Athlete and practitioner insights regarding a novel Coping Oriented Personal-Disclosure Mutual-Sharing (COPDMS) intervention in youth soccer

Personal-Disclosure Mutual-Sharing (PDMS) is a communication-based intervention where individuals publicly disclose previously unknown personal stories and/or information to members of their group or team (Evans, Slater, Turner, & Barker, 2013). The notion of PDMS originates from counseling settings where a client consciously and verbally presents a situation or issue to a practitioner with the hope of gaining resolution through interpersonal interaction (Holt & Dunn, 2006). Within group or team settings, the process of personal-disclosure underpinned by mutual-sharing has been found to nurture empathy because group or team members are provided with a greater understanding of each other's personal experiences (Dryden, 2006). PDMS would therefore appear to influence psychological outcomes through mechanisms underpinning person-centered counseling approaches (e.g., Person-Centered Therapy; see Rogers, 1951) where teamwork between a client and practitioner is deemed therapeutic (Dryden, 2006).

PDMS was introduced into sport as an approach to team-building (Dunn & Holt, 2004) with researchers initially administering Relationship Oriented PDMS (ROPDMS) to athletes. During ROPDMS, athletes share personal stories and/or information to increase understanding and relationships between group or team members (Dryden, 2006). Early research indicated that ROPDMS with 27 male intercollegiate ice hockey athletes (Dunn & Holt, 2004) and 15 female soccer athletes (Holt & Dunn, 2006) enhanced a range of outcomes including understanding of the self and others, cohesion, and confidence. Quantitatively, ROPDMS has been found to significantly increase social identities in a team of 15 elite youth academy cricketers (Barker, Evans, Coffee, Slater, & McCarthy, 2014) and the value youth academy cricketers and soccer athletes place on friendships within their team (Barker et al., 2014; Evans et al., 2013). In Barker et al., athletes also completed Mastery

Oriented PDMS (MOPDMS) whereby athletes shared personal stories and/or information pertaining to best sporting performance. Data indicated that MOPDMS significantly increased collective efficacy and the value cricketers placed on winning within their team. Most recently, Vertopoulos and Turner (2017) explored the effects of Rational Emotive PDMS (REPDMS) on irrational and rational beliefs in a sample of Greek male adolescent athletes competing in sports such as soccer and tennis. Group one (n = 11) received four Rational Emotive Behavior Therapy (REBT) education workshops whilst group two (n = 9) participated in a REPDMS session following the same four REBT education workshops completed by group one. During REPDMS, athletes share a personal experience where they adopted rational or irrational thinking and explain emotional and behavioral responses. Participants who completed REPDMS following initial REBT education reported further reductions in irrational beliefs and enhanced rational beliefs over and above participants who received REBT education alone. Overall, research to date appears to suggest that PDMS sessions have the potential to manipulate outcomes aligned to the form of PDMS administered. For example, participating in MOPDMS involves reflecting on past performance accomplishments, receiving verbal persuasion information, and vicariously experiencing sporting success through the personal stories of others (Barker et al.) which are all antecedents of collective efficacy (Bandura, 1997). A host of other important outcomes (e.g., coping) have yet to be assessed in PDMS research which suggests that other forms of PDMS are likely to exist beyond those documented in extant literature.

Presently, PDMS has been administered in a variety of settings which implies that PDMS is a flexible intervention. To illustrate, PDMS sessions have been delivered at national tournaments (Dunn & Holt, 2004; Holt & Dunn, 2006), immediately before an important competition (Windsor, Barker, & McCarthy, 2011), during a pre-season tour (Barker et al., 2014), and during a competitive season (Evans et al., 2013). The flexibility of PDMS implies

that PDMS could be used with a variety of athlete cases and for a range of different scenarios in sport. A scenario common in sports such as soccer is the prospect athletes face of either being released from an organization or being awarded a senior professional contract. Moving from youth to senior sport represents the youth-to-senior transition which is considered the most difficult change athletes face during their career (Stambulova, Alfermann, Statler, & Côté, 2009) because the transition may endure for 1-4 years (Finn & McKenna, 2010). According to the Athletic Career Transition Model (ACTM, Stambulova, 2003), the youth-to-senior transition is also difficult because transition represents a complex process involving several demands, barriers, coping resources, outcomes, and long-term consequences. For example, Pummell, Harwood, and Lavallee (2008) revealed that the main sources of stress for 10 transitioning young event riders stemmed from a host of transition-related pressures (e.g., living-up to expectations), institutional issues/lack of support (e.g., lack of teacher understanding), and sport career/lifestyle pressures (e.g., school tests clashing with competitive season). Pummell et al. (2008) also found that resources (e.g., motivation for the transition) influenced transitional experiences. Notably, the ACTM (Stambulova, 2003) posits that a number of internal and external factors (e.g., insufficient preparation) can impede transition. Perhaps increasing awareness of demand and resource appraisals relating to the youth-to-senior transition through a novel Coping Oriented form of PDMS (COPDMS) could help athletes prepare for gaining a professional contract (making the transition) or being released from an organization altogether (failing to make the transition).

Theoretically, the Cognitive Appraisal paradigm (see Lazarus, 1999) asserts that emotion and behaviour depend on how individuals evaluate the relevance of encounters with their environment (primary appraisal) and subsequent coping potential (secondary appraisal). Similarly, the Theory of Challenge and Threat States in Athletes (the TCTSA; see Jones, Meijen, McCarthy, & Sheffield, 2009) proposes that the balance between demand and

resource appraisals determines emotional, physiological, and performance outcomes. Akin to such models of stress appraisal, the ACTM (Stambulova, 2003) asserts that coping with transitional demands stems from a dynamic balance between transitional barriers and available resources/support mechanisms. Successful (or adaptive) transitions are made when resources meet or exceed transitional demands whilst unsuccessful (or maladaptive) transitions are made when demands exceed resources. Drawing on stress appraisal models and the ACTM, increasing athlete-awareness of demand and resource appraisals through COPDMS could develop an athlete's coping potential for future events by enabling an athlete to meet or exceed associated situational demands (Jones et al.).

