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Human Kinetics
CASE STUDY 1

One Size Does Not Fit All: Pluralistic Practice for Long-Term Work With a Premiership Rugby Player

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In this article, we illustrate the service delivery with a 26-year-old, male, professional rugby union player, who over our two-and-a-half-year working relationship brought a multitude of different challenges to sessions. In the initial 6 months of the work presented in this case, the sport psychology practitioners (SPPs; both authors) codelivered sessions. We offer details of this codelivery period, as well as the role that the supervisor (second author) played in the latter 2 years of work. The SPPs worked from a pluralistic philosophy, which acknowledges that different clients need different things at different points in time. As such, we outline how the SPPs engaged in an ongoing process of metacommunication and shared decision making to establish the client's goals and preferences and how this was renegotiated over time. We also depict the different approaches that the SPPs were required to take to meet the client's needs, including referring to another practitioner when appropriate. We conclude by sharing several reflections on our service delivery and offer applied recommendations for SPPs who seek to use pluralistic approaches in their work.

Keywords: elite sport, meta-communication, pluralism, shared decision making

The present work took place while I (first author) was in the third and final year of my Sport and Exercise Psychology Professional Doctorate (Prof Doc) in the United Kingdom. The Prof Doc is a doctoral qualification accredited by the Health and Care Professions Council; therefore, completion of this qualification grants eligibility to register as a Practitioner Psychologist. I had worked with individuals, teams, and organizations across a range of sports (e.g., rugby, cricket, netball, motorsport, boxing, and shooting) in both professional and semiprofessional systems. In my work, and indeed the present case, my practice was influenced by my values (i.e., kindness, integrity, personal growth, professionalism, and humor) and core beliefs (i.e., there are two experts: the client [in their experiences and preferences] and the practitioner [in their knowledge of theory and intervention], and our experiences are contextual and do not exist in a vacuum). My supervisor (second author) simultaneously held positions in academia as a professor of applied psychology and coordinator of the Prof Doc program and in the applied space as a sport psychology consultant.

Philosophy of Practice

One's personal and professional philosophy of practice is widely acknowledged to be a fundamental element of applied sport psychology, as it sets the foundation for the work of sport psychology practitioners (SPPs; Poczwardowski et al., 2004). Indeed, one's philosophy should be evident in an SPP's work with clients from the initial intake throughout the formulation process, working relationship, and assessment. As such, in the initial stages of the Prof Doc, my supervisor encouraged me to focus on establishing my values and philosophy of practice. To assist my search for a professional philosophy, I began to explore different psychological schools of thought and reflected on the extent to which each aligned with my own beliefs. I was enticed by exploring which school best "fit me" and undertook extensive reading of cognitive, behaviorism, and humanistic approaches. Initially, feeling that I should commit to one school brought a significant sense of discomfort. As I explored each school, I reflected on the varying contextual (e.g., presenting problems) and temporal factors that shaped my work with my clients (Cropley et al., 2007) and, in doing so, questioned the extent that taking such a binary approach was appropriate for me. I felt compelled to find a school and feel a sense of professional belonging. Yet, in my search, I felt a growing sense of confusion and hopelessness toward finding a school of thought that "fits" and a fear that my work would be somewhat hindered by a lack of a clear philosophical foundation.

Beyond "Schoolism"

"Schoolism" has long been established in the field of psychology, and to date, there is evidence to suggest that there are more 400 schools of psychotherapy (Prochaska & Norcross, 2018). Each can be distinguished from one another, yet there is also much overlap between the principles and components across the schools. Indeed, within counseling literature, according to common factors theory (Lambert, 1992), the chosen evidence-based approach only accounts for approximately 15% of successful therapy. Instead, common factors theory suggests that the majority of successful therapy is as a result of extratherapeutic or client factors (40%; e.g., client's level of motivation and commitment) or due to the client–professional relationship (30%). The remaining 15% of effective therapeutic work is thought to be associated with the hope and expectation that merely working with a psychologist will be beneficial.

