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Learning Experiences Contributing to Service-Delivery Competence in Applied Psychologists: Lessons for Sport Psychologists

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Abstract

12 The purpose of the present study was to compare learning experiences perceived to contribute to service-delivery competence in sport, clinical, and counseling psychologists. Twenty 13 psychologists (11 female, 9 male, 28-70 years of age) participated in semistructured interviews. 14 15 All participants emphasized the role of client interactions in learning service-delivery processes. In addition, clinical and counseling participants reported personal therapy and 16 supervision as influential experiences. Applied implications for training include: (a) regional 17 supervision networks comprising peers and elders, (b) university-based sport psychology 18 clinics, and (c) personal and professional development groups. 19

- 20 Keywords: professional development, applied psychology, training
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Psychologists: Lessons for Sport Psychologists

Learning Experiences Contributing to Service-Delivery Competence in Applied

In many places around the world, the professional status of sport and exercise 27 28 psychology has advanced to the point that national licensing and registration schemes have arisen through legislation. For example, in the UK the Health and Care Professions Council 29 (HCPC) has been responsible for the regulation of practitioner psychologists (including sport, 30 clinical, and counseling) since 2009. With these changes, it may be timely to compare the 31 learning experiences of sport psychologists alongside those practitioner psychologists with 32 whom they are regulated (e.g., clinical and counseling). Such examination may optimise 33 education and training for sport psychologists and yield benefits for clients, practitioners, and 34 the discipline's reputation (Corlett, 1996). Others have also suggested the benefits of 35 36 learning from the parent discipline of psychology through the cross-fertilisation of ideas, research, and teaching (Moran, 2014). There is evidence of this process already in existence, 37 whereby sport psychology scholars have drawn on theories from clinical and counseling 38 39 psychology to guide practice (e.g., Martindale & Collins, 2005).

Sport psychology can also gain from the broader professional development literature 40 in psychology to inform sport psychologist training and development. For example, counselor 41 development theory illustrates how people mature as practitioners and identifies phases and 42 themes that characterise development. Parallels have already been found between counselor 43 44 development theory and sport psychologist development. For example, Tod, Andersen, and Marchant (2009) found that like counseling psychologists, trainee sport psychologists focus 45 on applying interventions in rigid ways with clients, and prefer to learn by imitating mentors. 46 With experience, neophytes feel more competent and less anxious, and become adept at 47 following clients' needs by applying knowledge. To date, however, researchers have not 48 included sport, clinical, and counseling psychologists in the same study. Doing so may 49

provide further evidence of parallels in the development of these types of practitioners, and
allow researchers to advance knowledge about sport psychologist development.

Applied careers in sport psychology are a relatively new phenomenon in most 52 53 countries, including the UK where the present study is situated. To advertise one's self as a psychologist in the UK individuals must be registered, however, training routes to becoming 54 registered differ for clinical, counseling, and sport psychology. Clinical and counseling 55 trainees undertake a three year university professional doctorate; whereas sport trainees 56 complete a professional training qualification typically taking three years post-masters (BPS, 57 2014). During their training, clinical psychologists work with a wide range of different client 58 groups (e.g., adults and children with mental or physical health problems, people with 59 learning disabilities) using different approaches (e.g., cognitive- behavioral, systemic). 60 Counseling psychologists use similar models (e.g., both are trained in psychotherapy) and 61 often work in similar settings to clinical psychologists. Counseling psychologists tend to 62 create a collaborative relationship with clients that focuses on exploring underlying issues to 63 64 empower change, rather than the more directive psychopathlogy model utilized by clinical psychologists (Mayne, Norcross, & Sayette, 2000). 65

There is a substantial body of research examining counselor and clinical psychologist 66 training (Stoltenberg & McNeil, 2010). Previous research has highlighted the similarities in 67 the daily activities of clinical and counseling psychologists (Mayne, Norcross, & Sayette, 68 2000) and similar generic professional competences (e.g., the ability to form client 69 relationships, to keep accurate records, confidentially) are required to practice (Jones, 2011). 70 Sport psychologists can be considered helping professionals engaged in the process 71 of psychological service-delivery similar to clinical and counseling psychologists. Many have 72 advocated that sport psychology learn about professional development from clinical and 73 counseling psychology as there are similarities in these roles (Pack, Hemmings, Arvinen-74

75 Barrow, 2014; Tod & Lavallee, 2011). Sport psychologists' work involves listening and talking to clients, forming relationships with them, and exercising specialised training, skills, 76 and knowledge with clients. The purpose of training for the helping professions is to enable 77 78 practitioners to develop service-delivery competence (SDC). SDC can be summarised as the application of suitable psychological theory, through the use of appropriate skills and 79 interventions, in a therapeutic relationship to meet a client's needs and expectations, with 80 routine reflection by the practitioner on how they have influenced the process of service 81 provision (Tod et al., 2009). Cropley, Hanton, Miles, and Niven (2010) proposed that Tod et 82 al.'s definition may improve understanding of the determinants of effective practice and 83 encourage practitioners to think about the competences required to be effective. The 84 processes described in the definition above identify what the practitioner is trying to do to be 85 86 effective. Comparing the experiences that contribute to SDC across sport, clinical, and counseling psychology may inform theoretical understanding regarding sport psychologist 87 training, clarify the training processes that influence effectiveness, and yield applications for 88 89 educators and supervisors. Such data might strengthen the justification for using clinical and counseling psychologist development theory to inform sport psychologist training. 90