To help prepare for scenarios such as within-career transitions, literature would suggest that athletes can employ anticipatory, preventative, or proactive coping strategies (Aspinwall & Taylor, 1997). Such future-oriented coping strategies are considered beneficial because athletes make deliberate efforts to prevent future stressors from occurring or modify the form of a stressor to reduce its potential negative impact (Aspinwall & Taylor, 1997). Research has indeed revealed that 33 female adolescent netball athletes identified the importance of future-oriented coping (e.g., planning ahead) in the effective management of stressors and the attainment of personal goals (Devonport, Lane, & Biscomb, 2013). Yet Tamminen and Holt (2010) found that female basketball athletes were typically more reactive in their coping efforts over the course of a season. During reactive coping, athletes attempt to deal with a stressful encounter that has already happened or is happening concurrently rather than one that will be experienced in the near future (Devonport et al., 2013). Perhaps athletes rely on reactive coping when they struggle to anticipate potential stressors. For instance, McDonough et al. (2013) found that a sample of 8 adolescent swimmers only anticipated 23% of the stressors they encountered across a season whilst accurately anticipating coping strategies they would use 21% of the time. Without sufficient information, athletes would

struggle to formulate expectations about stressors which would compromise subsequent future-oriented coping efforts. In some instances, athletes might not even anticipate stressors at all and may therefore not perceive a need to engage in future-oriented coping (McDonough et al.). Several future-oriented coping strategies are typically associated with effective coping including planning, rationalizing, reappraizing, seeking social support, and optimizing emotions (Devonport et al.; Nicholls, Holt, & Polman, 2005; Nicholls, Holt, Polman, & Bloomfield, 2006). Strategies typically associated with ineffective coping include avoidance (Holt, Berg, & Tamminen, 2007) and negative thinking (Nicholls et al., 2006). Avoidance coping strategies are generally considered maladaptive because athletes make no attempts to confront or manage stressful experiences (McDonough et al.). We therefore propose that COPDMS can encourage athletes to mutually-share information about a stressful encounter that would help to develop future-oriented coping strategies.

The aim of this paper is to provide athlete and practitioner insights regarding a novel COPDMS intervention in a youth soccer context. The value of athlete and practitioner insights in applied practice is that they can provide information regarding the nuances and idiosyncrasies of interventions and their delivery procedures which enable refinement and future development (Barker, McCarthy, Jones, & Moran, 2011). In this paper, we present detail around our case, our COPDMS intervention, demand and resource appraisals communicated during our COPDMS session, athlete and practitioner insights, applied implications, limitations, and future researcher recommendations. Specifically, this paper seeks to contribute to professional practice and PDMS literatures by providing critical insights that assist practitioners in developing and delivering their own bespoke PDMS interventions to suit scenarios and needs applicable to athlete cases.

Case Information

Our case comprised 18 elite male youth academy soccer athletes (*M*age = 17.29 ± .73 years) who belonged to the same Category One professional soccer academy in England. At Under 16s level, a soccer academy athlete in England can be awarded a two-year scholarship contract which confirms they have achieved an appropriate standard to represent the Under 18s (U18s) team (Harwood, Drew, & Knight, 2010). Athletes were either in the first (*n* = 8) or second year (*n* = 10) of their scholarship contract and predominantly competed in their U18s team. A range of ethnic backgrounds were represented including White British, White European, and Black African. All positions in a soccer team were also represented including goalkeepers (*n* = 2), defenders (*n* = 5), midfielders (*n* = 8), and forwards (*n* = 3). During March 2015, second year scholars were to be informed by coaches whether they would be awarded a professional contract or would be released from their soccer academy at the end of their scholarship contract. Decisions about professional contracts for first year scholars were more likely to occur at the end of their scholarship contract during March 2016. We therefore developed and delivered a novel COPDMS intervention for our case given athletes were approaching a period in their career that would require significant coping potential to succeed (Finn & McKenna, 2010).

Institutional ethical approval and informed consent from the soccer academy were gained prior to the intervention. Athletes volunteered their participation by signing an informed consent sheet. Here, athletes agreed to waiving their right to anonymity and confidentiality given they were participating in a communication-based intervention. Athletes also agreed with the COPDMS session being video-recorded to enable the production of CD copies of the COPDMS session for subsequent reflection.

Prior to implementing our COPDMS intervention, we sought to confirm the suitability of doing PDMS. First, we ascertained potential public speaking anxiety among our athletes given public speaking is a common social phobia in youth populations (Furmark et

al., 1999). The Educational Welfare Officer at the soccer club explained that athletes regularly engaged in public speaking activities during personal and athletic development workshops. Second, our athletes shared a common goal of attaining a professional contract. We appreciated there was the potential for our athletes to be reluctant to disclose information through COPDMS due to viewing other team members as rivals and threats to achieving their own professional contract. Across our COPDMS intervention, we therefore framed COPDMS as a strategy that would assist each athlete's development by promoting key demand and resource appraisals central to coping that may otherwise remain unknown. Third, we agreed that COPDMS would enable athletes to hear the thoughts and feelings of other athletes undergoing similar experiences. Dryden (2006) suggested that collaborative personal-disclosure underpinned by mutual-sharing can encourage empathetic understanding due to individuals sharing similar experiences. Empathetic understanding has been posited to underpin the emergence of personal motives, morals, beliefs, and attitudes (Ribner, 1974) which we aimed to achieve through COPDMS. We also deemed that empathetic understanding between practitioners and athletes would have been limited in one-to-one intervention because we were not nor ever had been soccer academy athletes striving for a professional contract. Similar to Evans et al. (2013), we echoed a person-centred counselling approach whereby COPDMS was planned with our athletes at the forefront of our thinking.