Reflecting on the range of perspectives within the applied sport psychology literature, the importance of the therapeutic relationship (Friesen & Orlick, 2010) and interpersonal skills (Woolway & Harwood, 2020) appeared to be evident across multiple approaches.

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To illustrate, within person-centered therapy (Rogers, 1957), Mearns and Cooper (2005) describe that, when a client and practitioner reach a state of relational depth, they are able to understand and value each other's experiences at a higher level. Meanwhile, in their investigation into over-the-phone and face-to-face cognitive behavioral therapy, Turner et al. (2018) found that cognitive behavioral therapy practitioners valued the therapeutic relationship, as it enabled a more personal, subjective, rapport, and more effective practice. By reading case studies, attending conferences and workshops, and engaging with SPPs, I also noted that an increasing number were attempting to work beyond "schoolism" by adopting a more eclectic or integrative perspective (Poczwardowski et al., 1998). Nevertheless, both eclectic and integrative perspectives demonstrate an intentional, prescriptive, strive toward the use of multiple approaches and, in doing so, reject the value and appropriateness of a singular approach to therapy. Therefore, even an eclectic or integrative perspective may be perceived to be a school in their own right. Conversely, pluralism recognizes value and appropriateness in eclectic and integrative perspectives, as well as singular approaches to therapy.

A Pluralistic Perspective to Practice

Over the past decade, pluralism has emerged in the field of counseling and psychotherapy as a way of articulating how many psychology practitioners, including SPPs, underpin their applied practice (Cooper & McLeod, 2011). Pluralism is based on the philosophical belief that "any substantial question admits a variety of plausible but mutually conflicting responses" (Rescher, 1993, p. 79). Cooper and McLeod (2011) described a pluralistic perspective as the assumption that "different clients are likely to benefit from different therapeutic methods at different points in time, and that therapists should work collaboratively with clients to help them identify what they want from therapy and how they might achieve it" (p. 7–8). Essentially, a pluralistic perspective is the belief that there is no "one-size-fits-all" when it comes to working with clients. Instead, pluralism is the explicit and conscious value of diversity, or more specifically, the rejection of a lack of diversity that potentially limits the expression of individual differences. To this end, pluralistic practitioners aim to collaborate with their clients to determine an approach that would work best for them toward their therapeutic goals (Cooper & McLeod, 2011).

Cooper and Dryden (2016) proposed three pillars that underpin the pluralistic perspective. The first, *pluralism across orientations*, relates to the pluralistic practitioner as being "open to considering a variety of different ways in which clients get distressed and, correspondingly, a variety of different ways of helping them" (p. 3). Essentially, the first pillar represents the belief that a lot of different approaches can be helpful to clients. The second is *pluralism across clients*, which emphasizes the "recognition and celebration of diversity across clients" (p. 3). In practical terms, this pillar reflects a belief that work should be tailored to the client rather than an "off-the-shelf" approach. The final pillar, *pluralism across perspectives*, reflects the belief that "*both* participants in the therapeutic relationship—clients as well as practitioners—have much to offer when it comes to making decisions concerning therapeutic goals and the selection of therapy tasks and methods" (p. 3). Simply put, if practitioners want to know what is going to help their clients, they must discuss it with them. This third pillar is particularly noteworthy as it further distinguishes pluralistic approaches to those that are eclectic or integrative. Indeed, eclectic and integrative approaches do not necessarily require shared decision making with clients, whereas pluralistic approaches place emphasis on shared decision making as a mechanism for obtaining a deeper understanding of what will help the client.

Finally, Cooper and McLeod (2011) stressed the importance of acknowledging the difference between a pluralistic *philosophy* and a pluralistic *approach*. A pluralistic philosophy refers to one's *belief* that all approaches have value in different contexts, such that it is meaningless to argue which is best (Cooper & McLeod, 2011). It is important to note that practitioners who hold a pluralistic philosophy are not prescribed to use multiple approaches in their practice. Indeed, some pluralistic practitioners may still only use one approach and instead find other ways to exercise their pluralistic beliefs (e.g., referral to a practitioner that uses a different but equally valid approach). This is different from using a pluralistic *approach*, which refers to the specific act of drawing on methods from one or more orientations and is characterized by a shared and negotiated discussion with their client about their goals and approach (Cooper & McLeod, 2011). In the present case, the SPPs held a pluralistic philosophy and used a pluralistic approach to work with the client.