Researchers have examined the learning experiences deemed important to graduates 91 and staff of sport psychology master's and doctoral training programs in Australia (Tod, 92 Marchant, & Andersen, 2007). In Tod et al.'s (2007) study, participants discussed the 93 94 significance of interpersonal interactions among classmates and teaching staff and the influence of specific events outside of training. These findings echo an earlier study on 95 student counselor development (Furr & Carroll, 2003) providing some evidence that 96 counseling literature is relevant to sport psychology development. Other common themes 97 across the disciplines include the importance of learning directly from those who are 98 qualified practitioners (Fifer, Henschen, Gould, & Ravizza, 2008), and the value of self-99

100 reflection at all stages of development (Cropley et al., 2010). Despite these findings, there is scope for knowledge on sport psychologist development to be advanced. One such way is 101 through interviewing working practitioners from the three disciplines. Much of the literature 102 103 across the disciplines is focused on trainees or seasoned practitioners (Simons & Andersen, 1995) and typically does not include the years in between. The working years between 104 qualification and retirement are when professional functioning may be undergoing the most 105 change and practitioners are actively reflecting on their training experiences (Skovholt & 106 Rønnestad, 1992). For example, there is movement from received knowledge towards 107 personally constructed knowledge; unauthentic elements of the self may be disregarded 108 because one seeks congruence between personal beliefs and practice behavior, and there is an 109 increased use of experience-based generalisations to guide practice (Skovholt & Rønnestad, 110 111 1992).

In summary, including sport, clinical, and counseling psychologists in the same study 112 may help advance knowledge and practice about the learning experiences that contribute to 113 SDC, because these practitioners approach service-delivery in similar ways and draw on 114 similar types of approaches to guide service-delivery, such as cognitive-behavioral theory 115 (CBT). Furthermore, such inclusion might support current UK training and development 116 practices in sport psychology or help reconfigure some aspects of training to assist trainees' 117 learning. Undertaking qualitative study might also provide data that yields insights relevant 118 119 beyond the UK context. The purpose of this study, therefore, was to compare learning experiences perceived to contribute to SDC from participants in the sport, clinical, and 120 counseling psychology fields. 121

122

Method

123 **Participants**

Participants in this study were 11 female and nine male UK trained psychologists 124 (sport and exercise, n = 10, clinical, n = 5; and counseling, n = 5) between 28 and 70 years of 125 age who were currently practising and registered with the UK HCPC. Initially 14 participants 126 were purposively identified through the first author's professional network using the 127 following inclusion criteria. Participants: (a) received their training in the UK; (b) were 128 currently practising; and, (c) were HCPC registered. These criteria helped ensure that 129 although participants had been trained according to different models, they had developed a 130 similar skillset deemed necessary by the same registering body. Snowball sampling was also 131 utilised by asking participants postinterview if anyone in their professional network met the 132 inclusion criteria and would be willing to be interviewed. The initial participants provided the 133 contact details of a further four participants who then provided the details of the remaining 134 two participants. Practitioners' work experience ranged from 3-24 years posteducation, where 135 five worked in private-practice settings (three part-time; two full-time) and 15 in a public-136 practice setting (eight part-time; seven full-time). Collectively, they had consulted in various 137 settings with athletes (elite and amateur), children and adolescent mental health service users, 138 and individuals with physical health concerns (e.g., type 2 diabetes mellitus, awaiting organ 139 transplantation). 140

141 **Procedures**

After obtaining institutional ethics approval, the first author contacted participants individually by email and outlined the study's purpose, risks, and safeguards and invited them to participate. Tracy's (2010) criterion of rich rigor was used as a guiding principle for selecting an adequate number of participants. This criterion required adequate diligence to gather enough data to answer the research question; in the case of the current study, interviewing 20 psychologists was deemed enough to demonstrate that rigor. Including additional participants may have risked compromising the depth of understanding that arises

149 from including more participants than necessary to answer qualitative research questions (Kvale & Brinkmann, 2009). The setting for the interview was chosen by the participant 150 where six interviews were undertaken face-to-face and 14 were conducted by telephone due 151 to geographical access to the participants. Before participating, individuals provided informed 152 consent to be interviewed and have the interview recorded. The semistructured interview 153 guide described below was used flexibly to allow interviews to feel conversational; the 154 interviewer was receptive to participant responses and adjusted question wording and order 155 accordingly. Interviews ranged in length from 37 to 90 min with an average duration of 52 156 157 min.