Intervention Design

Based on Windsor et al. (2011), the first author led the delivery of the COPDMS intervention due to possessing relevant professional qualifications. Specifically, the first author was a BASES Accredited Sport Scientist (in Psychology) and Chartered Scientist. The fourth, fifth, and sixth authors held no sport psychology accreditations and therefore contributed to developing and delivering the intervention under the first author's supervision. Only the fourth author worked at the soccer club as a part-time performance analyst.

Similar to Evans et al. (2013), we began our COPDMS intervention with an initial sport psychology education session (week 1) so the first, fifth, and sixth authors could build some rapport with athletes. We were not concerned about the lack of rapport between these authors and athletes prior to our COPDMS session since limited rapport between practitioners and athletes does not impede the quality of information shared during PDMS sessions (Evans et al.). This initial education session was also deemed necessary as our athletes were receiving psychological support that was not wholly sport-specific. Based on Windsor et al. (2011), we included a subsequent session (week 2) where athletes were informed about our COPDMS session. In line with Evans et al., we then gave athletes two weeks to digest information before completing their COPDMS session (week 4), ask questions, and seek any support from the first author, fourth author, and Educational Welfare Officer. Finally, we included a follow-up session following a Christmas break (week 9). Whilst our PDMS session contained a reflection that served as an opportunity for debriefing (Windsor et al.), we wanted to provide opportunity for further reflection to reinforce information emanating from our COPDMS session.

COPDMS Intervention

Initial education

Our initial sport psychology education session was held in the soccer academy's education room. Athletes discussed sport psychology and the psychological qualities of elite and successful soccer athletes. Myths about sport psychology were dispelled before the role of a sport psychologist was explained. The session concluded with key messages and lasted around 30 minutes.

Introduction to COPDMS

Athletes were introduced to COPDMS during a second session held in the soccer academy's education room. The Educational Welfare Officer was present to suggest to athletes that

COPDMS would be beneficial for their development and not harm their welfare. Including the Educational Welfare Officer was therefore anticipated to help overcome potential resistance to PDMS that athletes have expressed previously (Evans et al., 2013) whilst encouraging active participation (Barker et al., 2014). The session began with a reflection on sport psychology to consolidate knowledge, confirm our presence, and provide further opportunity to develop rapport. Athletes were then handed an A4-sheet of paper containing four instructions and informed that the upcoming COPDMS session would involve preparing and sharing personal stories and/or information aligned to instructions:

Instruction 1. Within your soccer career you will go through several changes. Provide an *overview of the changes* you have made as a person and as a soccer athlete. What were the demands or challenges associated with the changes you have made? How did you think, feel, and behave before, during, and after the changes you have identified?

Instruction 2. Describe a change you have made in your soccer career that was *less successful* than you hoped. Explain the demands or challenges associated with the change. Describe any factors (e.g., thoughts, feelings, or behaviors) that you feel contributed to the change being less successful than you anticipated.

Instruction 3. Describe a *highly successful* change you have made in your soccer career. Explain the demands or challenges associated with the change. Describe any factors (e.g., thoughts, feelings, or behaviors) that you feel contributed to the change being highly successful.

Instruction 4. Describe the next *upcoming change* you want to make in your soccer career. What have you learnt from all the previous changes you have discussed that could help make the upcoming change a successful one for you?

Instructions were developed by all authors in line with theories of stress appraisal and coping (e.g., the TCTSA; Jones et al., 2009) and asked athletes to cognitively appraise events

in life and soccer (primary appraisal) and describe their coping potential (secondary appraisal or resource appraisal). Instructions 1, 2, and 3 also prompted athletes to articulate demands associated with events in life and soccer (demand appraisal) and explain how their cognitive appraisal influenced emotion and behavior. Generally, instructions were developed to allow athletes to recognize and articulate the main differences between less successful and highly successful transitions which was anticipated to elucidate key resources that could meet or exceed demands associated with attempting to gain a professional contract or being released from a soccer academy. Instructions were verified by an independent sport psychology researcher/consultant with vast experience of doing PDMS in elite youth soccer.

To ensure quality stories were delivered, athletes were advised to be open and honest, provide examples, and answer all parts of each instruction (Windsor et al., 2011). Athletes were also advised to type or hand-write stories to aid delivery. A series of ground rules were then communicated to athletes which formed a PDMS contract between individuals in the room. Establishing ground rules through a PDMS contract is common practice (e.g., Evans et al.) and highlights key ethical and procedural elements that contribute to the potential success of a PDMS intervention (Holt & Dunn, 2006). Our PDMS contract reminded athletes that their awareness of resource appraisals that could assist them when coping with future events would depend on their willingness to disclose information which was expected to further promote task engagement. Our PDMS contract also made athletes aware of the importance of confidentiality and professional conduct given the potentially sensitive nature of information to be disclosed. To further promote professionalism, athletes were advised to prepare for the COPDMS session just like they would prepare for a soccer match. We attempted to ease any concerns about public speaking by explaining that the delivery of a personal story was not a test and information disclosed would not determine decisions about professional contracts. Finally, athletes were encouraged to listen, attend, enjoy, and learn from the experience. The

session concluded with athletes reflecting on the upcoming COPDMS session and instructions. We were careful not to inform athletes about what to include in their stories so that stories remained personal. There were no obvious signs of resistance from athletes and the session lasted around 50 minutes.

The COPDMS session

An environment conducive to sharing information was created by arranging chairs in a semi-circle in the soccer academy's education room. Unlike past research (Evans et al., 2013), no coaches were present. Athletes might have disclosed information relating to their coach when talking about demand appraisals or may have been socially desirable in their disclosure in an attempt to influence decisions about professional contracts. We wanted athletes to be open and honest given that honest self-evaluations are paramount to the potential success of PDMS (Dryden, 2006).

