of mindfulness during consultation was that practitioners were able to accept the insignificant (transient) nature of their

own distortions/self-concept and adopt a frame of reference that accommodates and bends to the clients' lived experiences. These themes strongly echo Epstein's (1995) writings on an ideal observational presence adopted by therapists ("thoughts without a thinker") in view of directing their attention, while engaging in self-exploration, toward promoting accurate awareness of present-moment experiences during consultation with clients. Moreover, the ASP practitioner's views on mindfulness resonates with Ryan et al. (2012) interpretation of an ideal therapeutic observational stance (Safran & Muran, 2000) or dyadic attunement (Siegel, 2007) which encompasses the value of a practitioner's being in tune with the experience of a client while being directly aware of his or her own thoughts and emotions. These themes most surprisingly overlap with the themes generated from beginner therapists' (n=13) journal entries on the effect mindfulness mediation had on the quality of their therapy sessions (McCollum & Gehart, 2010). More specifically, the therapists in the mentioned study felt that mindfulness promoted qualities associated with therapeutic presence (such as awareness of themselves and clients,) in addition to increased compassion and acceptance of themselves and their clients (McCollum & Gehart, 2010). Moreover, the emergent themes underscoring the merit of mindfulness in applied sport psychology are verified by arguments suggesting that an accurate awareness of the self and the client's world is needed, because a complex challenge for sport psychologists is to unravel the "muddle" of the client's story while skilfully probing the client to expand and organise the story that the client yearns to tell (Giges, 2012:312). Interesting but not unexpected, is that the point about mindfulness in sport psychology practice being akin to psychotherapy, seems to silence the voices of distraction and to enable practitioners to discern the idiosyncratic nature of their clients' needs (Ponton, 2012).

The themes generated strongly warrant correlations noted in this paper between practitioners' mindfulness levels and ratings on the Working Alliance Inventory Scales. For instance 'attunement to present-moment experiences' (*subthemes: client-centred focus; awareness of the self*) defend the correlations noted between practitioners' ability to observe and the reported quality of the relationship with clients. The same can be said for the subtheme 'self-liberation' and the correlation between nonreacting and collaborative agreements on clients' individualised tasks/goals. It can therefore be assumed that 'attunement' and 'self-liberation' suffice as a qualitative verification of practitioners' graded ability to be aware of both themselves and aspects of each client (observing), and the ability to show objective indifference to their own sensations during consultation (nonreacting).

Despite the noted value of mindfulness in promoting sport psychology service delivery and the establishment of consulting relationships with clients, several limitations were recognised in the

current investigation. Firstly, the sample utilised for the quantitative assessment was relatively small. Even though sport psychology is not yet a fully recognised profession in SA with only a handful of people actively pursuing applied practice (Whitton, 2011; SASSEP, 2015) more respondents' participation could have increased the generalisability of results. Secondly, the researchers' additional attempts to gather the views on the consulting relationship from three clients of each respective ASP practitioner who participated in the study were not permitted by the involved practitioners which, in the end, forced the researchers to rely solely on the practitioners' personal views on the quality of the consulting relationship (as was measured by the WAI-SRT). The recommendation is therefore that future investigations which set out to assess the consulting relationship in ASP should address these concerns. Notwithstanding these limitations, the current investigation is believed to provide some promising preliminary findings on the worth of mindfulness in current sport psychology practice since the qualitative themes were supported by the quantitative correlations.

Conclusion

Sport psychology practitioners, trainers, educators, supervisors and researchers now have some empirical evidence on the worth of mindfulness in current sport psychology practice. Results indicate that an increased focus on the levels of mindfulness in ASP practitioners is warranted, as it heralds the ability to deliver effective sport psychology service delivery and promotes the establishment of strong consulting relationships with clients. The consequent implications are that sport psychology training and education programmes should expand their existing scope of instructional contents to include mindfulness activities to directly (1) help practitioners acquire an accurate sense of self-awareness and present-moment attunement during consultation (therapeutic presence), and (2) hone their innate ability to establish more effective working relations with clients.

In comparison with the sentiments of McCollum and Gehart (2010), the encouragement of mindfulness practice/activities in the schooling of sport psychology practitioners could bring a whole new dimension to effective service delivery in an evolving sport environment. This in turn could also implicate novel ventures for experienced practitioners' who wish to continue self-enrichment for the purpose of improving or sustaining effective practice. Essentially, the authors of the current study do not think that the strong relation between mindfulness and working alliance should be the deciding factor based on its usefulness in ASP training and development but rather as a catalyst for future studies and for guiding authorities to acknowledge the potential of mindfulness in enhancing the processes of applying sport psychology. Nonetheless, we do feel that academically

oriented mindfulness practices/activities during training and development programmes intended to enhance practitioner 'presence' during consultation could offer sport psychology an added laboratory for embracing the challenges associated with contemporary sport psychology practice. For this inferential reason, the inclusion of mindfulness screening and practices in modern-day training, education and regulation of sport psychology practitioners is advocated.

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Table 1

Reliability Coefficients for the FFMQ-SF and WAI-SRT for ASP practitioners (n=25).

Cronbach's Alpha for the Total Sample			
FFMQ-SF		WAI-SRT	
Observing	0.56	Quality of therapeutic bond	0.77
Describing	0.72	Agreement on tasks	0.84
Nonreactivity to inner experience	0.69	Agreement on goals	0.86
Acting with awareness	0.80		
Nonjudging of inner experience	0.60		
Overall reliability	0.72	Overall reliability	0.89

Table 1 illustrates that both the measures used in this investigation had moderate to strong Cronbach's Alpha values.

Table 2

Correlations between Practitioners' Total Mindfulness Scores (FFMQ-SF) and Summated Ratings on the Consulting Relationships (WAI-SRT).

Correlations				
			FFMQ-SF Total Mean	WAI-SRT Total Mean
Spearman's rho	FFMQ-SF Total	Correlation Coefficient	1.000	.539**
		Sig. (2-tailed)		.005
		N	25	25
	WAI-SRT Total Mean	Correlation Coefficient	.539**	1.000
		Sig. (2-tailed)	.005	
		N	25	25

*. Correlation is significant at the 0.05 level (2-tailed).
 **. Correlation is significant at the 0.01 level (2-tailed).

Table 3*Correlations between the Subscales of the FFMQ-SF and the WAI-SRT*

Correlations			WAI-SRT Task Ave	WAI-SRT Goal Ave	WAI-SRT Bond Ave
Spearman's rho	FFMQ-SF Observing	Correlation	.372	.369	.441*
		Coefficient			
		Sig. (2-tailed)	.067	.069	.027
	FFMQ-SF Describing	N	25	25	25
		Correlation	.373	.437*	.338
		Coefficient			
	FFMQ-SF Nonreacting	Sig. (2-tailed)	.067	.029	.099
		N	25	25	25
		Correlation	.402*	.453*	.375
	FFMQ-SF Awareness	Coefficient			
		Sig. (2-tailed)	.046	.023	.065
		N	25	25	25
	FFMQ-SF Nonjudging	Correlation	.382	.297	.092
		Coefficient			
		Sig. (2-tailed)	.060	.149	.662
		N	25	25	25
		Correlation	-.201	-.137	-.027
		Coefficient			
		Sig. (2-tailed)	.336	.515	.898
		N	25	25	25

*. Correlation is significant at the 0.05 level (2-tailed).

**. Correlation is significant at the 0.01 level (2-tailed).