Presentation of the Case

The client in this case, Freddie (pseudonym), is a 26-year-old, male, professional rugby union player, playing in the English Rugby Premiership. Freddie had been at his club since he was 16 years old and had progressed through the academy into the first team. He is a regular first team player, and throughout his career, he has held formal leadership roles (e.g., captain and vice-captain) within his club team and at the international level, as well as winning awards such as Player of the Season. First contact was instigated by the client via text message, who had become aware of my practice through word-of-mouth.

This case depicts two and a half years of work and reflects a range of challenges that Freddie brought to sessions, the changing nature of our working relationship, and, subsequently, how I adapted my approach to meet his needs at different points in time. Of note, in the initial 6 months of this work, my supervisor and I codelivered in order to provide a higher quality service and as a development opportunity, given my inexperience in applied practice. At the outset of this codelivery period, my supervisor largely led the client-facing aspect of our delivery, and we would subsequently engage in jointly formulating after each session. As I gained confidence and experience, I gradually increased my involvement in sessions as we began to feel I was ready to take more responsibility, until my supervisor acted only as an observer. After 6 months, my supervisor ceased attending sessions, yet we continued to discuss the casework in supervision as the working alliance with Freddie progressed in our fortnightly sessions. We included this planned incremental change toward independent sessions within our pluralistic approach, as we sought Freddie's opinions on if/when change was necessary prior to, during, and post the codelivery period to ensure that it did not disrupt sessions. Occasionally, my supervisor would join sessions in which we thought it may add value, and Freddie indicated that this was a "bonus" rather than a disruption.

The middle period of this work, which spanned approximately 1 year, was also characterized by the COVID-19 pandemic, associated lockdowns, and premature ending of the English Rugby Premiership league season. As such, the frequency and mode (e.g., in person, online) in which Freddie and I engaged in structured sessions varied at different time points over our working relationship. As a result, although service delivery was typically conducted as a formal process (e.g., sessions and observations), at times, Freddie and I engaged in more informal communication

(e.g., text messaging). The three key timepoints discussed in the subsequent section of this article are presented in chronological order.

Needs Analysis, Client Goals, and Client Preferences

At the outset of our service delivery, we discussed key ethical and professional considerations to practice (e.g., confidentiality, competence, and professional boundaries) with Freddie and set logistical expectations (e.g., availability and method of contact; Keegan, 2016). In addition, we aimed to understand the client's reasons for seeking psychological support and establish goals for sessions. Finally, we articulated a high-level summary of a pluralistic philosophy of practice to the client and began an open dialogue around the client's preferences regarding our impending sessions (Cooper & McLeod, 2011).

Needs Analysis and Negotiating Client Goals

Our pluralistic approach began by engaging Freddie in a metacommunication (Rennie, 1998), that is, a collaborative activity to establish goals for subsequent work (Cooper & McLeod, 2011). These established goals for therapy would later serve as an orientating point for the planning, implementing, and evaluating of therapeutic work (Cooper & McLeod, 2007, 2011). Although metacommunicative activity places emphasis on what the client would like to get out of sessions, as the practitioners, we were also required to input our views and experience into the dialogue so that both Freddie and our expertise contributed toward the agreed upon goals (Cooper & McLeod, 2011).

In the present case, Freddie began by describing a multitude of challenges that he was experiencing, namely, a strong athletic identity that caused him to base his personal worth on his athletic success, a challenging relationship with his parents, and engaging in destructive behaviors (e.g., alcohol consumption). He explained that, over the years, he had gained a reputation as "the joker" who did not take his career seriously and that this label had hindered his career development but that this was unjust as he was in fact "hardworking, diligent, and serious." Finally, Freddie described a need, almost to the point of obsession, to win the rugby Premiership and to play for the England senior side, stating that not accomplishing these ambitions would be "awful," "a disaster," and "difficult to deal with."