After reinforcing our PDMS contract, a volunteer was invited to initiate the COPDMS session. We explained that each athlete would make their way to the front of the room in turn, share information, and receive a round of applause. After the first disclosure, we attempted to further alleviate any concerns about public speaking by acknowledging the positive reaction of athletes. Similar to past research (Holt & Dunn, 2006), those athletes who shared their personal story towards the beginning of the COPDMS session were thorough in their disclosure which aided engagement and set a precedent for other athletes to follow.

Half-way through the COPDMS activity, one athlete refused to continue speaking after responding to instruction 1. This athlete still wanted to disclose information but was not confident in doing so during their first attempt. We were mindful not to reprimand the athlete to avoid thwarting self-esteem (Barker et al., 2014). We were also keen to encourage active participation and provide support so we presented our athlete with two options. Option A involved the athlete taking a moment before continuing to deliver information. Option B

involved the athlete continuing to deliver information at the end of the activity (which was duly accepted). Encountering athletes that are initially resistant to disclosing information during PDMS sessions is not uncommon (Evans et al., 2013). Furthermore, Windsor et al. (2011) illustrated that five athletes who did not initially feel comfortable in disclosing information subsequently delivered personal stories spontaneously. We therefore adhered to our athlete's wishes by providing further opportunities for our athlete to disclose information at a time most comfortable for them. At the end of the COPDMS activity, this athlete was invited to continue sharing information but again appeared distressed. Accordingly, we encouraged our athlete to talk about a highly successful transition (prompted by instruction 3) rather than a less successful transition (prompted by instruction 2) which echoed a positive approach to psychology that was anticipated to ease distress (Seligman, Steen, Park, & Peterson, 2005). The athlete valued our invitation but declined to speak further. Our athlete expressed not feeling comfortable in disclosing information but still wanted to remain in the COPDMS session. Indeed, we were mindful not to exclude athletes from our COPDMS session to avoid disrupting team dynamics by ostracising athletes from their team. Moreover, it is likely that listening to teammates can provide useful vicarious information and result in athletes experiencing beneficial outcomes (Bandura, 1997). A follow-up consultation took place between this athlete and the Educational Welfare Officer to provide an opportunity for the athlete to experience catharsis resulting from the recall of a potentially painful memory (Jarvis, 2004).

Following the final disclosure, athletes were commended for their preparation, openness, effort, and bravery. Time spent sharing information lasted around 35 minutes. The average speaking time per athlete was approximately 120 seconds which is line with previous PDMS sessions (e.g., Evans et al., 2013). A summary of the changes, demands, and resources described within personal stories can be found in Table 1 which emanated from watching the

video-recorded COPDMS session retrospectively and noting down information. For the remainder of the session, a reflection was held around the information disclosed during the PDMS activity (circa 35 minutes).

Follow-up

Athletes were welcomed into the soccer academy's education room and handed an A4 sheet of paper and a CD copy of the COPDMS session. The A4 sheet of paper included a reminder of the COPDMS activity and guidelines, key information disclosed during the COPDMS session, and an invitation to contact the authors. Athletes discussed the content of the A4 sheet of paper with one another and the first author. The follow-up session lasted around 30 minutes.

Demand and resource appraisals communicated during COPDMS

Typically, demand and resource appraisals communicated during COPDMS mirrored those identified in past transition research. For example, similar to Pummell et al. (2008), our athletes explained how balancing education and sport was a transitional demand. Nevertheless, our athletes described some contextually-relevant demand and resource appraisals not identified in past research such as contractual pressures and arriving late to their soccer academy (see Table 1). Resource appraisals described also spanned several future-oriented coping strategies. Generally, our athletes communicated proactive anticipatory coping strategies (e.g., being prepared) which have been associated with effective future-oriented coping (e.g., Devonport et al., 2013). More specifically, our athletes communicated problem-focused (e.g., learning from mistakes) and appraisal-focused strategies (e.g., reappraisal) with no descriptions of emotion-focused or avoidance-focused coping. Perhaps athletes communicated anticipatory coping strategies given the nature of PDMS instructions. For example, athletes appeared to interpret instruction 4 as a prompt to talk about controllable factors that would help them gain a professional contract. It seems

appropriate that athletes discussed what they could control in the lead-up to learning about decisions regarding professional contracts given these decisions were uncontrollable. Indeed, Lazarus and Folkman (1984) emphasized that problem-focused coping is effective when conditions are amenable to change. It would have therefore been futile for athletes to emphasize problem-focused coping around a decision that was uncontrollable. Perhaps our athletes were focused on demonstrating they were being proactive in their coping to show others they could cope with stressors relating to soccer academy life that might prepare them for being a professional soccer athlete.

Athlete insights

Insights into the COPDMS process and outcomes associated with participating in the COPDMS session were gathered from five athletes immediately before the follow-up session.

COPDMS process

Similar to past research (Dunn & Holt, 2004; Holt & Dunn, 2006), athletes were uncertain about PDMS when PDMS was introduced. In particular, athletes felt apprehensive about opening up and disclosing information, being taken seriously, and what information to disclose. Similar to Windsor et al. (2011), one athlete revealed that athletes initially questioned the benefit and purpose of doing COPDMS:

> When we first found out I wasn't really looking forward to doing it. Like I don't think many people really thought when we first got told about it that it was going to be like beneficial. You just thought another thing you have to do just being here.

