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Abstract

The present case study presents the first idiographic application of a one to one Rational Emotive Behavior Therapy (REBT; Ellis, 1957) intervention integrated with Motivational Interviewing (MI; Miller & Rollnick, 2013) with a client (elite athlete) on irrational beliefs, self-determined motivation, and sporting performance. Building and maintaining a strong working alliance with a client is considered central to both MI and REBT, and psychological interventions generally. Whilst there are widespread recognition and recommendations of the importance of working alliance, the guidance on how to explicitly cultivate this beyond broad descriptions is relatively scant. Using the present case of ‘Theo’, MI was used as an identifiable and measurable framework to foster a strong working alliance between the practitioner and client, to increase Theo’s *readiness* and enhance the effects of the REBT intervention. After receiving eight one-to-one REBT sessions, data indicated acute and maintained reductions in Theo’s endorsement of irrational beliefs, increases in self-determined motivation, and marked increases in sporting performance. In addition, measures of treatment fidelity showed the effective and maintained inclusion of core MI principles through the REBT intervention. Ultimately, the case supports the effective application of REBT in addition to MI, whilst providing guidelines by which practitioners can actively facilitate a working alliance when applying REBT. Further, the case contributes to the emerging literature that links reductions in irrational beliefs with enhanced self-determined motivation and its potential value on wellbeing and/or performance.

Key words: rational emotive behavior therapy, motivational interviewing, working alliance, self-determined motivation, sport performance.

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41 **Developing Self-Determined Motivation and Performance with an Elite Athlete:**

42 **Integrating Motivational Interviewing with Rational Emotive Behavior Therapy**

43 **Introduction**

44 In the current study the case of “Theo” (pseudonym) is introduced. Theo is a 22-year
45 old nationally ranked male archer who recently represented his nation at the world university
46 games. Upon his return from the games Theo contacted the first author to seek psychological
47 support for three main reasons. First, to help regain his enjoyment and motivation for
48 archery; second, to help manage his emotions prior to (i.e., anxiety) and after competitions
49 (i.e., anger); and finally, to enhance his performance in competition. Using an explanatory
50 case-study design the authors detail the application of Rational Emotive Behavior Therapy
51 (REBT; Ellis, 1957) with Theo, whilst drawing upon principles of Motivational Interviewing
52 (Motivational Interviewing; Miller & Rollnick, 2013) to augment the application of REBT
53 from initial contact through to completion. The application of psychotherapeutic frameworks
54 such as REBT and MI with clients (i.e., athletes) within performance contexts is receiving
55 increasing interest within the extant literature (e.g., Turner, 2016; Mack, Breckon, Butt &
56 Maynard, 2017).

57 REBT is a cognitive-behavioral approach (Dryden, 2012), based upon the Stoic
58 premise that “people are not disturbed by things, but by the view which they take of them”
59 (Epictetus, 1948, 55-135 A.D.). REBT theory proposes that when faced with adversity (e.g.,
60 failure, rejection, or poor treatment) those who hold irrational beliefs will experience
61 unhealthy negative emotions (e.g., anxiety, anger) and maladaptive behaviors (e.g.,
62 avoidance, disproportionate behaviors that hinder goal achievement; David, Szentagotai, Eva,
63 & Macavei, 2005). Instead, those who harbor rational beliefs will experience healthy negative
64 emotions (e.g., concern, healthy anger) and adaptive behaviors (e.g., problem focused,

65 proportionate behaviors that help goal achievement). There are four core irrational beliefs,
66 namely “demandingness” (i.e., rigid beliefs expressed in the form of musts, absolute should,
67 etc.), “awfulizing” (i.e., concluding that the adversity is 100% bad, and disproportionately
68 exaggerating the consequences), “frustration intolerance” (i.e., concluding that the situation is
69 intolerable & that they cannot stand it) and “self/other/life depreciation” (i.e., attributing
70 failure wholly to oneself/others/life; Dryden & Branch, 2008). Irrational beliefs are rigid,
71 inconsistent with reality and illogical. On the contrary, the four core rational beliefs are
72 categorized as flexible, consistent with reality, and logical, and include “preferences” (i.e.,
73 flexible beliefs expressed in the form of wishes, desires, & wants), “anti-awfulizing” (i.e., the
74 belief that nothing can be 100% bad and truly awful), “frustration tolerance” (i.e., the belief
75 the adversity may be difficult but not intolerable), and “self/other/life acceptance beliefs”
76 (i.e., rating one’s behavior and accepting themselves/others/life as fallible and imperfect;
77 Dryden & Branch, 2008).

78 Central to the practice of REBT is the GABCDE framework (Ellis & Dryden, 1997).
79 The GABCDE framework holds that when faced with an adversity (A; i.e., failure, rejection,
80 or poor treatment; actual or inferred) that is incongruent with one’s goals (G), practitioners
81 educate clients that it is their beliefs (B) about the adversity (A), rather than the adversity per
82 se that dictates the functionality of their emotional and behavioral responses (C). Practitioners
83 work to dispute (D) irrational beliefs and help clients replace them with rational alternatives,
84 in turn, encouraging healthy negative emotions and adaptive behaviors (E) when approaching
85 or responding to an adversity (A). In sport, the delivery of REBT and the GABCDE
86 framework has received growing attention as an efficacious intervention to support athletes.
87 The one-to-one application of REBT with athletes has been reported to increase archery
88 performance (e.g., Wood, Barker & Turner, 2017), reduce anxiety (e.g., Turner, Ewen, &
89 Barker, 2018), and enhance resilience (e.g., Deen, Turner, & Wong, 2017), across a range of

90 sports (Turner, 2019). Researchers have also postulated (e.g., Turner, 2016), and evidenced
91 that REBT can influence self-determined motivation (e.g., triathletes; Davis & Turner, 2019).
92 Davis and Turner (in press) demonstrated that reductions in irrational beliefs were matched
93 with increases in self-determined motivation as a consequence of five 1-2-1 REBT sessions.
94 Accordingly, irrational beliefs are purported to draw conceptual similarities (i.e., self-placed,
95 extrinsic, and a controlling form of motivation) with the organismic integration theory (OIT;
96 Ryan & Deci, 2000) and the self-determination theory (SDT; Deci & Ryan, 1985).

97 Building on emerging support for REBT with athletes, the present case-study was the
98 first to integrate MI with REBT to help support its application. The working alliance is
99 considered central to the effective application of REBT (Bernard & Dryden, 2019). One of
100 the most robust findings within counselling psychology is the importance of a strong working
101 alliance between the client and psychologist for successful therapeutic outcomes (Watson,
102 Hilliard, & Way, 2018). The working alliance is founded on practitioner-client trust, and
103 associated with the quality of communication on purposeful and collaborative work (Hatcher
104 & Barends, 2006). In support, research findings have reported small to moderate effect sizes
105 ($r = .22 - r = .28$) between the working alliance and therapeutic outcomes (e.g., Hovarth, Del
106 Re, Fluckiger, & Symonds, 2011). Considering the centrality of the working alliance,
107 research examining the application of REBT overlooks the specific and teachable steps by
108 which practitioners are able to foster the working alliance with their clients (e.g., Wood et al.,
109 2017). Further, there is a misconception that REBT is based on non-humanistic, brief and
110 overtly directive communication style (Dryden & Neenan, 2015). On the contrary, REBT
111 practitioners are recommended to vary their interactional style with their client (Dryden,
112 2019). As such, the integration of MI offers a structured communication and relational
113 framework that actively promotes the working alliance and facilitates the action orientated
114 process of REBT.

115 Arguably within clinical settings the most common psychotherapy, but certainly the
116 one receiving the most attention in conjunction with MI, is cognitive behavior therapy (CBT;
117 e.g., Arkowitz & Westra, 2004; Naar & Safren, 2017). The efficacy of CBT for clinical
118 disorders is well documented (Barlow, 2008), and yet many clients fail to respond to, or
119 disengage from, the treatment process prematurely (Kertes, Westra, Angus, & Marcus, 2011).
120 To further justify the inclusion of MI with an action orientated approach such as REBT, intra-
121 session treatment activities and inter-session tasks are considered a vital part of the
122 therapeutic process (Dryden & Neenan, 2015), yet noncompliance with these are commonly
123 cited as a problem in cognitive behavioural therapies (CBT's; Helbig & Fehm, 2004).
124 Though not with REBT, practitioners have successfully employed MI as an additive
125 framework to improve the response rates and engagement with alternative CBT's (Dryden,
126 2012), across various clinical disorders (e.g., general anxiety disorder; Kertes et al., 2011;
127 Westra, Arkowitz, & Dozois, 2009). The present MI-CBT (REBT) integration, at no less than
128 an assimilative level (Norcross, Karpiak, & Lister, 2005) forms a mutually beneficial
129 relationship, whereby relational and communication techniques are applicable irrespective of
130 the theoretical grounding (Hardcastle, Fortier, Blake, & Hagger, 2017).

