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

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Abstract

1
2 This paper aimed to provide athlete and practitioner insights regarding a novel Coping
3 Oriented Personal-Disclosure Mutual-Sharing (COPDMS) intervention developed and
4 administered in youth soccer. Participants were 18 male soccer athletes ($M_{age} = 17.29 \pm .73$
5 years) who belonged to the same professional academy in England. The COPDMS
6 intervention comprised an initial sport psychology education session (week 1), a session
7 introducing COPDMS (week 2), a COPDMS session (week 4), and a follow-up session
8 (week 9). During the COPDMS session, athletes mutually-shared personal stories and/or
9 information about transitions as they approached a time where they would gain a professional
10 contract or would be released from their soccer academy. Athletes communicated a range of
11 contextually-relevant demand and resource appraisals during the COPDMS session. Several
12 athlete and practitioner insights about the COPDMS process and outcomes were provided
13 which can guide future research and practitioners seeking to develop and deliver bespoke
14 PDMS interventions in sport.

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

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

21 Presently, PDMS has been administered in a variety of settings which implies that
22 PDMS is a flexible intervention. To illustrate, PDMS sessions have been delivered at national
23 tournaments (Dunn & Holt, 2004; Holt & Dunn, 2006), immediately before an important
24 competition (Windsor, Barker, & McCarthy, 2011), during a pre-season tour (Barker et al.,
25 2014), and during a competitive season (Evans et al., 2013). The flexibility of PDMS implies

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1 that PDMS could be used with a variety of athlete cases and for a range of different scenarios
2 in sport. A scenario common in sports such as soccer is the prospect athletes face of either
3 being released from an organization or being awarded a senior professional contract. Moving
4 from youth to senior sport represents the youth-to-senior transition which is considered the
5 most difficult change athletes face during their career (Stambulova, Alfermann, Statler, &
6 Côté, 2009) because the transition may endure for 1-4 years (Finn & McKenna, 2010).
7 According to the Athletic Career Transition Model (ACTM, Stambulova, 2003), the youth-to-
8 senior transition is also difficult because transition represents a complex process involving
9 several demands, barriers, coping resources, outcomes, and long-term consequences. For
10 example, Pummell, Harwood, and Lavallee (2008) revealed that the main sources of stress for
11 10 transitioning young event riders stemmed from a host of transition-related pressures (e.g.,
12 living-up to expectations), institutional issues/lack of support (e.g., lack of teacher
13 understanding), and sport career/lifestyle pressures (e.g., school tests clashing with
14 competitive season). Pummell et al. (2008) also found that resources (e.g., motivation for the
15 transition) influenced transitional experiences. Notably, the ACTM (Stambulova, 2003)
16 posits that a number of internal and external factors (e.g., insufficient preparation) can
17 impede transition. Perhaps increasing awareness of demand and resource appraisals relating
18 to the youth-to-senior transition through a novel Coping Oriented form of PDMS (COPDMS)
19 could help athletes prepare for gaining a professional contract (making the transition) or
20 being released from an organization altogether (failing to make the transition).

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

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

10 To help prepare for scenarios such as within-career transitions, literature would
11 suggest that athletes can employ anticipatory, preventative, or proactive coping strategies
12 (Aspinwall & Taylor, 1997). Such future-oriented coping strategies are considered beneficial
13 because athletes make deliberate efforts to prevent future stressors from occurring or modify
14 the form of a stressor to reduce its potential negative impact (Aspinwall & Taylor, 1997).
15 Research has indeed revealed that 33 female adolescent netball athletes identified the
16 importance of future-oriented coping (e.g., planning ahead) in the effective management of
17 stressors and the attainment of personal goals (Devonport, Lane, & Biscomb, 2013). Yet
18 Tamminen and Holt (2010) found that female basketball athletes were typically more reactive
19 in their coping efforts over the course of a season. During reactive coping, athletes attempt to
20 deal with a stressful encounter that has already happened or is happening concurrently rather
21 than one that will be experienced in the near future (Devonport et al., 2013). Perhaps athletes
22 rely on reactive coping when they struggle to anticipate potential stressors. For instance,
23 McDonough et al. (2013) found that a sample of 8 adolescent swimmers only anticipated
24 23% of the stressors they encountered across a season whilst accurately anticipating coping
25 strategies they would use 21% of the time. Without sufficient information, athletes would

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

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

24 **Case Information**

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

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

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

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

Intervention Design

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

1 Similar to Evans et al. (2013), we began our COPDMS intervention with an initial
2 sport psychology education session (week 1) so the first, fifth, and sixth authors could build
3 some rapport with athletes. We were not concerned about the lack of rapport between these
4 authors and athletes prior to our COPDMS session since limited rapport between practitioners
5 and athletes does not impede the quality of information shared during PDMS sessions (Evans
6 et al.). This initial education session was also deemed necessary as our athletes were
7 receiving psychological support that was not wholly sport-specific. Based on Windsor et al.
8 (2011), we included a subsequent session (week 2) where athletes were informed about our
9 COPDMS session. In line with Evans et al., we then gave athletes two weeks to digest
10 information before completing their COPDMS session (week 4), ask questions, and seek any
11 support from the first author, fourth author, and Educational Welfare Officer. Finally, we
12 included a follow-up session following a Christmas break (week 9). Whilst our PDMS
13 session contained a reflection that served as an opportunity for debriefing (Windsor et al.), we
14 wanted to provide opportunity for further reflection to reinforce information emanating from
15 our COPDMS session.