Subsequently, we invited Freddie to specify more clearly what he would like from our sessions by reflecting back the numerous challenges he had disclosed and posing questions such as "What specific things would you like from sessions?" and "Where would you like to by the end of our work together?" Here, Freddie began to passionately describe instances where his parents had strongly encouraged him to seek several demands during contract negotiations with his club, that after every game they would send him multiple texts with their views regarding how he could have played better, and how outside of sport they would insist on him making renovations to his house. Freddie stated that, despite the other challenges that he had mentioned, he primarily wanted to form a healthier relationship with his parents where he felt more supported and less like his parents were trying to control aspects of his professional and personal life.

As Freddie and I formulated the case together in our codelivery space, we noted that Freddie's parents' behavior was outside of his control yet something he may be able to influence. Here, we recognized an opportunity to engage in shared decision making, thus adhering to the third pillar of pluralistic practice (Cooper & Dryden, 2016). In the following session, we asked Freddie if he would be interested in hearing our thoughts on an adaptation of his goal but emphasized that these were only our thoughts and gave permission for these to be rejected or renegotiated. With permission granted, we suggested that we could focus on Freddie's communication with his parents as a mechanism to help them understand how he feels and what support he desires from their relationship. We encouraged Freddie to reflect on our suggestion for a few moments before asking him if he was interested in exploring this approach. As Freddie recognized that it would be challenging to "control" his parents' actions, he was happy to focus on his own part of the relationship.

Establishing Client Preferences

Clients have a perception of what will help them now and have knowledge on what has helped them in the past. According to Cooper and McLeod (2011), in addition to establishing the client's goals, pluralistic practitioners should also aim to understand their preferences to service delivery. Once we had collaboratively established Freddie's goals for sessions, we asked him "Do you have any ideas as to how sessions could help you to get to where you want to be?" Although Freddie spoke broadly about his preferences, he admitted that he was unsure of how sessions could look and welcomed more guidance from us. To aid our discussion, we referred to relevant questions from the Cooper–Norcross Inventory of Preferences, a tool from counseling psychology that aims to capture client preferences and begin a dialogue between the client and practitioner (Cooper & Norcross, 2016). Typically, the Cooper–Norcross Inventory of Preferences is used as a self-report measure whereby the client rates their preference against statements related to various aspects of service delivery on a scale from −3 to 3. Nevertheless, we chose to verbally pose the statements as questions to gain a more contextually rich understanding of Freddie's preferences by allowing him to give more detailed responses in addition to his numerical answer. For example, we asked "How structured or unstructured would you like sessions to be?" "Would you like sessions to include a focus on our relationship?" "Would you prefer you or us to lead sessions?" and "Would you like us to be challenging or gentle?"

During our discussion, we learned that Freddie had worked with two very experienced SPPs throughout his career, each of which had their own unique approach to service delivery, and that his previous experiences of sport psychology support, which were both positive and negative, resulted in a number of strongly held preferences. Several of the client's preferences were readily articulated; for example, Freddie expressed a desire to build a strong rapport with us and encouraged us to share my own experiences where appropriate, so he felt "like I'm just catching up with mates," as well as a preference toward "having things to do outside of sessions." At this juncture, we reflected on the extent to which a more personal relationship and the merging of work across formal and informal settings may blur the boundary between a professional and personal relationship. Nevertheless, aligning to the first pillar of pluralistic practice, we remained open to the client's preferences. Other preferences were more implicit; for example, despite his objective bravado, Freddie appeared anxious and uncomfortable and often made jokes as we discussed times when he had felt low, indicating a preference toward not being encouraged to go into difficult emotions. As our discussion returned to the agreed goals, Freddie also insisted that he had previously attempted to verbally communicate his feelings to his parents on a number of

occasions and that another attempt at verbal communication would not be productive. After hearing the client's preferences, we concluded by assuring Freddie that we would take his goals and preferences into account and present an approach for our work to him in the following sessions. Critically, we also set the expectation that our approach and preferences were flexible and that either of us were able to return to the goals of our work and how it was undertaken at any point in our working relationship.