131 In sum, and in the present case, MI was integrated with REBT to help Theo access
132 deeply held beliefs, foster a working alliance conducive to disputing irrational beliefs,
133 reinforce rational beliefs, and strengthen his readiness and commitment for change. The
134 present case study aimed to first, identify the client needs and detail the application of REBT,
135 facilitated by MI, on Theo's self-determined motivation and performance; and second, to
136 contribute to the professional practice literature describing an identifiable and teachable
137 framework to foster the working alliance between a practitioner and client. Theo provided
138 informed consent to undertake the research that was conducted in accordance with the British
139 Psychological Societies Code of Ethics and Conduct (2018).

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Method

Needs analysis and formulation

A needs analysis and formulation process aligned with a cognitive behavioral approach was conducted to identify the demands Theo was faced with (e.g., sporting, life situation), the aetiology of his concerns, the subsequent impact on his behaviors, and the mechanisms by which Theo could be supported (Keegan, 2016). To this end, a complete assessment interview was conducted with Theo to best conceptualize his issues, development goals, strengths and weaknesses, whilst gaining a holistic understanding of his world (Fifer, Henschen, Gould, & Ravizza, 2008); as a result, three key themes arose. First, Theo was an intelligent, quickly spoken, ambitious, and determined individual, whose fortitude for success appeared to inadvertently hamper his progress. The harder he tried, the harder it became to achieve. Theo cited elements of self-, and other-oriented perfectionism, focusing on others' capabilities, and needing to meet others' expectations. Theo was not regularly satisfied with his performances, which compounded an obsession with outcome scores inherent within archery (e.g., “anything less than a 10 is terrible”). Second, Theo cited illogical, extreme, and unhelpful beliefs about achievement (Dryden & Branch, 2008). For example, he noted “I need to continuously get better” (i.e., demand for development), “I can’t stand it when I get beaten” (i.e., frustration intolerance regarding failure), and “Oh I performed terribly at the last competition, and I now feel like a failure” (i.e., awfulizing and self-depreciation about failure). Subsequently, Theo noted signs of low emotional control that manifested in angry outbreaks directed at himself or others when his immovable standards were not met; as such, his performances would rapidly decline. Theo also cited becoming extremely anxious prior to important competitions, thus he no longer enjoyed shooting and was unable to concentrate in competition. Finally, Theo was amotivated to train, compete, and was contemplating quitting the sport.

165 Theo's language in the initial interview suggested he held core irrational beliefs (i.e.,
166 demands, awfulizing, frustration intolerance; Dryden & Branch, 2008) about success and
167 achievement. One cognitive behavioral approach which highlights the importance of core
168 beliefs for the creation and maintenance of human disturbance is REBT (Bernard & Dryden,
169 2019). As evidenced in previous research, Theo also cited clear links between perfectionistic
170 tendencies, alongside a pre-occupation with outcome goals, and deemed his self-worth to be
171 contingent on his performance. (i.e., low unconditional self-acceptance; Flett, Davis, &
172 Hewitt, 2003). According to REBT, deeming one's self-worth to be contingent on
173 performance is irrational in terms of empirical (i.e., not true), logical (i.e., not plausible), and
174 pragmatic arguments (i.e., not conducive for goal achievement). Further, Theo's irrational
175 beliefs about achievement and success were corroborated by his description of unhealthy
176 emotions (e.g., anxiety and anger) and maladaptive behaviors (e.g., avoiding and/or storming
177 out of competitions, outward expressions of anger) that hindered his goal attainment.

178 Theo's disengagement and deliberations to quit the sport in its entirety, alongside his
179 use of irrational language (i.e., having to, rather than wanting to train) was also indicative of
180 low-levels of self-determined motivation towards archery. In the organismic integration
181 theory (OIT; Ryan & Deci, 2000), a core aspect of self-determination theory (SDT; Deci &
182 Ryan, 1985), extrinsic regulation and introjected regulation are considered to be controlling
183 forms of motivation associated with low-levels of persistence, negative affect, and poor
184 performance (Deci & Ryan, 2008). One type of extrinsic motivation, named introjected
185 regulation, is purported to hold particular saliency with irrational beliefs. The introjected
186 regulation of behavior is controlled by self-imposed sanctions to avoid feelings such as guilt
187 and shame; thus, one is likely to engage in activities because they feel compelled into 'having
188 to', rather than 'wanting to' (Standage, Duda, & Ntoumanis, 2005). Similarly, irrational
189 beliefs are conceptualized by the internalization of external regulations (e.g., "I should/I must

190 participate in this event”) and the presence of self-imposed pressure (e.g., “I should always
191 succeed”; Turner, 2016). Though limited, researchers have shown reductions in irrational
192 beliefs to be matched with increases in self-determined motivation (i.e., reduced controlling
193 forms of motivation; e.g., Turner & Davis, 2018). Indeed, self-determined motivation in
194 athletes is associated with enhanced performance, persistence, and well-being (Turner &
195 Davis, 2018).

196 **Single-subject case study**

197 The use of single-subject investigations is considered beneficial for the practice of
198 psychology, allowing for an intensive investigation of an individual (Barker, Mellalieu,
199 McCarthy, Jones, & Moran, 2013). In addition, the inclusion of repeated measurements
200 provides a more representative overview of the participant (i.e., changes in performance
201 scores, psychological variables; Normand, 2016). A case study design also offers a valuable
202 means to provide an insight into unique and novel procedures, and the subsequent effects on
203 performance, health, and psychological wellbeing (Giges & Van Raalte, 2012).

204 **The Intervention: REBT and Motivational Interviewing**

205 As part of an REBT intervention, accessing and disputing deeply held irrational
206 beliefs can be challenging, and is therefore a process which must be founded on a strong
207 working alliance from the onset (Dryden & Neenan, 2015). According to REBT theorists the
208 working alliance can be separated into four-key components: 1) Bonds (interpersonal
209 connectedness), 2) views (understandings that both participants have on salient themes), 3)
210 Goals (purpose of therapeutic meetings, and 4) Tasks (procedures by which both therapists
211 and the client engage with to support the client; see Dryden, 2019 for a detailed overview).
212 One counselling approach that seeks to maximize the working alliance, and one that is
213 receiving interest in the sport psychology literature is MI (e.g., Mack et al., 2017; Mack,
214 Breckon, O'Halloran & Butt, 2019). MI is a client-centred counselling approach that

215 reinforces the athlete's intrinsic motivation for change through exploring and resolving
216 ambivalence (Miller & Rollnick, 2002). To this end, in the current study, the practitioner
217 integrated MI throughout the REBT intervention, offering an identifiable and teachable
218 framework to actively augment the therapeutic alliance with Theo. Broadly, MI consists of
219 four core components: 1) a relational component (spirit) that develops a collaborative
220 partnership between the practitioner and client. MI advocates that the practitioner will
221 demonstrate accurate empathy (accurate understanding of client's thoughts and feelings) and
222 compassion (desire to alleviate client distress), and views the client as both resourceful, and
223 an active agent in their progress. 2) MI practitioners draw upon identifiable communication
224 microskills known by the acronym OARS (i.e., Open-ended questions, Affirmations,
225 Reflections, & Summaries) which operationalize the underlying spirit. 3) The four +
226 processes (engage; evoke; focus; plan; maintain) provide a structure to a single session, or for
227 ongoing support. 4) MI is sensitive to the client's language in terms of behavior change, and
228 works to elicit and reinforce change talk (the client's own arguments for change), while
229 simultaneously reducing sustain talk and resistance to change (arguments for maintaining the
230 status quo). See Breckon (2015) and Mack et al. (2017) for further details on the central
231 tenets of MI and an overview of MI in sport respectively. Ultimately, the integration of MI
232 principles with REBT was intended to help foster a strong working alliance with Theo,
233 conducive to the examination of his deeply held beliefs and to disputing and reinforcing a
234 rational view of success and failure.