COPDMS Intervention

Initial education

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

Introduction to COPDMS

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

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

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

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

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

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

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

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

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

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

5 **The COPDMS session**

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

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

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

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1 involved the athlete continuing to deliver information at the end of the activity (which was
2 duly accepted). Encountering athletes that are initially resistant to disclosing information
3 during PDMS sessions is not uncommon (Evans et al., 2013). Furthermore, Windsor et al.
4 (2011) illustrated that five athletes who did not initially feel comfortable in disclosing
5 information subsequently delivered personal stories spontaneously. We therefore adhered to
6 our athlete's wishes by providing further opportunities for our athlete to disclose information
7 at a time most comfortable for them. At the end of the COPDMS activity, this athlete was
8 invited to continue sharing information but again appeared distressed. Accordingly, we
9 encouraged our athlete to talk about a highly successful transition (prompted by instruction 3)
10 rather than a less successful transition (prompted by instruction 2) which echoed a positive
11 approach to psychology that was anticipated to ease distress (Seligman, Steen, Park, &
12 Peterson, 2005). The athlete valued our invitation but declined to speak further. Our athlete
13 expressed not feeling comfortable in disclosing information but still wanted to remain in the
14 COPDMS session. Indeed, we were mindful not to exclude athletes from our COPDMS
15 session to avoid disrupting team dynamics by ostracising athletes from their team. Moreover,
16 it is likely that listening to teammates can provide useful vicarious information and result in
17 athletes experiencing beneficial outcomes (Bandura, 1997). A follow-up consultation took
18 place between this athlete and the Educational Welfare Officer to provide an opportunity for
19 the athlete to experience catharsis resulting from the recall of a potentially painful memory
20 (Jarvis, 2004).

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

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

4 Follow-up

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

11 Demand and resource appraisals communicated during COPDMS

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

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

Athlete insights

9
10 Insights into the COPDMS process and outcomes associated with participating in the
11 COPDMS session were gathered from five athletes immediately before the follow-up session.

COPDMS process

12
13 Similar to past research (Dunn & Holt, 2004; Holt & Dunn, 2006), athletes were uncertain
14 about PDMS when PDMS was introduced. In particular, athletes felt apprehensive about
15 opening up and disclosing information, being taken seriously, and what information to
16 disclose. Similar to Windsor et al. (2011), one athlete revealed that athletes initially
17 questioned the benefit and purpose of doing COPDMS:

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

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

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

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

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

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

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

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

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

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

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

7 COPDMS outcomes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Practitioner Insights

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

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

Applied Implications

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

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

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

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

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

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

1 support to athletes (see Evans et al., 2013), we argue that practitioners should discuss the
2 content of personal stories with athletes on a one-to-one basis prior to PDMS sessions.
3 Distressed athletes typically display avoidance tendencies (Lee, Orsillo, Roemer, & Allen,
4 2009) which suggests that athletes distressed about PDMS are unlikely to seek optional
5 support. Providing scheduled support to athletes would therefore enable practitioners to gain
6 a greater understanding of athletes who appear distressed by PDMS and help practitioners
7 prepare and support such athletes through the PDMS experience. We also urge practitioners
8 delivering COPDMS sessions to have support, referral, and follow-up procedures in place
9 given the type of information that could be disclosed during COPDMS sessions. Finally,
10 practitioners seeking to explore the effects and perceptions of PDMS sessions may benefit
11 from agreeing data collection sessions prior to the intervention onset and making them a
12 valued component of the PDMS intervention. Being flexible with data collection methods
13 would be advisable given that contextual factors (e.g., time constraints) may mean certain
14 types of data (e.g., qualitative data generated from semi-structured interviews) are not
15 feasible to collect.

Limitations and Ideas for Future Research

16
17 In this paper, we have provided athlete and practitioner insights relating to a novel COPDMS
18 intervention. To advance knowledge, future researchers could explore the effects of
19 COPDMS for preparing to gain a professional contract or being released from a sporting
20 organization by measuring coping, stress-related, and transitional outcomes at pre-COPDMS
21 and post-COPDMS intervention phases. For example, future researchers could measure an
22 athlete's readiness for an anticipated transition across a COPDMS intervention. To further
23 document the efficacy of COPDMS for coping, data are needed to confirm whether future-
24 oriented coping strategies communicated within our COPDMS session were prompted by
25 COPDMS or were already instigated prior to our intervention. Future researchers could also

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

Conclusion

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

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1 Tables

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

Instruction	Changes	Demands	Resources*
1	<ul style="list-style-type: none"> • Being released from a soccer club • Moving away from home • Moving from grassroots level to a soccer academy • Being injured 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Learning to survive and thrive • Being proactive • Turning negatives into positives
2	<ul style="list-style-type: none"> • Being released from a soccer club • Moving away from home • Not playing soccer 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Dealing with being professional (e.g., nutritional changes) • Increased responsibility 	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Moving from first year to second year scholarship status • Gaining a professional contract 	<ul style="list-style-type: none"> • Controlling nerves • Uncertainty around contract 	<ul style="list-style-type: none"> • 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

3 **Note.* Describing resource appraisals was not stipulated within instruction 1. Nevertheless, some athletes described resource