Perhaps athletes initially questioned COPDMS because they were naïve to PDMS at the intervention onset. Despite initial concerns, one athlete explained that athletes appeared to come through a challenging experience together:

> It was sort of like nerve-wracking […] Do I open up about everything? It's sort of an opportunity to [open up]. Everyone's sort of in the same situation. Everyone's going to do the same thing. Maybe I should just go for it and then see what else comes out from the lads. But I think we did come out pretty well and everyone sort of said what they thought they had to say, you know, I think it was good in that sort of way.

This insight lends support to Evans et al. (2013) who suggested that PDMS underpins outcomes because athletes undergo and support each other through a challenging task. Meanwhile, thoughts and feelings experienced during the COPDMS session were generally positive. For example, one athlete explained that delivering their personal story was an opportunity to help other athletes understand him. This athlete also described feeling comfortable sharing information because he had "quite a lot to talk about". Corroborating past research (Barker et al., 2014; Dunn & Holt, 2004), another athlete explained how he gained self-confidence because of the respect shown to him by other athletes whilst disclosing information:

> I mean me telling people was a bit hard at the start but whilst I was talking I felt more confident […] I wanted to tell everyone more and more. And it was quite great to see people obviously pay attention [and] obviously respect [me] as well.

This athlete also appeared to experience positive emotion because the delivery of their personal story was cathartic:

> Umm to be fair with you if you can remember mine I just kept going and going. I couldn't stop. I didn't want to stop because I was at the moment where, you know, I was just delivering it and it was just a great feeling, you know, coz it felt like, you know, something's shrugged off my shoulders. But it was good. It was good.

One athlete explained that their confidence in delivering information was tempered slightly by the emotionality of the previous athlete's disclosure. Another athlete explained that providing more time for athletes to disclose information would have reduced the effectiveness of the COPDMS session:

> Everyone had sort of their own set time and it was sort of, it was less time but it was more in-depth and it had more, like, more important sort of things. And if we had a bit longer I think people would end up babbling on about things […] I think having a short and sharp time to open up was more beneficial because, like, there's less to take in but it's better stuff. It's more you're going to remember forever.

This insight supports research suggesting that the quality rather than the length of personal stories maximises the effectiveness of PDMS sessions (Evans et al., 2013) along with suggestions that practitioners should avoid long PDMS sessions to prevent PDMS sessions

losing their focus (Windsor et al., 2011). Another athlete explained that participating in more PDMS activities in the future would be useful. Finally, athletes explained that it may have also been useful to focus on other matters during their PDMS session including the personal journey of being a soccer academy athlete, non-soccer related factors (e.g., family life and friendships), personal issues, and environmental factors. These themes link to other established forms of PDMS (e.g., ROPDMS) which lends support to their importance.

COPDMS outcomes

***Approach*.** Athlete insights suggested that COPDMS may have encouraged an approach focus for gaining a professional contract or being released. For instance, one athlete explained that COPDMS helped them to confront the scenario of gaining a professional contract or being released through preparation and planning:

> I think it has had a positive effect because obviously like I've said you've confronted it so you're thinking about it more like what you can do if it doesn't work out which obviously is the thing that you want. But yeah I think it has been positive just purely because you've confronted it.

Athletes who were first year scholars frequently explained how listening to second year scholars helped them to prepare and plan for gaining a professional contract or being released. For example, one athlete said: "Listening to them like just the little things every day that sometimes you might not be bothered to do but if you are in their position next year you can think back to all these little things." Another athlete (a first year scholar) believed that COPDMS would assist second year scholars with preparing for gaining a professional contract or being released because decisions about professional contracts for second year scholars were more imminent:

> I'm only a first year but like for a second year I imagine like it helps you prepare for the next few months because you actually have to face it […] because it's so like stressful and nervous sometimes you might not wanna think about it [gaining a professional contract or being released] and just like brush it off if someone asks you about it. But because it was like a group task and you had to speak to everyone about it you had to face it and could actually plan what you were gonna do. What like if it didn't go right or stuff like that.

One athlete commented that approach-focused behavior (e.g., effort) was encouraged by participating in the COPDMS session:

> I think after you get one contract like your scholarship when you're sixteen you sorta then think alright I've done that now it's time and I can relax almost. Not relax but sorta not think about the next step straight away. You've got a time period when you can just play soccer […] but then you listen to the [athletes] talking about it [preparing to gain a professional contract] and then realize the next one comes quick then it's only going to become quicker every year. It's not like you can let up at all you have to work harder.

Taken together, athlete insights around approach focus and behavior are logical given that COPDMS instructions asked athletes to confront the scenario of gaining a professional contract or being released. Theories of stress appraisal (e.g., the TCTSA; Jones et al., 2009) suggest an approach focus is a key resource appraisal for coping potential and responses. For example, being approach-focused is associated with a challenge (positive) rather than a threat (negative) appraisal state (Chalabaev, Major, Cury, & Sarrasin, 2009) and positively influences effort in sport (Puente-Diaz, 2012).

Self-confidence. Athlete insights highlighted that COPDMS may have increased self-confidence. For example, one athlete explained that COPDMS increased awareness of their potential to cope with the youth-to-senior transition which subsequently promoted self-confidence around dealing with decisions about professional contracts:

> Talking about it and realizing that I have been through [transition] before, it's sorta made me realize I can get through it whatever happens. So it's just how we prepare properly and now I'm sort of […] comfortably prepared if the worst comes to worse.

Another athlete explained that talking about gaining a professional contract or being released through COPDMS improved their self-confidence around others: "I think it makes you more confident around the group." Again, theories of stress appraisal (e.g., the TCTSA; Jones et al., 2009) assert that self-confidence is a key resource appraisal for coping potential. For example, being confident protects athletes from the negative effects of stressors by instigating a challenge rather than a threat appraisal state (Fletcher & Sarkar, 2012).