235 **Psychometric Assessment**

236 To quantify Theo's issues, measures of irrational beliefs and situational motivation
237 regulation were collected to further determine intervention suitability. Irrational beliefs were
238 assessed using the 28-item Irrational Performance Beliefs Inventory (iPBI; Turner & Allen,
239 2018). The iPBI offers a performance-context specific measure of irrational beliefs. Theo was

240 asked to indicate the extent to which he agreed with each item on a Likert-scale from 1
241 (*strongly disagree*) to 5 (*strongly agree*) where higher scores indicated stronger beliefs. The
242 iPBI demonstrates construct (alpha reliability between .90 - .96), concurrent (medium to large
243 correlations), and predictive validity in athletic samples (Turner et al., 2016). In comparison
244 to normative values drawn from an athletic sample (demand = 24.92, frustration intolerance =
245 24.77, awfulizing = 22.31, self-depreciation = 14.85; Turner & Allen, 2018), Theo reported
246 high levels of demand (30), frustration intolerance (30), awfulizing (30) and self-depreciation
247 (19). The Situational Motivational Scale (SIMS; Guay, Vallerance, & Blandchard, 2000) was
248 used to assess Theo's situational motivation towards archery. Specifically, the SIMS assessed
249 levels of intrinsic motivation, identified regulation, external regulation, and amotivation.
250 Results from previous research have indicated the SIMS to demonstrate adequate factorial
251 structure and internal consistency in athletic populations (e.g., Standage, Treasure, Duda, &
252 Prusak, 2003). Theo was asked to report the extent to which he agreed with each item on
253 Likert-scale from 1 (*does not correspond at all*) to 7 (*corresponds exactly*), where higher
254 scores indicated stronger motivation. In comparison to normative values drawn from an
255 athletic sample (amotivation = 1.75, external regulation = 3.64, identified regulation = 5.09,
256 intrinsic motivation = 5.06; Gillet, Vallerand, Amoura, & Baldes, 2010), Theo reported high
257 levels of amotivation ($M = 6.50$; e.g., 'I do this activity, but I am not sure if it is worth it') and
258 external motivation ($M = 6.00$; e.g., 'because I feel I have to do it'). On the contrary, Theo
259 reported low scores of intrinsic ($M = 3.50$; e.g., 'because I think that activity is fun') and
260 identified motivation ($M = 3.00$; e.g., 'because I am doing it for my own good'). The four
261 subscales were combined into an index, where higher scores indicated greater self-
262 determined motivation.

263 In sum, Theo had reported low levels of self-determined motivation towards archery.
264 He was also experiencing debilitating anxiety when approaching competitions and displayed

265 angry outbursts when faced with failure. These factors were underpinned by a strong
266 endorsement of core irrational beliefs. Given the growing evidence base applying REBT with
267 athletes (see Turner, 2016 for a review), to enhance performance (e.g., Wood et al., 2017),
268 foster self-determined motivation (e.g., Turner & Davis, 2018), and decrease anxiety (Turner,
269 Ewen, & Barker, 2018) a program centred upon disputing and replacing Theo's irrational
270 beliefs with rational alternatives was devised as a valuable intervention to support Theo.
271 Based upon the extant literature it was predicted that first, the intervention would bring about
272 acute and maintained reductions in Theo's irrational beliefs. Second, a new rational
273 philosophy would foster healthy emotions, and adaptive behaviors when Theo faced adverse
274 performance situations (e.g., prior to and/or during competitions) to ultimately enhance his
275 performance scores. Finally, the conceptual similarities between extrinsic motivation and
276 irrational beliefs suggested the reduction of irrational beliefs would be matched with
277 increases in self-determined motivation.

278 **Treatment Fidelity**

279 Throughout the intervention process, the second author acted as a 'critical friend',
280 asking provocative questions, providing perspective and would critique or affirm elements by
281 listening to audio recordings of each session (Costa & Kallick, 1993). Making audio
282 recordings of sessions for the purposes of self-reflection and professional development is
283 argued to be one of the best methods for improving one's professional practice (Rogers,
284 1975), and is perhaps under-used in applied sport psychology. The second author listened for
285 and coded technical components (e.g., cultivating change talk; softening sustain talk);
286 relational components (e.g., partnership; empathy); practitioner behavior counts (e.g., the
287 frequency of MI micro skills; seeking collaboration; emphasizing autonomy); general MI
288 adherent and MI non-adherent practice. The coded elements can all be found within the
289 Motivational Interviewing Treatment Integrity 4.2 (MITI; Moyers, Rowell, Manuel, & Ernst,

290 & Houck, 2016), and this measure was used to give feedback and facilitate discussion with
291 the practitioner after each contact point with Theo. At the end of each session Theo was
292 asked to complete a Client Evaluation of Motivational Interviewing (CEMI; Madson et al.,
293 2013). The CEMI assessed the degree by which MI-adherent behaviors were exhibited by the
294 practitioner. Theo was asked to rate practitioner behaviors on a four-point Likert scale from 1
295 (*never*) to 4 (*great deal*), where higher scores indicated greater adherence to MI.

296 **The Intervention**

297 **Sessions 1-2: Building the Working Alliance**

298 Based upon previous recommendations and applications of REBT with athletes (e.g., Wood,
299 Barker, Turner, & Sheffield, 2018; Turner & Barker, 2014) a total of eight one-to-one REBT
300 sessions were conducted with Theo, each lasting between 50 - 75 minutes. The purpose of
301 sessions 1 and 2 was to establish a working relationship with Theo and laying foundations for
302 an intervention, and so the MI spirit and process of engagement were central. As such,
303 emphasis was given to purposefully explore various topics (e.g., challenges, demands,
304 willingness to change). The use of open questions, affirmations, reflections, and summaries
305 (OARS) provided a guiding framework from which to explore Theo's current reality, express
306 a curious interest, accurately empathise, withhold judgement, and ultimately, build a strong
307 collaborative partnership.

308 Open-ended questions allowed Theo to explore issues, and reach clarity on his
309 situation in a non-judgemental setting. Theo appeared to benefit from disclosing issues that
310 he had not felt able to share with others, in particular feelings of frustration, and helplessness
311 about how to change his circumstances. To further understand Theo's position, elaborations
312 were used (i.e., "tell me more about this..."), which also encouraged the client to do most of
313 the talking. Similarly, questioning was purposeful in creating and directing forward
314 momentum for change around topics that appeared salient. For example, during this session

315 the practitioner asked "why have you decided to make a change now?" and "how would it
316 feel if you were able to make this change and maintain it?". The aim of such questions was to
317 elicit from Theo his own needs and reasons (i.e., change talk) for engaging with the support.

318 Affirmations are reflective statements that were used with Theo to acknowledge his
319 strengths, capabilities, values, beliefs, behaviors and reinforce his self-efficacy regarding
320 change and the REBT intervention (Rosengren, 2017). In particular, affirmations were used
321 throughout the intervention to strengthen Theo's recognition to seek support, to reflect
322 honestly on his beliefs, and his ability to resolve and work through challenging situations. For
323 example, when Theo cited difficulties around seeking psychological provision, the
324 practitioner was able to affirm his resolve and his commitment by reflecting, "It hasn't been
325 easy, but by just seeking psychological support tells me that you're really committed to
326 making a change". It is important to note, affirmations are distinct to praise and echoes the
327 notion of REBT that strives for clients to not merely feel better, but also get better (Dryden &
328 Neenan, 2015). To explain, the affirmations used with Theo anchored his internal attributes
329 and his actions, whereas praise is centred on outcomes, and the practitioner's implied
330 judgement of the value of the client's behaviors (Mack et al., 2019). This can inadvertently
331 create dependency and/or perpetuates the client's need for reassurance (see Table 1 for a
332 practice example).

333 Reflective listening involves making reflective statements rather than asking
334 questions, and ensured parity between what Theo was saying and the practitioner's
335 interpretation. There are varying levels of reflections (i.e., simple and complex reflections)
336 that the practitioner used with Theo to either simply describe his existing position or reflect in
337 a way that provided greater meaning or cognitively altered his view of the situation. For
338 example, when Theo noted, "I set myself very high standards and I get angry quite quickly if
339 I don't perform well", a simple reflection (repeat) was: "you have very high standards for

340 yourself and they can be hard to meet”. This demonstrated to Theo that the practitioner was
341 attentive and making best efforts to understand his position, whilst allowing for further
342 elaboration. Alternatively, a complex reflection (adding a deeper level of feeling, meaning or
343 content) would be: “It sounds like you are placing a lot of pressure on yourself, which hasn’t
344 helped with your emotions or your shooting”, or more succinctly, "You’re feeling frustrated".
345 Such reflections allowed the practitioner to make explicit association between Theo’s core
346 irrational beliefs, unhelpful negative consequences, and the detrimental effect it was having
347 on his performance. From a practitioner's view it was difficult to always have the forethought
348 to offer a simple or complex reflection, and in such instances the critical friend noted that it
349 was important to be vigilant for opportunities to offer meaningful reflections and affirmations
350 whilst maintaining momentum.