158 Interview Guide

The semistructured interview guide was developed from the professional development 159 literature (e.g., Skovholt & Rønnestad, 1992). The interview guide began with general 160 questions to collect information about the participants' education, consultancy history, and 161 current working role. The guide then contained questions related to participants' views on 162 learning experiences perceived to contribute to SDC. These topics included: processes that 163 develop psychologists' skills, influences on the development of SDC, learning experiences, 164 developmental tasks, and obstacles. For example, participants were asked: "Who are or have 165 been your significant influences as an applied psychologist, and how do they influence your 166 service-delivery?" The first author piloted the interview guide with an academic, and a 167 168 practising applied psychologist, and an additional question was added after the pilot study to ask first what the participant understood SDC to mean. The interview guide is available from 169 the first author on request. 170

171 Data Analysis and Presentation

The data were analysed according to Patton's (2002) guidelines including datapreparation, description, and interpretation. In data preparation, the first author transcribed

174 the interviews verbatim and then repeatedly read the transcripts whilst listening to the digital recordings of the interviews. During data description, the content of the transcripts were 175 thematically analysed to identify patterns and themes. This process was conducted after each 176 interview to allow the initial formation of the classification system. First, participants' 177 responses were placed into broad themes, each with a label reflecting the content. Seven 178 themes were developed reflecting the transcript content. Subsequent analysis involved 179 assigning and reassigning individual text units to subthemes within the broader themes. 180 Themes were revised and renamed and data was reassigned, where appropriate, to new 181 182 themes and subthemes throughout data description to ensure the research question was answered. For example, data regarding peer interactions was initially placed under a theme 183 termed formal service-delivery experiences to denote experiences that occurred in the class 184 185 room. Formal experiences did not emerge from the data on sport psychologists so the word formal was removed to represent a generic theme encompassing all data. Peer interactions 186 was initially placed under the service delivery experiences theme however participants 187 discussed this experience in relation to reflecting with peers so this subtheme was moved 188 under *reflective learning* to present a more coherent presentation of results. Throughout data 189 interpretation, the classification system was reviewed in reference to established theory and 190 as part of the audience review process (described below) to identify the relationship between 191 findings in the current study and previous work. In keeping with Krane, Andersen, and Strean 192 193 (1997), data analysis involved both deductive and inductive procedures.

194 **Research Credibility**

Triangulation was employed in the study design to enrich and improve the
understanding of the findings (Patton, 2002). Specifically data source triangulation involved
collecting information from multiple informants and from various contexts (e.g., public
versus private practice settings). Analyst triangulation was undertaken through two sport

199 psychology educators and practitioners reviewing earlier drafts of the manuscript and transcripts to query interpretations and offer possible alternative accounts that may have not 200 been considered (Patton, 2002). Based on analyst feedback, further commentary was added to 201 202 explain contextual differences. Member checking allowed confirmation of each individual's account by means of participants reviewing their own transcript, a draft of the findings, and 203 interpretations. Nine participants responded confirming the accuracy of their transcripts and 204 all nine stated that the findings resonated with their experiences. Of those who responded, no 205 participants disagreed with the interpretations, and five provided additional data to elaborate 206 207 on their earlier interviews. Finally, two trainee sport psychologists, and two educators were invited to review the findings (audience review). Through the process of audience review, 208 209 trainees reported that they would find the research more useful if there was further 210 explanation of what they could do as a result of learning what other types of psychologist do. Similarly, an educator reported that to ensure sport psychologists do not appear as the 'poor 211 cousins' of the profession, a rationale for the current status of sport psychology training 212 would add context to the findings. 213

214

Results and Discussion

To represent that description and interpretation of data occur simultaneously, the 215 results and discussion sections have been integrated. In examining the variations in 216 psychologist SDC learning experiences, three themes emerged, along with five subthemes. 217 218 The themes are discussed with supporting participant quotations with the aim of providing insight into psychologists' learning experiences. It is recognised that the findings among the 219 subgroups of psychologists are not generalizable statistically to all psychologists. The 220 purpose of the study, however, was not to generalise back to a population, but to identify 221 themes that inform theoretical advancement (e.g., identify aspects contributing to 222 development within and across the three disciplines). 223

224 Service-Delivery Experiences

Participants emphasized experiential learning in SDC development as illustrated by 225 the following participant quote: "...being out in the world, doing client work in a range of 226 different places, there is just no other way of learning other than to do it ultimately." All 227 participants emphasized that their learning about service-delivery primarily came from client 228 interactions. Clinical and counseling psychologists highlighted role-plays and structured 229 placements associated with their postgraduate training as significant learning experiences. 230 The finding that participants learned through interactions with clients, peers, and supervisors, 231 accords with previous research and theory (Tod et al., 2007). People who pursue careers in 232 the helping professions typically prefer working with others to practice their skills and 233 generate and exchange new ideas (Kolb, Boyatzis, & Mainemelis, 2001). 234