***Understanding self and others*.** Similar to Holt and Dunn (2004), athlete insights indicated that COPDMS may have helped athletes understand more about themselves and others. For example, one athlete explained that listening to other athletes share information gave them comfort that they could share information with others. The comfort felt by this athlete appeared to stem from the fact that all athletes were undergoing a similar experience:

> I think listening to everyone else's sort of opinion as well. It's not just being open to yourself. It's sort of taking that other people are going through things as well. It's not just you and so it sort of gives you a bit of comfort to say: "I'm not the only one in the situation." Everyone's got things on their minds and it sort of gives you a bit of comfort as well. So I thought it was good.

Learning that other athletes had encountered similar past experiences seemed to encourage one athlete to be more open with teammates outside the COPDMS session:

> I think you realise that other people have then been through the same thing as you've been through in the past. So you can actually talk to them and they have similar sort of [experiences]. They've been here. They've been through the same sort of things. So there is someone like me to talk to. They've been through the same scenario I guess.

This insight appears logical given that PDMS has been posited to promote empathetic understanding (Dryden, 2006) which according to person-centered counselling approaches (see Rogers, 1951) would foster openness between individuals. One athlete also suggested that the opportunity to have the attention of all athletes was difficult to achieve in their soccer academy environment: "You've got everyone's attention and you couldn't do that if you were just, like, with a bunch of them [athletes] in the changing room. Everyone was sort of listening." Likewise, another athlete explained that COPDMS enabled him to understand information personal to other athletes which he would not have discovered independently in their soccer academy environment: "But me walking around seeing them [other athletes] every day I would have never have stopped them and said: "ahh what have you been through?" Or "how's your family?" I would have never asked the questions." In particular, one athlete said it was useful to hear the opinions of other athletes on how to manage and deal with their anticipated youth-to-senior transition. Overall, such insights are unsurprising given

that elite youth soccer in England is typically characterized by highly pressurised climates for success (Sagar, Busch, & Jowett, 2010).

***Cognitive appraisal*.** Athletes suggested that COPDMS may have influenced their cognitive appraisal. For one athlete, COPDMS emphasized the importance of focusing on their soccer regardless of the decision made about their professional contract:

> I think the main thing of it is just enjoying yourself really [and] enjoying your soccer because you don't want to be coming in, you know, if you're thinking every second ahh about what if I don't get a contract if I don't get this or this and that […] They'll [the coaches] just probably made their decision already so you know it won't make a difference so you might as well just enjoy yourself while you're here.

Alternatively, another athlete (a first year scholar) expected to feel worried about their professional contract as a second year scholar despite COPDMS encouraging him to enjoy his soccer:

> I'm thinking … this time next year I'm going to be worrying so much about pro[fessional] contracts that I won't have time to enjoy what I am doing. So the next few months I'm going to enjoy my soccer really and see where it goes.

Athletes also indicated that COPDMS promoted rational thinking around gaining a professional contract or being released. For example, one athlete explained how COPDMS helped them to put things in perspective: "It makes you realize how like lucky you are as well like if you didn't notice it already, being in this like opportunity and like going through what some people have been through". One athlete demonstrated anti-awfulizing (a secondary rational belief; see Turner & Barker, 2013) about failing to gain a professional contract:

> If I did like get released it would be a bit, you know, sad and stuff. But I will look at it as a positive because it's not like it's the end of the world and I have been in worse situations than not being shown a piece of paper. So I will just brush it off eventually.

Put simply, COPDMS appeared to remind this athlete that being released would be bad but not awful because there are worse things that could happen than not gaining a professional soccer contract. Another athlete also appeared to demonstrate anti-awfulizing by describing that some good can come from being released:

> It is quite scary thinking about it, but fortunately I've been through this situation before being released so, at the time obviously I was only 14 so it … so it was the end of the world for me. But coming here it sorta, it sorta opened me up, and sorta made me realize it was the best thing that had ever happened to me being released, so that sorta negative can turn into a positive.

Perhaps asking athletes to talk about overcoming adversity emphasized to athletes that some good can come from making less successful transitions (anti-awfulizing) whilst future stressors could be tolerated (high frustration tolerance; see Turner & Barker, 2013). Indeed, some athletes described how learning from mistakes was an important coping strategy for dealing with decisions around professional contracts (see Table 1). REPDMS sessions have also been found to enhance rational thinking (Vertopoulos & Turner, 2017). Perhaps COPDMS promoted rational thinking because athletes talked about events, helpful/unhelpful thinking, and emotion/behavior which aligns itself to the ABC framework of REBT (see Turner & Barker, 2013). Rational thinking and coping potential evidenced in athlete insights may explain why athletes appeared focused on enjoying their soccer in preparation for learning about decisions around professional contracts. Indeed, rational thinking is associated with psychological well-being (Turner & Barker, 2013) whilst enhanced resource appraisal positively correlates to enjoyment (Cerin, 2003).

Practitioner Insights

Practitioner insights into the COPDMS intervention were generated from discussions between the authors during and immediately following the COPDMS intervention. Notably, we felt our COPDMS instructions were effective at encouraging athletes to disclose coping oriented information relevant to our topic of interest. The effectiveness of our COPDMS instructions is evidenced by the range of demand and resource appraisals relating to transitions communicated during our COPDMS session (see Table 1). We therefore deemed that COPDMS served as a useful athlete-centred strategy as our COPDMS intervention encouraged athletes to communicate contextually-relevant demand and resource appraisals