351 The aim of summaries was to clearly organise Theo’s position, clarify understanding,
352 combine a collection of salient points which had been raised and reaffirm his commitment for
353 change (Miller & Rollnick, 2002). The practitioner intermittently summarised key points and
354 at the end of session 2 asked Theo to set an agenda of content for session 3 (entering the MI
355 process of focussing), that would allow him to reach his goals (i.e., enhance emotional
356 control, regather his enthusiasm for archery, and enhance performance). The following script
357 describes the use of OARS that have been condensed from original audio recordings of the
358 one-to-one sessions to demonstrate each of the skills:

359 *Practitioner:* Why make this change now? (*Open question - optimism for change*)

360 *Athlete:* Well I’ve tried to logically work out what is going on, as I’m a very logical
361 person but nothing seems to have worked, if I’m being honest I’m a bit puzzled at the
362 moment and this is something I haven’t felt like before.

363 *Practitioner:* So you’re pretty determined and willing to explore various avenues to
364 help you reach your ambitions. (*Affirmation*)

365 *Client:* Yeah that’s exactly right, I very rarely give-up and normally work things
366 through, that’s one of my strengths. I always find a way [*change talk - ability*] and

367 because I have all of this support in place I must fulfil my potential [*change talk -*
368 *need*].

369 *Practitioner:* You're not leaving any stone unturned, and with this you realise that
370 your psychology may offer the final piece in this puzzle. (*Complex reflection*)

371 *Client:* That's it, I have S&C, physio, technical coach, and good access to training, I
372 should be doing better - clearly this is an area I should work on [*change talk -*
373 *reason*].

374 *Practitioner:* So, you are facing challenges in archery that are new to you, and you're
375 looking to develop your mentality. What do you think is hampering your
376 development? (*Brief summary and open question*)

377 In terms of REBT, many elements of the GABCDE framework were covered in
378 sessions one and two. That is the exploration of the adversities (A; i.e., adversities),
379 unhealthy consequences (C), and discussing the association between Theo's beliefs (B) and
380 consequences that hindered rather than helped him achieve his respective goals. The core
381 skills used were not limited to those of OARS, but these proved useful during the early stages
382 of an REBT programme, helping to further explore and understand Theo's position whilst
383 fostering a strong working alliance and strengthening his commitment to the intervention.

384 **Session 3: Education Phase**

385 At the beginning of session 3 the practitioner had intended to explicitly introduce
386 Theo to the GABCDE framework. Instead, it was to be a significant turning point in the
387 consultancy process. To this point, Theo had appeared to be engaged and committed to
388 intervention; nonetheless, after being afforded the time and space to reflect on the last two
389 sessions, Theo revealed his scepticism for psychology as a whole. Theo began to discuss his
390 experiences of psychological skills in a recent major championship, noting "during the
391 tournament, I didn't really buy into sport psychology. Other archers can sit there with their
392 eyes shut [performing visualisation or other forms of preparation], whilst I go on the line and
393 shoot good arrows". Theo's ambivalence about psychological support required further
394 exploration if the REBT programme was going to be successful. Indeed, Theo's position is

395 not uncommon in sport, and practitioners recognise that the manner by which resistance is
396 handled will largely determine the effectiveness of sport psychology practice (Gardner,
397 2017). In a recent study by Massey, Gnacinski and Meyer (2015), 37% of the total NCAA
398 Division 1 athlete sample ($n = 453$) were categorised as in the pre-contemplation stage of the
399 transtheoretical model, and considered not ready to actively engage in psychological support.
400 The resolution of *ambivalence* is a central aim of MI, and a normal part of the change process
401 (Rosengren, 2017). In Theo's case the practitioner first explored the dissonance between his
402 views of sport psychology provision and seeking support. Here, the practitioner allowed Theo
403 to explore his ambivalence using a double-sided reflection that highlighted the discrepancy
404 between what he was doing now, and the beliefs he previously held.

405 *Practitioner*: "So you used to be sceptical of psychological skills, but now you seem
406 to be engaged with the process". *(Double-sided reflection)*

407 *Client*: It's obvious now that there is something out there that will help me [*change*
408 *talk - ability*], and I now know that I need to do mental practice [*change talk - need*],
409 my mental beliefs are very negative and coming through even stronger [*change talk -*
410 *reason*]"

411 *Practitioner*: "You're really willing to give this a good go".
412 *(Complex reflection; strengthening readiness)*

413 By the end of session 3, though the practitioner had not explicitly begun the REBT
414 programme, there was certainly a shift in Theo's determination. Theo was eager to take his
415 time with the intervention, and with this came the realisation that change would not occur
416 overnight. From here, following reflection with the critical friend, the practitioner became
417 more attuned to Theo's language in terms of preparatory and mobilizing change talk (cf.
418 Breckon, 2015 for an overview).

419 **Session 4: Preparatory and Mobilizing Language**

420 Preparatory language consists of: desire to change (e.g., I'm hoping to change), ability
421 to change (e.g., I could try that), reasons for change (e.g., life would be easier if this was

422 resolved), and a need to change (e.g., I need to get better) (Miller & Rollnick, 2013, p. 160-
423 161). At the beginning of session 4 the practitioner had explicitly introduced Theo to the
424 GABCDE framework and the core principles of REBT. During this session, there was very
425 little preparatory language from Theo compared to sessions one and two. Instead, Theo
426 displayed a greater frequency of mobilizing language that indicated his commitment and
427 intention to take steps (e.g., I will/ I am going to/ I intend to; Amrhein, Miller, Yahne,
428 Palmer, & Fulcher, 2003; Miller & Rollnick, 2013, p. 161-163). In addition, he had started to
429 keep a training diary, and was engaging with suggested reading (i.e., buying a book related to
430 REBT). Theo's mobilizing language and his actions strongly suggested that he was becoming
431 receptive to the REBT intervention.

432 Throughout the education phase the practitioner was conscious of deliberately using
433 complex reflections to explicitly discuss core irrational beliefs that Theo alluded to. For
434 example, when citing high levels of shame when underperforming, the practitioner responded
435 with “underperforming says something about you as a whole” (i.e., core irrational belief of
436 self-depreciation); and when offering examples of acting out in anger, the practitioner
437 responded with an amplified complex reflection, “under-performing is unbearable for you”
438 (i.e., core irrational belief of frustration intolerance). Although Theo could have been
439 described as an assured and reactant client, his willingness to agree with such beliefs was
440 surprising and perhaps a reflection on the collaborative and guided approach that had been
441 adopted. In short, the practitioner offered a new lens through which Theo was evaluating his
442 beliefs in an open and engaged manner. During post-session reflection, the critical friend
443 noted that these deeper level, braver complex reflections from the practitioner elicited richer
444 responses from Theo, which seemed to increase mutual understanding, and prevented the
445 conversation from becoming circular as it had been in sessions 1-2.

446 **Sessions 5 – 8: Disputation and Reinforcement Phases**

447 **Communication styles.** When disputing irrational beliefs, Dryden (2019) highlights
448 the need for REBT practitioners to balance their interactional style depending on the client's
449 response. For example, with a reactant or competent client, practitioners are recommended to
450 provide more choice (e.g., Socratic questioning), where instead a client who requires a more
451 directive approach will prefer and benefit more from a didactic approach (Dryden, 2019).
452 Though considered a client-centred approach to counselling, having the flexibility and skill to
453 move between communication styles is central to MI practice. Using the *communication*
454 *continuum* advocated in MI (Rollnick, Miller, & Butler, 2008), the practitioner moved
455 between *directing*, *guiding* and *following* styles to facilitate the REBT intervention, in
456 particular the disputation and reinforcement phases.

457 **Following.** A following style is one that allowed Theo to take charge and encouraged
458 him to explore his own psychology. This approach underpinned large sections of sessions one
459 and two to foster his self-awareness and better understand his current situation. However,
460 during these sessions the critical friend noted that the practitioner had adopted a following
461 style (i.e., asked, went along with) too often, missing opportunities for affirmations and to
462 unpick key issues, and thus losing momentum and direction. Simply put, the session direction
463 was too client-led, repeatedly covering old ground and discussing topics in a superficial and
464 comfortable manner. Although a following style had been useful to some degree during the
465 early sessions, it was not deemed a productive or effective communication style for the
466 educational and disputation phases of REBT. To this end, both directing and guiding styles
467 were deemed more appropriate during the disputation and reinforcement phases of the REBT
468 intervention.