235 **Role play.** Although not pleasant at the time, role-plays provided transformative learning, as a clinical participant recalled: "the teaching that I remember as most helpful was 236 the most practical, like role-plays, although hellish...you'd sit there hoping not to be chosen, 237 238 although looking back I think that helped clarify what we were being taught." Role-plays were also viewed as useful learning experiences by clinical and counseling psychologists due 239 to the cognitive engagement in the activity. For example, a participant described: 240 You bring a client that you are a bit stuck with and you role-play the client and 241 somebody plays you and it helps you see things from the client's point of view in a 242 way that you hadn't appreciated before and you take on-board their personality. 243 Interactive activities such as role-play provide support for trainees to learn how to 244 deliver service to a client (Skovholt & Rønnestad, 1992) and have previously been found to 245 engage learners due to their emotional influence (Furr & Carroll, 2003). Clinical and 246 counseling participants described gaining knowledge of the 'helping' process by roleplaying 247

and were supported in making meaning of the experience through class, actor, and supervisor

feedback; it is these interactions and reflections that provide a means of linking concreteexperience and abstract learning (Fifer et al., 2008).

Previous research on sport psychologist training found that some Australian trainees 251 used role plays to refine their service-delivery skills (Tod et al., 2007). Similar to the clinical 252 and counseling participants in this study, participants in Tod et al.'s (2007) research were 253 trained in a postgraduate program where structured learning opportunities such as role plays 254 were provided. The current research extends previous findings by suggesting that sport 255 psychologists trained outside of a structured program may benefit less from practice 256 experiences because there are fewer opportunities to engage in such methods. If opportunities 257 for deliberate articulation of learning are missing then knowledge may remain abstract at a 258 non-conscious level. Sport psychologists in the present study confirmed that they had used 259 260 role play minimally, if at all, during training because they were not in regular contact with other trainees, or supervised in groups where role plays were usually practiced. 261

Work-based learning. Contextual differences emerged concerning the structure of 262 supervised service-delivery experiences. For example, clinical and counseling psychologists 263 experienced various work-based learning placements built into their training. In contrast, 264 trainee sport psychologists typically had to create their own supervised experience 265 opportunities and reported that "athletes are hard to come by." Similarly, Eubank and Hudson 266 (2013) described attaining enough hours with clients as the main challenge trainees faced and 267 268 trainees may rely on their supervisor to provide clients. This expectancy was highlighted by a sport psychology participant: "supervisors may not have enough athletes and access to 269 athletes to support the people they are supervising." 270

Currently, UK sport psychology trainees complete a masters' degree primarily
focused on theory, after which they must create their own placement opportunities or rely on
the goodwill and contacts of sympathetic supervisors. In contrast, clinical and counseling

274 psychologists received their supervised experience as part of their doctoral programs and had access to both internal (university) and external (placement) supervision. Sport psychology 275 participants typically had just one supervisor and were exposed to one approach (typically 276 CBT-based). As one implication of a lack of structured programs, sport participants' 277 development may have been limited by a lack of long-term access to clients. For instance, 278 short-term opportunities may encourage a directive approach such as mental skills training, 279 whereas a trainee may develop more long-term collaborative approaches (e.g., person-280 centred) to their practice if sustained access to a client-base were available. The current 281 training model in sport psychology may not allow trainees to learn the relationship building 282 skills needed to provide athlete-centred services (Tod & Lavallee, 2011). Also, being exposed 283 to just one approach may limit SDC; if practice and supervision are embedded in just one 284 model, then professional growth and effectiveness with clients may be limited by the 285 reinforcement of the same model (Andersen, 2012). 286

Differences may exist because sport psychology is a new discipline relative to clinical 287 and counseling psychology, and sport training pathways are still developing in the UK and 288 elsewhere. Additionally, where training programs are government funded and linked to career 289 paths, such as clinical psychology is in the UK, there may be ready made accessible 290 opportunities for placement. For example, clinical trainees typically cover three 291 psychological approaches, with a six month placement in each, and access weekly 292 293 supervision. This ensures trainees are familiar with a wide range of psychological models, interventions, and client groups, and they are ready for work in the National Health Service 294 (NHS). 295

The discrepancy regarding ease of access to clients and placement opportunities is not unique to the UK, and has been reported elsewhere (e.g., Tod, Marchant, & Andersen, 2007). A recurring theme in sport psychology literature has also been the low number of placement hours compared with other psychology disciplines (e.g., Van Raalte & Andersen, 2000). A
low number of hours is both a quantitative and qualitative issue: in such situations, trainees
may receive limited training opportunities to work with the breadth of clients needed to
survive in the profession. The increase in hours is not the sole answer, however, as also
indicated in the current results; it is also how those hours are spent with a range of clients,
peers, and supervisors engaging in meaningful discussions and reflections.