from their perspective. Additionally, we felt that doing COPDMS with athletes familiar with public speaking contributed to in-depth information being disclosed (see Table 1), helped athletes feel less threatened about COPDMS, and explained why none of our athletes showed signs of resistance when COPDMS was introduced. Indeed, Holt and Dunn (2006) suggested that exposing athletes to communication exercises that prepare athletes for public speaking and social evaluation can reduce public speaking anxiety. Nevertheless, we believed that our intervention could have benefitted athletes further had we involved senior club professionals in our COPDMS session. We did consider inviting senior club professionals to participate in our COPDMS session but senior club professionals were unavailable due to their sporting commitments. Senior club professionals could have provided an account of their transitional experience in our COPDMS session which might have unearthed other contextually-relevant demand and resource appraisals to our athletes. We also did not expect our COPDMS instructions to prompt some athletes to disclose sensitive information in our COPDMS session. In particular, one athlete appeared distressed when disclosing information relating to instruction 2. Finally, we were unable to collect data from all participants to explore effects and evaluate perceptions of our COPDMS intervention due to unforeseen time constraints and competing club priorities that arose during our intervention. We deemed it more ethical to deliver all stages of our COPDMS intervention rather than sacrifice an important PDMS component in favor of data collection. Sacrificing a PDMS component for data collection would have contradicted British Psychological Society (BPS) and BASES codes of conduct around practitioners having a duty of care first and foremost to athletes at all times.

Applied Implications

Based on athlete insights, several applied implications emerge regarding the COPDMS process. First, athletes can feel apprehensive about PDMS and can question PDMS at the intervention onset. Introducing PDMS sensitively to athletes may help reduce apprehension

athletes can feel about PDMS. Providing clear rationales about the purpose of PDMS may also help to reduce the likelihood of athletes questioning PDMS at the intervention onset. Second, athletes seem to work through the PDMS experience together which might underpin PDMS outcomes. Encouraging athletes to embrace the challenging nature of PDMS may therefore ensure athletes fully engage with PDMS so that potential PDMS outcomes can be experienced. Third, athletes can have limited opportunity to open-up to their teammates in a safe, supportive, and therapeutic environment. PDMS may therefore be a suitable intervention to use when opportunities for athletes to open up in front of others are restricted. Fourth, athletes appear to be comfortable delivering a personal story when they have lots of information to disclose. Ensuring PDMS instructions elicit detailed information and/or personal stories may help athletes experience comfort during PDMS sessions. Fifth, athletes experience comfort and self-confidence in disclosing information when they are respected by others. Emphasizing and upholding respect during PDMS sessions would therefore appear beneficial for helping athletes disclose information. Sixth, disclosing information during PDMS sessions can be an uncomfortable experience for some athletes who are recalling adverse experiences. For such athletes, it would seem beneficial to provide every opportunity to disclose information as disclosing information could be cathartic and help athletes experience positive emotion. Seventh, an athlete's self-confidence in disclosing information can be tempered by the emotionality of a previous athlete's disclosure. Reinforcing the importance of each athlete's contribution following an emotionally charged disclosure may protect self-confidence in athletes preparing to speak. Eighth, PDMS sessions appear most effective when they are focused on a particular topic area. Ensuring that speaking time encourages athletes to be focused in their disclosure so that PDMS sessions do not lose their focus could be beneficial. Practitioners seeking to develop bespoke PDMS instructions would therefore benefit from limiting instructions to a few areas or themes. Ninth, administering

multiple bouts of PDMS to athletes may engender other PDMS outcomes or prolong PDMS outcomes across time. In Barker et al. (2014), however, athletes explained that a MOPDMS session was less emotionally engaging compared to a ROPDMS session delivered ten days earlier. Perhaps practitioners seeking to implement multiple bouts of PDMS would benefit from spacing out PDMS sessions over a longer time period or drastically altering the forms of PDMS sessions to avoid desensitizing athletes to the PDMS process. Finally, athletes were able to think about other things they could have spoken about during their PDMS session which strengthens the notion that a range of PDMS sessions could be developed and delivered in sporting contexts. Practitioners would benefit from being open-minded and creative regarding the potential use of PDMS in sport so that other unknown forms of PDMS can be developed and administered to athletes.

Several applied implications also emerge based on athlete insights into COPDMS outcomes. First, our COPDMS session encouraged athletes to approach the scenario of gaining a professional contract or being released from their academy. Using COPDMS would therefore appear beneficial in helping athletes confront an upcoming event or scenario. Second, athletes expressed feeling more confident in themselves and around others and understood more about themselves and others after participating in our COPDMS session. That said, enhanced self-confidence and understanding of the self and others have been associated with other forms of PDMS (see Dunn & Holt, 2004) which suggests that such outcomes may be a product of undergoing the PDMS process rather than a particular form of PDMS. Third, understanding more about others during PDMS appears to encourage athletes to want to be more open outside of PDMS sessions. PDMS may therefore provide a catalyst for promoting openness between athletes in sporting environments. Fourth, PDMS enables athletes to hear the views of others. Finally, our COPDMS session seemed to influence cognitive appraisal. In particular, athletes explained that COPDMS promoted anti-awfulizing.

Reduced irrational beliefs have been associated with REPDMS sessions (see Vertopoulos & Turner, 2017) which implies that practitioners could use both COPDMS and REPDMS to manipulate elements of irrational thinking in athletes.

The final batch of applied implications are based on practitioner insights on designing and delivering a novel COPDMS intervention. To develop effective PDMS instructions, it would be advisable for practitioners to initially explore literature relevant to a situation or need. Theories and research could be then used to formulate PDMS instructions that would encourage athletes to disclose information during PDMS sessions that would manipulate outcomes beneficial to a situation or need. Having PDMS instructions verified by an experienced PDMS practitioner would also help to confirm their relevance and suitability. Additionally, pilot-testing PDMS instructions or holding discussions about PDMS instructions with alternative samples may help practitioners prepare for the type of information disclosed during PDMS sessions. Practitioner insights revealed that COPDMS was useful for unearthing contextually-relevant demand and resource appraisals relating to gaining a professional contract or being released from a soccer academy. Perhaps practitioners may wish to use COPDMS to understand demand and resource appraisals applicable to other transitions (e.g., retirement) or scenarios (e.g., injury) within and across sports. To maximize the quality of PDMS sessions, it would appear beneficial for practitioners to determine the suitability of using PDMS with their athlete sample. In particular, doing PDMS with athletes familiar with public speaking would help maximize the success of PDMS sessions. When planning PDMS interventions, it is recommended that practitioners consider involving other individuals in PDMS sessions (e.g., senior athletes) who also disclose information and/or personal stories that would benefit an athlete's situation or need. In our COPDMS session, we were not prepared nor expected an athlete to experience distress when attempting to disclose information. Rather than providing optional