469 **Directing.** A directing style may be considered opposite to a following style.
470 Specifically, this involves providing expertise and problem solving in a declarative fashion
471 and in the form of advice, information or contributing to an action plan. In terms of the

472 knowledge balance, this typically resides with the consultant, where the client listens and acts
473 upon the advice. While this directive communication style was avoided at the early stages
474 with Theo, there were moments during the disputation phase of REBT where a directive style
475 was valuable in problem solving, providing clarity, and directly resolving his situation. The
476 disputation phase in REBT involves disputing core irrational beliefs in line with three rules:
477 1) empirically (i.e., “how true is that belief/where is it written?”); 2) logically (i.e., “is it
478 logical because you want something, that you must have it?”); and 3) pragmatically (i.e.,
479 “how helpful has this belief been so far?”; Bernard & Dryden, 2019). Though the disputation
480 process can be logical, linear, and direct, it is the most challenging phase of REBT, and the
481 phase where clients will make the most progress if delivered effectively (Wood et al., 2017).
482 During this phase, the critical friend highlighted that a directive style can become a default
483 position to revert to and a trap that the practitioner fell into on a few occasions (linked to the
484 MI concepts of the 'expert trap' and the 'righting reflex'; Miller & Rollnick, 2002, p. 24-45;
485 Miller & Rollnick, 2013, p. 16). The directive style should be used cautiously to prevent
486 hampering a client’s commitment to change, and/or working alliance with the practitioner for
487 two reasons. First, it creates an imbalance in expertise, where the client may feel isolated and
488 perceive little involvement in the change process, compromising elements of autonomy and
489 competence. Second, directive communication if overtly used can threaten a client’s self-
490 volition, instead fostering psychological reactance (Brehm & Brehm, 2013), resistance to the
491 process for change, and potentially even discord in the client-practitioner relationship. As
492 such, over-reliance on the directive style may hinder rather than help clients through the
493 disputations.

494 **Guiding.** A guiding communication style sits between directive and following styles
495 and is considered the most consistent with MI. In Theo’s case the practitioner would
496 encourage Theo to explore his own motivations, values, objectives, and viewed him as a rich

497 resource of his own potential strategies or solutions (entering the MI process of evoking). In
498 addition, the practitioner offered information, options and expertise where appropriate, in a
499 respectful and collaborative dialogue. Compared to a following style the practitioner is able
500 to control the overall time and direction of each session, whilst allowing Theo the autonomy
501 to make his own choices (Rollnick et al., 2008). A guiding style was a particularly effective
502 means of challenging Theo's existing irrational beliefs, offering alternatives, and working
503 through the GABCDE framework without compromising Theo's control and free will for the
504 process. Accordingly, to support the disputation and reinforcement phases (e.g., the
505 disputation of irrational beliefs, and replacement with rational alternatives; sessions five –
506 eight), the practitioner overlapped the GABCDE framework with the following MI
507 principles, known by the acronym FOCUS (Rosengren, 2017).

508 **First, ask permission.** Exploring Theo's irrational beliefs was a crucial part of the
509 REBT program, which was facilitated by a technique known as *inference chaining*. Instead of
510 telling Theo what the practitioner thought his core beliefs were, he instead asked Theo's
511 permission to start a task that would help explore his beliefs (e.g., "Would it be ok to suggest
512 a task that will help us unpick your core beliefs?"). In addition, as Theo established new core
513 rational beliefs, there would be examples where he would indicate the endorsement of
514 dogmatic and illogical beliefs about various adversities. (e.g., irrational language). It was
515 prudent to share concerns with Theo whilst still affirming his progress and without
516 compromising the working alliance. For example: "You've worked hard over the past few
517 weeks to challenge what are deeply held beliefs, and it seems as if you're making progress. I
518 do have some observations on your progress that I think will be helpful, would you mind if I
519 share these with you?"

520 **Offer information, rather than persuade.** There were moments with Theo where
521 psycho-educational elements enabled the disputation process. For example, Theo cited

522 irrational beliefs to be empirically and logically untrue, yet suggested they were still helpful.
523 In this instance, the practitioner explained why this was not the case via reasoning rather than
524 persuasion. For example: “I have some ideas that you may wish to consider on why these
525 beliefs seem acutely helpful, but will actually hamper you in the long-term”.

526 **Be Concise.** To help Theo organise and clarify his thoughts it was important for the
527 practitioner to be direct and succinct in his responses, as such the use of simple and complex
528 reflections succinctly captured key points in an accurate yet collaborative manner. When
529 concluding a disputation session, it was helpful to make sense of what had been covered in
530 the context of the programme. For example: “this is the first time you have evaluated your
531 own beliefs, and it has been a challenging, yet thought-provoking session”.

532 **Use a menu.** Intersession tasks are a fundamental part of the GABCDE framework
533 (Turner & Barker, 2014). As such, between the sessions the practitioner provided Theo with
534 tangible tasks that he could apply, developing his ability to recognise, reappraise, and replace
535 unhelpful core beliefs. Indeed, Theo was active in seeking guidance and engaging with tasks
536 that he could apply between sessions. Thus, the practitioner would regularly provide a menu
537 of either cognitive (e.g., thought diary, self-statements) or behavioral techniques (e.g., in-vivo
538 desensitisation), that were theoretically coherent with REBT, but ultimately, a task Theo
539 chose and was happy to undertake.

540 **Solicit.** Soliciting involved beginning and ending information delivery with Theo,
541 allowing him to give permission in receiving the information, and offer his thoughts on the
542 content. For example, the practitioner used a common technique in MI known as Elicit –
543 Provide – Elicit. Here, the practitioner would ask Theo what he knew about the effects of
544 rational beliefs on emotional control compared to his old irrational alternatives (Elicit). Once
545 he provided his view, the practitioner reflected his summary, whilst adding his own

546 perspective to clarify the distinctions (Provide). Following, this he would ask Theo for his
547 reflections (Elicit).

548 Irrational beliefs are deeply held and engrained and so it was important to
549 progressively encourage Theo's role as an active and largely self-directed agent throughout
550 and beyond the REBT intervention, using the range of MI skills. By session eight, Theo
551 continued to show promising signs of intervention engagement (i.e., completion of home-
552 work tasks, meaningful reflective discussions), and had made substantial progress through the
553 GABCDE framework (i.e., self-report data, verbal endorsement of a rational view of
554 adversity, rational language, involvement in rational emotive role-play, better able to manage
555 difficult situations and enhanced understanding of the ABC model). At this point, it was
556 mutually agreed that formal face-to-face sessions would cease, unless Theo requested
557 additional support, in favour of remote support.

558 **Intervention Evaluation**

559 **Treatment Fidelity**

560 In addition to 'unofficial' coding of audio recorded sessions by the critical friend using
561 the MITI code, for the purposes of peer support, the client's receipt of MI was also assessed
562 at the end of every session using the CEMI. Out of a maximum score of 4, Theo reported
563 consistently high scores and incremental increases in the practitioner MI behaviors over the
564 course of the intervention. ($M = 3.53$, $SD = .15$, range: 3.25 – 3.69). The CEMI scores
565 suggest high treatment fidelity, that is, the principles of MI were implemented and practiced
566 appropriately as originally conceptualised (see Figure 1).

567 **Irrational beliefs, Self-Determined Motivation and Performance**

568 Measures of irrational beliefs and motivation towards archery were measured on a
569 session-by-session basis. Further, Theo's endorsement of irrational beliefs and motivation

570 were also collected at a 6-month time-point, whilst competition performance scores were
571 recorded across the outdoor competition season prior to- and post- the intervention onset.
572 Using the IPBI, Theo recorded short and long-term reductions in irrational beliefs at a 6-
573 month follow-up time point. Acute and maintained reductions across all core irrational beliefs
574 support the successful application of REBT (see Figure 2). The data also show substantial
575 increases in self-determined motivation after session 3 that were maintained at a 6-month
576 follow-up time point (see Figure 3). These changes are interesting for two reasons; first, and
577 as reported in previous research (e.g., Turner & Davis, 2018), reductions in irrational beliefs
578 were associated with increased self-determined motivation. Second, that Theo maintained
579 changes across all outcomes over a 6-month period reflects the effective application of REBT
580 augmented by the integration of MI to foster a strong working alliance from the outset. It was
581 interesting to note that momentarily at session six and at the onset of the disputation phase,
582 Theo reported a reverse shift, reporting increases in irrational beliefs and reductions in self-
583 determined motivation. Finally, Theo reported meaningful improvements across a variety of
584 performance measures recorded prior to, and post-intervention onset. First, Theo's personal
585 best scores increased from 676 to 691 out of a maximum score of 720 points; and 1330 to
586 1355 points out of a maximum score of 1440. Second, Theo's top five mean tournament
587 scores increased by 10.8 points from 672 to 682.8. During the head-to-heads (best of 15
588 arrows) Theo's personal best rose from 143 to 146, which was achieved on multiple
589 occasions during the 2018 season. Theo medalled in 12 competition tournaments compared to
590 the previous year in which he medalled in four. Finally, Theo's national ranking rose 44
591 places from 59th to 15th during the following season.