For example, a participant described the catalytic effect of work-based learning. One 305 clinical psychologist stated: "the primary one [experience] from which all others flow is to 306 gain and be exposed to a wide variety of individuals with a wide variety of presenting 307 problems in order to build up high levels of competence and confidence clinically." The 308 309 focus here is on the quality of the experience but also that the experience has to be used to 310 grow. This study confirmed previous research (e.g., Owton, Bond and Tod, 2014) on emphasising reflection on practical experiences as a tool for professional growth. A sport 311 psychologist demonstrated how his professional experience was made richer: "the most 312 important process is being able to talk through your decision-making... the complexities and 313 idiosyncrasies of each case and have that discussion with your supervisor...to understand the 314 'why' not just the 'what' and the 'how'." Experiential learning, such as in the example, 315 encourages the practitioner to examine professional decision making where movement is 316 encouraged away from tacit knowledge based upon trial and error and towards skilful 317 reflection that purposefully examines thinking and actions (Martindale & Collins, 2005). By 318 examining professional judgement and decision making a trainee can also be supported in 319 critically reflecting on their theoretical paradigm concerning behavior change and subsequent 320 actions based on these beliefs (Collins, Evans-Jones, O'Connor, 2013). For example, a 321 clinical psychologist described how reflection on her worldview helped her decide which 322 theoretical aspects to keep and which to discard: "I've always been quite a political person... 323

324 I've always had an awareness of social inequalities and I think that's a big influence on how I practice... I mean my orientation is social-constructionist." Similarly, Owton et al. (2014) 325 found that reflecting on applied experiences raised trainee's awareness of their ambivalence 326 327 between the way they worked with clients and the trainee's personal suitability to the approach. Part of the process of developing personal and professional congruence is "having 328 a sensible model to work from that is suited to their [trainees'] personality" as stated by one 329 sport psychology participant. This sport psychologist alluded to finding authenticity as a 330 practitioner by working with clients in ways that are underpinned by their personal beliefs 331 332 and values – a process which supervisors can support their trainees in (Collins et al., 2013). The learning experiences described above demonstrate that all participants identified 333 interactions with clients as the primary teachers for understanding the service-delivery 334 335 elements of relationship skills, understanding clients through a psychological model, and

enough. Professional experience is used as a guide to competence by the presence of a
deliberate practice feedback system: interacting with a client and then engaging in active
reflection, supervision and peer group supervision as explained by the following theme
(Ericsson, Krampe, & Tesch-Römer, 1993; Rønnestad & Skovholt, 2013).

applying psychological interventions to a client's needs. Experience alone however, is not

341 **Reflective Learning**

336

Practice-reflection-practice helped participants to internalize the information they found relevant from theory, research and practice (Knowles, Gilbourne & Niven, 2011). Participants reported that learning from practice was assisted by reflective interactions with peers, supervisors, and personal therapists. All participants reflected both publicly (with others) and privately. Sport psychologists reported individual reflection during supervisory meetings, interactions with sport scientists, and personal self-reflection (e.g., thinking about client interactions, writing journals), whereas clinical and counseling psychologists also

learned through peer interaction. Clinical and counseling participants described how regular
peer interactions during role plays and group supervision facilitated reflective learning. A
counseling psychologist stated: "sometimes a bit of competition with classmates, so
somebody's better, so it's perhaps when you thought 'oh that person has designed a very
clever intervention...or a beautiful formulation'... and you just want to improve."

Clinical and counseling psychologists described multiple opportunities built into their 354 programs that encouraged reflective learning. Previous research has found that sport 355 psychology training programs include reflective practice as something to 'be done' as part of 356 the training requirements with trainees leading and facilitating this process (Cropley et al., 357 2010). The current research concords with this finding as sport psychologists described 358 having to be proactive in seeking out reflective learning opportunities to discuss client work 359 360 with relevant peers and mentors because they were not surrounded by colleagues in their training environments, a theme that echoes the above discussion on role-plays. 361

Peer interactions. Clinical and counseling psychologists emphasized the value of 362 formal group sessions to reflect on current work with peers and colleagues. A counseling 363 participant illustrated how group reflection helped her conceptualise new ideas: "to hear 364 someone talk about a case and to hear how they've done things differently, it stimulates you, 365 it makes you grow." Participants also found that being surrounded by colleagues stimulated 366 unplanned reflective conversations. For instance: "sometimes other clinical psychologists 367 discuss something and it... raises issues, or thoughts or experiences that I've had recently and 368 creates an opportunity to talk things through informally." The use of external support from 369 peers is in agreement with Tod et al.'s (2007) study of Australian sport trainees. Sport 370 psychologists in the current study found the process of sharing experiences with peers to be 371 useful; however they reported having to take a more proactive approach in seeking external 372 support (e.g., telephone or planned meetings) as contact with peers was less organic. 373

374 Participants from across the subgroups reported that reflective conversations offered the opportunity to gain greater awareness of skills and limitations, and compare one's own 375 approach to work with that of others. The process of transforming previous knowledge into 376 new formats is enhanced through peer interaction (Cropley et al., 2010). In the absence of 377 other reflective opportunities (e.g., lifelong supervision) meaningful collegial interactions 378 described by the seasoned practitioners in Simons and Andersen's (1995) study may be 379 helpful for sport psychologists posttraining. Findings from the present study support 380 previous research suggesting that sport psychologists rely on informal peer networks where 381 382 available, but mostly upon themselves for self-insight (Winstone & Gervis, 2006). Concerns exist, however, that isolated reflection can lead to negative outcomes, such as self-doubt and 383 negative self-focus (Bennett-Levy, 2003). Group reflective processes can alleviate the 384 385 isolation practitioners may experience (Tod & Bond, 2010).