support to athletes (see Evans et al., 2013), we argue that practitioners should discuss the content of personal stories with athletes on a one-to-one basis prior to PDMS sessions. Distressed athletes typically display avoidance tendencies (Lee, Orsillo, Roemer, & Allen, 2009) which suggests that athletes distressed about PDMS are unlikely to seek optional support. Providing scheduled support to athletes would therefore enable practitioners to gain a greater understanding of athletes who appear distressed by PDMS and help practitioners prepare and support such athletes through the PDMS experience. We also urge practitioners delivering COPDMS sessions to have support, referral, and follow-up procedures in place given the type of information that could be disclosed during COPDMS sessions. Finally, practitioners seeking to explore the effects and perceptions of PDMS sessions may benefit from agreeing data collection sessions prior to the intervention onset and making them a valued component of the PDMS intervention. Being flexible with data collection methods would be advisable given that contextual factors (e.g., time constraints) may mean certain types of data (e.g., qualitative data generated from semi-structured interviews) are not feasible to collect.

Limitations and Ideas for Future Research

In this paper, we have provided athlete and practitioner insights relating to a novel COPDMS intervention. To advance knowledge, future researchers could explore the effects of COPDMS for preparing to gain a professional contract or being released from a sporting organization by measuring coping, stress-related, and transitional outcomes at pre-COPDMS and post-COPDMS intervention phases. For example, future researchers could measure an athlete's readiness for an anticipated transition across a COPDMS intervention. To further document the efficacy of COPDMS for coping, data are needed to confirm whether future-oriented coping strategies communicated within our COPDMS session were prompted by COPDMS or were already instigated prior to our intervention. Future researchers could also

explore perceptions of participating in COPDMS by using qualitative methodologies such as social validation (see Evans et al., 2013). Future researchers seeking to confirm the effects of COPDMS may benefit from implementing a single-case research methodology (see Barker et al., 2011) where the delivery of COPDMS is staggered over time across multiple groups. Each PDMS group would receive the same COPDMS intervention with any replicated intervention effects improving intervention efficacy. Employing single-case research methodologies would overcome the ethical dilemma of withholding a potentially useful intervention in a control group. Future researchers could alternatively use a crossover design by randomly assigning two groups of athletes to complete COPDMS and an alternative coping intervention. Using random assignment in future research would overcome potential selection bias associated with our intervention whilst completing COPDMS and an alternative coping intervention would enable the efficacy of varying coping interventions to be compared. The practitioner delivering a PDMS intervention as part of a randomized crossover design study could be blinded to the specific PDMS outcomes being measured to restrict demand characteristics.

Conclusion

In this paper, we developed and delivered a novel COPDMS intervention for soccer athletes approaching a time where they would either secure a professional contract or be released from their soccer academy. To this end, our COPDMS session provided a medium for athletes to communicate a range of demand and resource appraisals pertinent to gaining a professional contract or being released. The many athlete and practitioner insights provided highlight the idiosyncrasies associated with our COPDMS intervention which can inform future researchers and practitioners in their use of PDMS in sport. The range of implications arising from athlete and practitioner insights ultimately provides practitioners with useful guidance when seeking to design and deliver bespoke PDMS interventions in sport.

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Tables

Table 1. Changes, demands, and resources described within our Coping Oriented Personal-Disclosure Mutual-Sharing (COPDMS) session.

Instruction	Changes	Demands	Resources*
1	• Being released from a soccer club • Moving away from home • Moving from grassroots level to a soccer academy • Being injured	• Sacrifice (e.g., moving home) • Extra responsibility (e.g., being full-time) • Being self-disciplined • Arriving late to an academy • Gaining acceptance • Integrating with new people • Adapting to new culture • Overcoming fear • Increased physical demands	• Learning to survive and thrive • Being proactive • Turning negatives into positives
2	• Being released from a soccer club • Moving away from home • Not playing soccer	• Sacrifice (e.g., moving home) • Derailment • Lack of 'down-time' • Balancing school and soccer • Dealing with personal issues (e.g., racial abuse) • Not knowing coaches and teammates • Developing independence • Not seeing friends • Increased physical demands	• Viewing setbacks as opportunities • Being proactive (e.g., changing position) • Turning negatives into positives • Learning from mistakes • Using previous experience to enhance self-confidence • Being happy as a person • Viewing football as an escape
3	• Being released from a soccer club • Moving from grassroots level to a soccer academy • Moving from school to scholarship status • Moving from first year to second year scholarship status • Being promoted to the Under 21s (U21s) team • Gaining a loan move	• Dealing with being professional (e.g., nutritional changes) • Increased responsibility	• Reminding yourself to be committed • Finding inner strength/self-belief • Being proactive (e.g., changing position) • Receiving support (e.g., from coaches) • 'Carpe Diem' • Thriving in a professional environment • Using previous experience to enhance self-confidence
4	• Moving from first year to second year scholarship status • Gaining a professional contract	• Controlling nerves • Uncertainty around contract	• Learning from second year scholars (first years) • Drawing on past experience of rejection • Recognising that decisions made will create opportunity • Being prepared and ready for change

**Note*. Describing resource appraisals was not stipulated within instruction 1. Nevertheless, some athletes described resources appraised when disclosing information.