592 **Discussion**

593 The present case-study reports the idiographic application of an integrated REBT and
594 MI intervention on measures of irrational beliefs, self-determined motivation, and sporting

595 performance with an elite archer. This is the first case-study to describe the integration of MI
596 as an identifiable framework to develop the practitioner-client working alliance and,
597 ultimately, augment the application of REBT with a client (in this case an elite athlete). The
598 intervention evaluation indicated acute and maintained reductions in Theo's endorsement of
599 irrational beliefs, increases in self-determined motivation, and marked increases in sporting
600 performance. Further, measures of treatment fidelity report the effective and maintained
601 inclusion of core MI skills and principles throughout the REBT intervention.

602 Data showed expected reductions in irrational beliefs over the intervention process,
603 however, after session six and at the beginning of the disputation phase Theo reported reverse
604 shifts in both irrational beliefs (increased) and self-determination scores (decreased). This
605 may have reflected the ambivalence and resistance that Theo harboured towards the
606 disputation of his deeply held and core beliefs. Disputing one's deeply held and core beliefs
607 is a sensitive and challenging process (Wood et al., 2017), and can be considered the most
608 active-directive phase of REBT, due to the seemingly linear and logical disputation of each
609 core irrational belief. Accordingly, it was prudent for the practitioner to not depart from, but
610 instead maintain the core MI principles that had featured so heavily during the education
611 phase of the intervention.

612 Given that the intervention included no explicit mention of principles associated with
613 self-determination theory, the case contributes to recent proposals linking reductions in
614 irrational beliefs, with increases in self-determined motivation (e.g., Turner & Davis, 2018).
615 For example, Theo reported positive changes in irrational beliefs (reductions) and self-
616 determined motivation (increases) from session 3 (introduction of the GABCDE framework),
617 a temporary negative shift at sessions 6 and 7 (disputation phase), which positively reverted
618 back at a 6-month follow-up time-point (see Figure 2 and 3). To explain, there exist
619 conceptual similarities between the OIT (Ryan & Deci, 2000) and REBT. The OIT explains

620 human motivation along a continuum of six categories starting from intrinsic motivation (i.e.,
621 partaking in an activity for its own sake), four extrinsic motivation levels decreasing in self-
622 determined motivation and amotivation (i.e., absence of any motivation). Thus, in the present
623 case, lower levels of self-determined motivation were indicative of a sense of pressure and
624 obligation for Theo to engage in archery. Comparably irrational beliefs such as, “I must be
625 successful” or “I must engage in this sport” reflected lower levels of self-determination via
626 the internalisation of external regulations (Turner, 2016), and more controlling types of
627 motivation. Thus, in the present case Theo was encouraged to abandon rigid demands about
628 achievement such as ‘shoulds’ and ‘musts’ and replaced with strong preferences, such as: ‘I
629 more than anything want to’ and ‘I would like to’, that in turn reduced his irrational beliefs
630 and controlling forms of extrinsic motivation. In addition, extrinsic forms of motivation such
631 as introjected regulation and the core irrational belief of ‘self-depreciation’ represent
632 regulations that are contingent on self-esteem (e.g., “I should always be successful, if not I
633 am a complete failure”). To this end, Theo was encouraged to give-up his self-depreciating
634 about success and failure and replaced with the rational alternative of unconditional self-
635 acceptance.

636 In addition to the OIT, the SDT includes the sub-theory of *basic psychological needs*
637 (autonomy, relatedness, and competence; Deci & Ryan, 2008), as is considered essential for
638 psychological growth. The maintenance effects reported by Theo across all measures may
639 suggest that REBT, and pertinently the integration of MI principles, created an environment
640 that fostered Theo’s basic psychological need of autonomy, that is one’s perception of
641 congruence and self-volition. To explain, MI seeks to cultivate an autonomy-supportive
642 relationship, encouraging and valuing the client’s input whilst involving them within the
643 decision-making process (Mack et al., 2019); subsequently, facilitating the ‘buy-in’ and
644 engagement from Theo throughout the intervention. Finally, and in line with previous

645 research with elite archers (e.g., Wood et al., 2017) reductions in irrational beliefs were
646 associated with enhanced performance.

647 Developing a strong working alliance with Theo during the REBT program was
648 considered an integral component of the REBT intervention for the following reasons. First,
649 human beliefs serve evolutionary advantages for survival (Harari, 2014), as such, illogical
650 and unhelpful irrational beliefs are deeply ingrained (Macavei & McMahon, 2010) and
651 difficult to renounce (Ellis & Dryden, 1997). Practitioners are tasked with discussing,
652 accessing and disputing deeply held irrational beliefs, something which clients can find
653 challenging and uncomfortable. Second, homework tasks are considered essential in
654 reinforcing the GABCDE framework and the development of a new rational philosophy
655 (Turner & Barker, 2014), and completion of these tasks is unlikely if the client has not
656 engaged with the intervention. In the present case, MI provided an identifiable and teachable
657 client-centred approach to foster a strong working alliance throughout the REBT process, and
658 enhance the client's engagement with the process.

659 During the intervention, the practitioner was required to balance the intended and
660 unintended consequences of integrating REBT with MI. For example, allowing Theo to
661 decide between a menu of inter-session tasks (MI) was intended to foster autonomy within
662 the decision-making process, yet it may have unintentionally allowed Theo to select the most
663 'comfortable' (i.e., rational emotive imagery) rather than the most 'productive' option (i.e.,
664 risk taking, shame attacking). The REBT view that practitioners should support the client to
665 get better and not merely feel better (Ellis, 2004) may seem at odds with the MI framework,
666 however, and as part of MI, once a strong therapeutic alliance has been formed practitioners
667 will work to build discrepancy and cognitive dissonance with the client to generate
668 momentum for change. As described by Resnicow and McMaster (2012), "An effective MI
669 practitioner is able to strategically balance the need to "comfort the afflicted" and "afflict the

670 comfortable"; to balance the expression of empathy with the need to build sufficient
671 discrepancy to stimulate change" (p. 1). Thus, with sensitivity and prudence, practitioners can
672 draw on the communications framework outlined by the acronym of FOCUS to appropriately
673 move between directive, guiding, and following communication styles during the
674 intervention process (see Rosengren, 2017 for an overview on information sharing, offering a
675 concern, and giving advice).

676 **Implications for Practice**

677 Given the importance for practitioners, the working alliance has received increased
678 attention within the sport psychology literature and is repeatedly outlined (e.g., Andersen,
679 2018; Sharp & Hodge, 2013). Irrespective of practice style, years of experience or even
680 intervention content, the ability to form a collaborative relationship will largely dictate
681 whether the client deems the psychological support as effective or not (Keegan, 2016).
682 Emphasising the *what* over the *how* of the intervention, researchers have largely relied upon
683 qualitative accounts to identify key characteristics (e.g., honesty, trust, respect, approachable,
684 and good communication skills; Orlick & Partington, 1987). Only recently has the sport
685 psychology literature begun to delineate in detail the specific core consultancy skills (e.g.,
686 paraphrasing, listening, confrontation, reflecting; Katz & Hemmings, 2009; Murphy &
687 Murphy, 2010; Watson et al., 2018) that are likely to underpin effective sport psychology
688 provision. Nevertheless, what is lacking in the literature but which has been provided in the
689 current study, are verbatim examples of practitioner verbal skills, and vignettes of
690 practitioner-athlete verbal exchanges, labelled with specific practitioner skills and responses
691 to different types of athlete speech. This has significant implications for professional practice
692 because the distinct and teachable ingredients to develop a working alliance, integrate core
693 practitioner skills, and the empirical support to successfully ascertain the additive effects of
694 said skills for psychology provision remain relatively unclear (e.g., Mack et al., 2019).