Supervision. Sport psychologists differed from clinical and counseling psychologists
as they had not continued to be supervised formally after completion of training. One sport
participant alluded to how a lack of regulation affected his engagement with supervision in
stating: "I have a supervisor, but the process isn't recognised in any capacity by the BPS
[British Psychological Society] or BASES [British Association of Sport and Exercise
Sciences] as far as I know. It's just something I value from time-to-time."

Sport psychology participants who worked in academia reasoned that their current CPD activities (e.g., conference presentations on applied work, peer and client feedback, publications in peer-reviewed journals) allowed them to function in their role as a sport psychologist and had not considered undertaking formal supervision. One sport psychologist said: "it's publish or perish, not practice or perish." This quote illustrates the reward system imbalance between research and practice in academic jobs in the helping professions; practice, scholarship, and teaching are not equally valued. 399 One full-time sport psychologist highlighted some of the problems in gaining supervision and her solution: "organisations [employers] don't understand supervision... [or] 400 the skillset required... my line manager was assigned to supervise me: obviously a conflict of 401 interest." She further described how she had refused her line manager's supervision and 402 sought a supervisor from outside her organisation by theoretical orientation and skillset rather 403 than discipline, stating supervision was "... psychology, not just sport psychology, it's about 404 helping me reflect and manage." During training, sport participants emphasized that their 405 supervisor was the main person whom they referred to for discussing all elements of their 406 training program, whereas clinical and counseling participants had multiple supervisors and 407 colleagues, such as health care professionals to refer to whilst on placement. 408 409 Similar to previous findings (Watson, Zizzi, Etzel, & Lubker, 2004), sport psychologists in this study did not engage in formal supervision posttraining, and viewed 410 other professional activities as comparable to supervision. Peer consultation regarding case 411 studies is one means by which Sachs (1993) advocated practitioners receive support after 412 training, however he also advised experienced sport psychologists continue to be supervised. 413 Sport is unlike clinical and counseling psychology where supervision is a mandatory, life-414 long requirement to practice (Jones, 2011). Tod, Andersen, and Marchant (2011) also found 415 that some of their participants did not maintain supervision posttraining, reasoning that cost 416 and time were the main barriers. Cost implications of paying for supervision may dissuade 417 418 sport psychologists, especially when an hour with a supervisor could be a billable hour with a client. Similarly, sport psychology trainees may often pay for supervision personally, unlike 419 UK clinical trainees who receive supervision and a salary during training as part of their 420 sponsored NHS program (Jones, 2011). 421

422 Clinical and counseling psychologists continued to be supervised throughout their423 careers and reported reflecting during supervision on the activity undertaken, the self,

professional issues, and the context in which the activity took place. For example, one 424 participant stated that her supervisor helped raise "an awareness of the social factors that can 425 contribute to people's distress", and that supervision was useful for "reflecting on the 426 differences between their lives [psychologists] and clients' lives." Similarly, a counseling 427 psychologist demonstrated reflection on self in stating, "It helps with self-insight... to see 428 blindspots... there's something interesting about saying something out aloud which makes 429 you think differently." Many of the clinical and counseling participants acknowledged that 430 supervision gave them a place to make sense of their experiences with clients. This process of 431 432 reflective learning helps people to construct and reconstruct knowledge based on the hours of experience and material accumulated (Cropley et al., 2010). A cognitive map is developed 433 from the experience which can then be used to inform the trainee's perceptions and 434 435 understanding of subsequent situations.

These differences in supervision experiences between the disciplines are likely related to those that emerged with respect to ease of placement access, and hint at possible structural implications for training and development that will be presented below, such as clinics and formal university based educational programs (e.g., professional doctorates).

Personal therapy. Many clinical and counseling participants confirmed that personal 440 therapy provided an opportunity to reflect on personal and professional development. One 441 participant who undertook therapy stated that it helped him acknowledge his "own messiness 442 and what it brings to the [client] relationship." Personal therapy also created an opportunity 443 for the practitioner to reflect on "what it feels like to be on the other side of the fence." 444 allowing the practitioner to understand the dynamics of the practitioner-client relationship. 445 The personal therapy theme did not emerge from any of the sport psychologist interviews, 446 perhaps because personal therapy is not part of sport psychologist training unlike clinical and 447 counseling training. Previous research has suggested that sport psychologists do not 448

commonly use therapy for personal or professional support and findings from the present study also reflect this (Winstone & Gervis, 2006). The process of therapy is costly in time, energy, and money and without a clear career structure to support sport psychologists, they may be less inclined to engage with therapy. Clinical and counseling participants who engaged in personal therapy identified similar benefits to the sport psychology participant discussed by Tod and Bond (2010). For example, personal therapy provided selfunderstanding, in addition to increasing awareness of the therapeutic process.

456 Applying Theory and Research to Clients

457 Service-delivery experiences provided the opportunity for participants to apply theory to practice with this process allowing for knowledge to be personalised. Clinical and 458 459 counseling participants reported practicing a variety of theoretical frameworks (e.g., CBT, 460 psychodynamic, family systems) taught during their postgraduate programs, whereas sport participants reporting being exposed to mainly CBT (although humanistic approaches were 461 peripherally mentioned) training obtained from their supervisor. One clinical psychologist 462 demonstrated the breadth and depth of training by stating: "we are taught right across the 463 board: it's not just child [psychology]. It's good in terms of developing your skills as a 464 therapist, not just a psychologist." 465

Clinical and counseling psychologists were taught different psychological approaches 466 during lectures, seminars, and role plays that they subsequently applied during work-based 467 learning. Sport psychologists predominantly used the CBT model during training, and 468 guidance was provided through supervision and reading. A sport participant described how 469 this was initially useful: "it [CBT model] gives you something to work on with athletes 470 before you realise it's about building relationships." When asked about the developmental 471 activities in which a trainee should engage, a counseling participant explained: "a trainee 472 needs multiple opportunities to work with the real public...and built into the program there 473

474 needs to be the tensions over different theories...and the time to develop under

supervision...to develop a worldview." Some counseling and clinical participants recalled an
overemphasize on CBT, for example: "... they [university departments] are a bit evangelical
about CBT...one of the things I've learned is that you can't stick to the model of CBT... it's
about adapting to the needs of the client... "

All types of psychology participants referred to their dissatisfaction with the CBT 479 model in reference to the process of internalising knowledge. Similar to clinical psychology, 480 the CBT model is used by most practitioners in sport psychology (Van Raalte & Andersen, 481 482 2000). CBT may be the dominant model in clinical and sport psychology training because it is perceived as an evidence-based therapy, and results can occur quickly due to a specific 483 focus on strategies (Jones, 2011). Clinical psychology participants referred to perceived 484 485 pressure to reduce waiting lists and discharge clients quickly. CBT may be the model expedient to enabling these objectives. Similarly, in the high pressure world of performance 486 sport where results are demanded instantaneously, CBT in its amended psychological skills 487 training form may meet this need. To overcome one-dimensional practice, however, which is 488 unlikely to meet a range of client needs, and for practitioners to find congruence, exposure to 489 a variety of theoretical frameworks through teaching, peer encounters, supervision, and 490 training is necessary (Stoltenberg & McNeil, 2010). 491

492

General Discussion and Applied Implications

493 Credibility is lent to the themes in the present study because findings parallel other
494 informal feedback from UK sport psychology trainees and supervisors (Eubank & Hudson,
495 2013). The current study has extended the literature on sport psychology training by
496 providing empirical data on learning experiences from comparative fields of psychology to
497 learn new ideas and confirm existing practices. For example, based on the findings from

498 clinical and counseling participants, implications will be discussed as to how sport trainees499 may be supported in obtaining appropriate applied practice with clients.

Although one possible limitation of the present study might be that the educational pathway in the UK has changed since some of our participants graduated, recent indications are that trainees are still finding difficulties networking, obtaining placements, and supervisors, and they will likely benefit from formal events that facilitate such interaction (Eubank & Hudson, 2013). Tod et al. (2007) previously highlighted that training programs without regular opportunities for collegiate interactions might be denying students a necessary constituent of their development and placing a limitation on learning.

The current results give rise to a number of applied implications. One theme in the 507 current study was the difficulty sport psychologists reported in securing placement 508 509 opportunities. Creating access to work with clients is an area of potential development for sport psychology; however it is also the quality of experience that matters if it is to be 510 beneficial for trainees, educators, clients, and supervisors. For example, institutes of sport 511 could enter into joint initiatives with universities to provide work experience where 512 instruction on theory and research is provided by the academic supervisor and real-world 513 training and supervision is shaped by the institute supervisor. Partnerships would reduce the 514 pressure on academics to be both teachers and supervisors (and avoid ethical complications 515 associated with adopting dual roles), allow institutes to develop their own practitioners, and 516 517 provide access to real-world applied experiences for trainees whilst athletes would have increased access to sport psychology support. Within such partnerships, individuals who have 518 completed their university-based education (e.g., those people who have completed stage 1 in 519 the UK) could still gain consulting experience (e.g., complete stage 2 in the UK). 520

521 UK sport psychology supervisors mostly work in universities, where there is likely to 522 be access to student athletes, and they may find it beneficial for their supervisees to establish