695 Rather than being viewed in isolation (client's fault), resistance is an outcome of the
696 interaction between the psychologist, client, and context. As evidenced in this case,
697 overcoming resistance/non-readiness and exploring ambivalence is an integral element of
698 psychological service, and the manner in which it is handled determines the overall
699 intervention effects (Gardner, 2017). In this case we have outlined how practitioners are able
700 to recognize and work through resistance/non-readiness to psychology provision that is of
701 value to not only during consultancy, but when working with a wide variety of key
702 stakeholders. Indeed, psychology does not exist in a vacuum, instead practitioners are
703 required to operate amongst various beliefs, pressures and political dynamics, which are often
704 outside of their control (Gardner, 2017). The present case showcases the importance of
705 monitoring the health of the relationship between the practitioner and client. Practitioners are
706 able to assess the relationship using validated measures such as the CEMI or the Working
707 Alliance Inventory (WAI; Horvath & Greenberg, 1989). The lack of consideration and
708 reporting of treatment fidelity is an ongoing issue in clinical settings (e.g., (Diclemente,
709 Corno, Graydon, Wiprovnick, & Knoblach, 2017), and is non-existent in applied sport
710 psychology literature. Practitioners might consider open and frank 'peer supervision' from an
711 appropriately qualified person, as in the current study, to gain meaningful feedback, ensure
712 treatment fidelity and support ongoing development, something about which psychology as a
713 discipline can be remiss (Miller & Moyers, 2017).

714 Finally, researchers should continue to gather and publish treatment fidelity measures
715 as part of applied practice research. Regarding REBT, researchers may wish to use the REBT
716 Competency Scale for Clinical and Research Applications (CSCRA; Dryden, Beal, Jones, &
717 Trower, 2010). They may also consider the five aspects of treatment fidelity outlined within
718 behavior change counseling (i.e., design, training, delivery, receipt, enactment; Breckon,
719 Johnston, & Hutchison, 2008).

720 **Implications for Training**

721 In the present case, we have tried to describe the assimilative integration of two
722 approaches to psychological practice. As evidenced, formal integration requires a competent
723 understanding and experience of two complementary approaches combined in one
724 superordinate framework (Boswell, 2015). Repeated assertions have been made of the
725 importance of neophyte and trainee practitioners to ‘get their hands dirty’ in counselling
726 theory and skills, in order to apply their psychological interventions with fidelity. REBT is
727 one of many approaches a practitioner may use to meet the presenting needs of a client, while
728 MI offers a guiding framework that can be called upon irrespective of the action-orientated
729 content (e.g., REBT). Nevertheless, MI is not a panacea and its sole application would not
730 provide Theo with the cognitive, behavioral strategies/framework that were central in helping
731 him experience reductions in unhelpful irrational beliefs, shifts towards intrinsic motivation,
732 and enhance his performance. To this end, MI should not be exclusively relied upon by
733 practitioners who wish to operate effectively. As exemplified in this case, REBT provided a
734 clear cognitive and behavioral framework helping Theo to experience lasting and meaningful
735 psychological change.

736 **Implications for Research**

737 Whilst MI offers practitioners a guide as to *how* action-orientated interventions can be
738 best applied to bolster their effects, the precise additive benefit on the magnitude and
739 maintenance of an intervention remain unclear. Future researchers may wish to first, explore
740 the additive ingredients of MI via the assessment of perceived helpful and unhelpful elements
741 of each face-to-face session (e.g., Swift et al., 2017). Second, researchers should continue to
742 make use of exploratory single-case and repeated measures research designs (Normand,
743 2016) that allows for an idiographic investigation, as well, increasing confidence that client
744 change was brought about by the psychological intervention. Finally, the present case has

745 delineated an assimilative, arguably theoretical level of integration beyond that of cherry
746 picking techniques from two approaches, a "scattergun" approach (Cecil & Barker, 2016) or
747 'technical eclecticism' (Norcross et al., 2005). Researchers should continue to delineate the
748 precise level (i.e., theoretical, assimilative, eclectic), timing (e.g., pre-, during), and
749 compatibility of alternative psychological approaches (e.g., cognitive therapy, acceptance and
750 commitment models) for successful integration.

751 **Conclusion**

752 From our knowledge this is the first case-study to specifically link the cognitive
753 behavioral approach of REBT with MI. Whilst the use of MI in sport has been cited by
754 practitioners (Mack et al., 2017) and broadly outlined (Mack et al., 2019), the present case
755 study provides the first comprehensive insight into its application, providing benefits for both
756 neophyte and established practitioners. In the present case, we describe and provide
757 guidelines (see Figure 4 for a graphical representation) to facilitate a working alliance when
758 applying REBT (Norcross et al., 2005; see Table 1.). That is, the selective incorporation of
759 techniques and concepts from both orientations (i.e., REBT and MI) into a single, preferred
760 psychological intervention. Based upon the importance of a strong working alliance during
761 REBT, MI was integrated to place Theo as the primary advocate for change. Over the course
762 of the intervention Theo was able to achieve his respective goals, via the cultivation of a
763 close and collaborative relationship with the practitioner. While elements of MI are apparent
764 across many psychological interventions, the present study charts the distinct, identifiable,
765 teachable, and measurable mechanisms by which psychologists are able to initiate, build and
766 maintain their relationship with their client. In addition, the short and long-term assessment
767 of treatment fidelity, psychological (i.e., irrational beliefs and self-determined motivation)
768 and competitive performance scores strongly indicates the effective application of the
769 intervention used with Theo.

770

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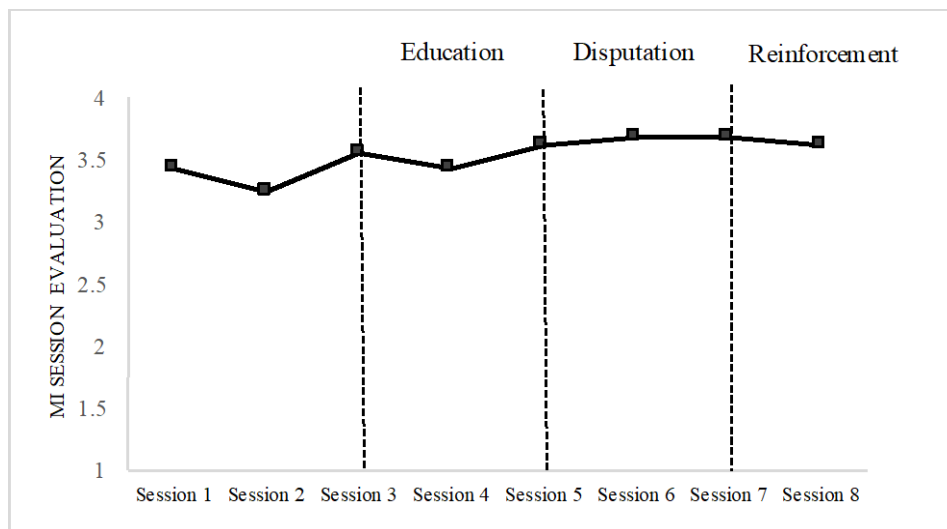
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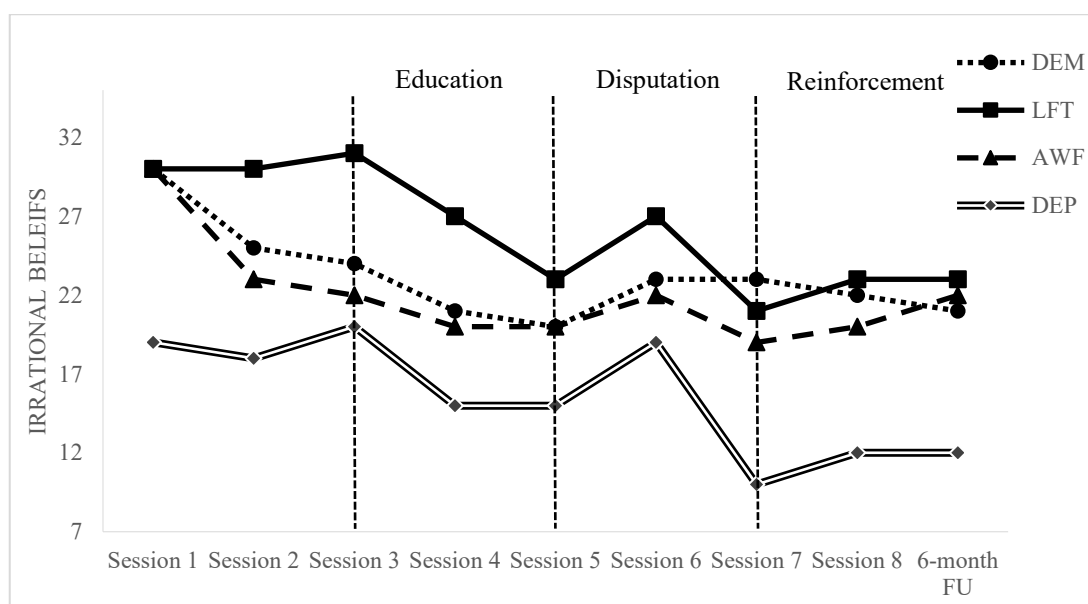
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966 Figure 1. Graphical representation of Client Evaluation of Motivational Interviewing (CEMI)
 967 scores on a session-by-session, mapped with three distinct phases of the REBT (i.e., ABCDE
 968 framework) process.