523 university sport psychology clinics. In addition to gaining client experience, working within a specific project may provide multiple opportunities to observe and discuss applied work with 524 peers at different stages. For example, one trainee might work with the attacking players in a 525 526 soccer team and another student might work with the defenders, whilst their supervisor oversees the program of support as well as offering group workshops to the team and some 527 opportunities for trainee one-to-one observation. These interactions create learning 528 experiences where trainees can react effectively to realistic client situations, practice their 529 counseling skills, as well as learn about themselves and the profession for which they are 530 preparing. Such structured work-based learning would provide strong professional networks 531 supportive of service-delivery improvements and reassuring trainees that they are practicing 532 in an ethical, safe, and effective manner (Tod & Bond, 2010). These types of programs would 533 534 gain universities a bold reputation and might attract students to ensure financial viability. These two suggestions imply the creation of training programs that are housed within a 535 university (e.g., professional doctorate) rather than leaving students to create their networks 536 537 and training opportunities.

Results indicated ways that the use of experiential and reflective learning could be optimised in sport psychology training. To improve trainees' abilities to grasp experience, supervisors could form regional network groups for their own professional development and to facilitate opportunities for supervisees to have regular contact with their peers. Professional networking can encourage fresh conceptualisations by providing alternative viewpoints on client work. In such group settings, the trainee has the opportunity to present anonymised client material to a number of people and to receive feedback and support from a

responses may be presented as well as a shared workload amongst supervisors if this operated

545

range of perspectives. If multiple supervisors facilitate a regional network, diverse theoretical

on a rotational basis. Such networks could also result from university based qualifications and
partnerships with institutes.

Sport psychologists recognised that access to supervision posttraining was a barrier, 549 and access could be improved by those with supervisory skills joining the BPS register of 550 applied psychology practice supervisors (RAPPS). In recent years, the BPS and other 551 organisations globally have been working to establish minimum standards for supervision 552 and supervisors. Evidence exists of attitudes and practices expressed in the current study 553 changing over time as professional organisations educate people about the role of supervision 554 in service-delivery. For example, currently, there are 49 sport and exercise psychology 555 supervisors on the RAPPS compared to 18 in 2013. It is not known how many of these 49 556 practitioners are currently supervising; there are 35 trainees presently enrolled on the BPS 557 558 Qualification in Sport and Exercise Psychology demonstrating that there may be enough supervisors for trainees but access to experienced approved supervisors postqualification may 559 be limited. 560

Clinical and counseling participants found personal therapy beneficial during training. 561 Although it may be difficult to implement mandatory personal therapy during training, a 562 counseling participant advised that "personal development groups" were embedded in his 563 program to facilitate trainee personal and professional growth. Such a group approach can 564 offer the opportunity for sport trainees to learn about themselves and themselves in relation to 565 566 others (Stoltenberg & McNeil, 2010). Material could be discussed with a personal and professional perspective. For example, in sport psychology, if a group of trainees were to 567 discuss boundaries, the supervisor might begin by talking about his or her personal 568 boundaries with examples before discussing boundaries in practice or providing case study 569 examples in which different boundary situations are considered. 570

571 One suggestion for future research is that quantitative surveys are undertaken to examine the generalizability of the themes suggested in this study. Future research could also 572 examine how many sport trainees complete training in the minimum time and the reasons for 573 574 current completion rates. Also, tracking graduates after their training across their careers may help inform education. Furthermore, if trainees have difficulty securing opportunities to 575 practice, then longitudinal examination of trainees' experiences of gaining and retaining 576 clients during training might provide useful information for educators and supervisors. For 577 example, research could examine how trainees identify, approach, and develop relationships 578 with potential clients. Finally, future research could examine the provision of supervision in 579 the UK including the barriers to becoming a supervisor and models of supervision used and 580 why they have been chosen. 581

582 In conclusion, participants in this study valued learning through active engagement with clients to apply psychological models, deliver evidence-based services, and practice 583 service-delivery skills. Clinical and counseling psychologists' training environments were 584 585 structured to allow for multiple, diverse training experiences surrounded by peers and access to multiple supervisors often with diverse theoretical approaches. Sport psychologists trained 586 in more solitary and idiosyncratic ways where reflective learning with peers and supervisors 587 was not as spontaneous or accessible, and they had to be proactive in seeking out clients, 588 peers, and supervisors. Sport psychologist training may be optimized by learning from the 589 590 experiences of clinical and counseling psychologists. In particular, sport psychology educators, supervisors, and trainees may wish to consider multiple, diverse opportunities for 591 experiential and reflective learning. These may include regular supervision from various 592 individuals throughout training, engaging in self-analysis through personal development 593 groups or personal therapy, and networking with peers to develop service for a range of 594 clients. Supervisors and educators may consider how the provision of work experience 595

- through active partnerships with sports organisations can help trainees gain necessary applied
- 597 experience, provide diversity of supervision and service-delivery models, whilst allowing
- 598 supervisors to maintain connections in real-world sport for applied practice or research
- 599 purposes.

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