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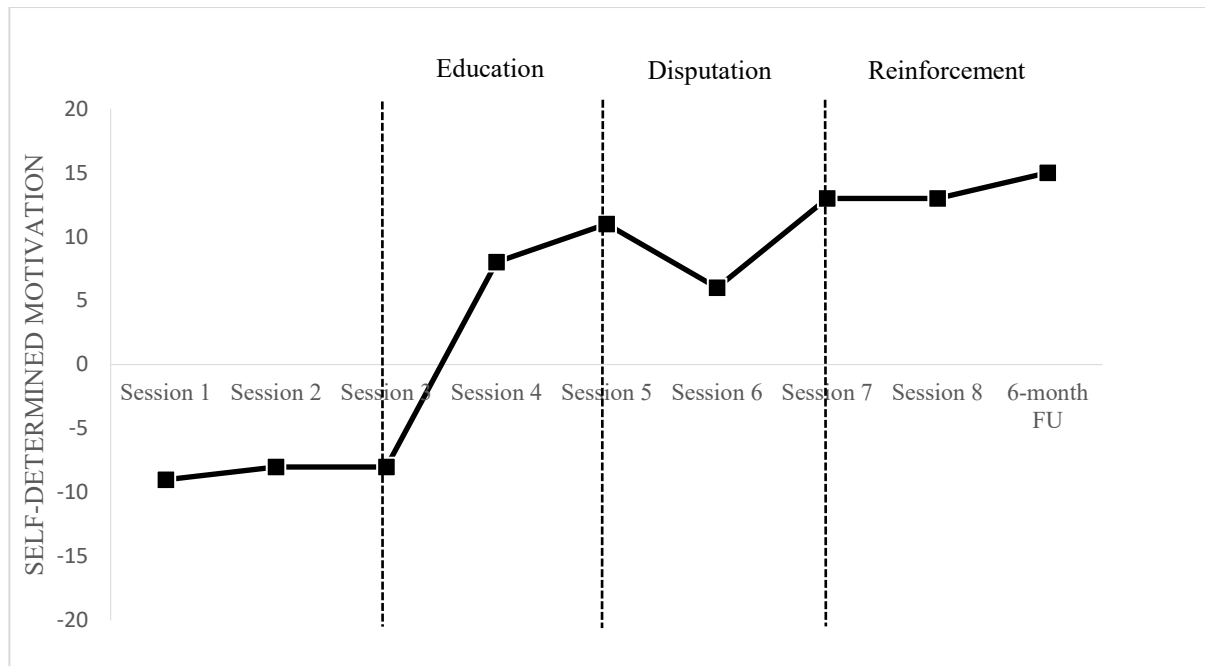
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973 Figure 2. Core irrational beliefs scores mapped with three phases of the REBT (i.e., ABCDE
 974 framework) process across the intervention period and at a 6-month follow-up time-point.

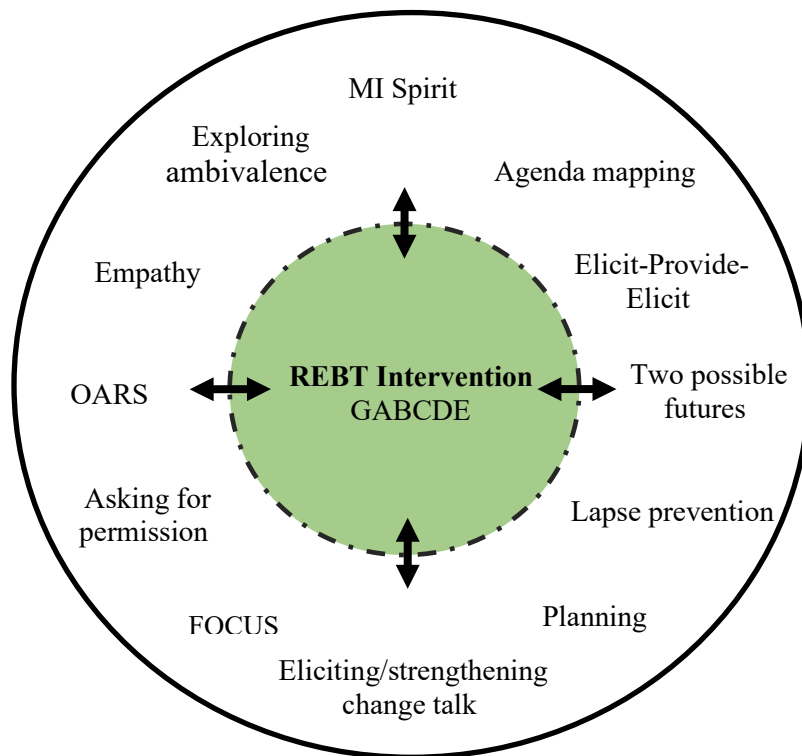
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977 Figure 3. Index of self-determined motivation mapped with three phases of the REBT (i.e.,
 978 ABCDE framework) process across the intervention period and at a 6-month follow-up time-
 979 point.

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981

982 Figure 4. Hypothesized assimilative model of a Rational Emotive Behavior Therapy
 983 intervention drawing on MI principles to augment the working alliance.

984

985 Table 1.

986 *Practice Examples of Core MI Skills Used to Facilitate That Application of GABCDE*

987 *framework).*

Core MI skill	Function for REBT intervention	Case example
Affirmation	To reinforce Theo's diligence and openness to adopt new and helpful rational beliefs.	P: "It hasn't been easy but you've worked hard last week to recognise and re-think your core beliefs" P: "It sounds like you're willing to look at yourself with openness and honesty"
Double-sided reflection	Reinforcing unconditional self-acceptance (core rational belief). Reinforcing new anti-awfulizing belief (core rational belief).	P: "So whilst archery is a large part of your life, you've come to realise that how you perform does not define who you are" P: "So in the moment it feels like the end of the world, but sitting here you know that it's really not that bad"
Building discrepancy (structured as a double-sided reflection)	Conflicting Theo's endorsement of new rational beliefs and old irrational beliefs.	P: "It's comfortable for you to keep up the irrational belief in the short term, but it is causing you to avoid the significant change required for long-term benefit"
Gaining permission and offering a concern	Drawing attention to reoccurring irrational beliefs. Highlighting lack of engagement in inter-session task.	P: "Would I be able to share a concern with you?" P: "I've noticed you haven't completed the task we came-up with last week. Would I be able to share a concern I have with you?"
Elicit-Provide-Elicit	Avoids telling clients what they already know, whilst respecting their skills and knowledge.	P: "What do you know about rationality?" C: "For me it's about being logical" P: "I wonder if you'd be interested in hearing more about rationality?" C: "That would be useful" [Practitioner shares relevant information regarding rationality] P: "I wonder what you make of this, in relation to your core beliefs."

Chunk-Check-Chunk

Keeping the client engaged whilst conveying large amounts of information.

Chunk: The practitioner would describe the debilitating effects of irrational beliefs on psychological health.

Check: Practitioner stops to talk to the client about this information.

Chunk: Practitioner would continue and elaborate on the first 'Chunk'.

Menu of options

Affords Theo autonomy over his intersession tasks.

P: "There is more than one way to continue reaffirming your rational beliefs. These include... Which one makes the most sense to you?"

Normalizing; providing information in the context of other clients.

Normalizes Theo's position, whilst offering ideas and solutions that seem fitting for them.

P: "Typically, in my work with clients they have found the disputation phase the most challenging, yet rewarding."

988

989 'P' = Practitioner, 'C' = Client.

990