Timepoint 1: Letter Writing for Effective Communication

Timepoint 1 illustrates the work that we engaged in with Freddie immediately after the goals and preferences had been established. Congruent with a pluralistic approach, the goals that we agreed upon with Freddie served as an orienting point for our choice of approach (Cooper & McLeod, 2011). In addition, we *considered* Freddie's preferences toward not exploring verbal techniques to communicate with his parents, not to go into difficult emotions (e.g., frustration, anger, sadness, and isolation), and to be set tasks to be completed outside of sessions. After using supervision to deliberate an array of appropriate options, we presented Freddie with the key tenants of several potential approaches (e.g., acceptance and commitment therapy, motivational interviewing, and letter writing) and sought his feedback on what he was initially drawn to. Here, Freddie expressed an interest in a letter-writing approach (Rasmussen & Tomm, 1992), which involved writing a letter to his parents that explained how he felt about their current relationship and what he desired from their relationship moving forward, that we could then explore during sessions, continually rewrite, and in future decide whether to share, or not share, with his parents. We outlined how this approach adopted several of his preferences and that it was a different method of communication to ones he had been previously unsuccessful with and that he could work on his letter from home. We also shared with Freddie that the suggested letter-writing technique is thought to be particularly appropriate when working with sensitive topics (Rasmussen & Tomm, 1992) and may therefore be easier to express difficult emotions that he appeared to find uncomfortable verbally discussing in sessions. Encouraging Freddie to describe the range of difficult emotions that he was experiencing during times of low mood offered an alternative to the client's preferences; Freddie understood the benefits of this and agreed to pursue it with the letter writing.

As letter writing was to take place largely outside of sessions as an individual task (Rasmussen & Tomm, 1992), we were mindful to address Freddie's strong preference toward building a client–SPP relationship and for me to also share details of my own life and experiences. As an early-stage practitioner, I had never shared my own experiences due to fears of countertransference (Hayes et al., 2011). Nevertheless, in the present case, this appeared important to the client, and we dedicated a significant amount of time at the beginning of each session to talk and engage in suitable levels (as agreed in supervision) of self-disclosure, such as sharing our feelings in different contexts (e.g., "yesterday I felt frustrated while I worked on my research"). In addition, we maintained communication with Freddie throughout the week via text messaging in a group chat intentionally created for conversations between the client and both SPPs, enabling the supervisor to monitor the adherence to professional boundaries while maintaining the intended less formal and more consistent relationship.

Critical to a pluralistic approach, throughout the letter-writing intervention, we continued to monitor Freddie's preferences and assess the effectiveness of our work at the end of each session. Freddie expressed that he was able to fit letter writing in around his professional and personal life, and the flexibility in the approach enabled him to adhere to this task. Further, he expressed that his writing had multiple benefits; for example, he was able to use it as a reflective tool to express long-term issues, as well as a more spontaneous and reactive means of coping with challenging conversations with his parents. Although once completed Freddie did not share his letter with his parents, we all found it a useful point from which to orient sessions. Importantly, Freddie felt that, through our self-disclosure, he "knew us better" and as a result had a deeper client–SPP relationship. Finally, by reflecting together in our own space as codeliverers, we, the authors, identified clear links between the pluralistic approach that we had taken (i.e., the exploration of Freddie's preferences and our joint decision-making) and the effectiveness of our work that was evident from Freddie's feedback.

Timepoint 2: A Space for Organizational Stress

The second critical timepoint in this case was after 12 months of the working relationship. By this time, codelivery had ceased, and I had been working independently with Freddie for 6 months. Freddie sent me a message in the middle of the week, and I later learned via various media reports, that the head coach at his club had left his role by mutual consent. Freddie and I met later in the week, and he expressed new concerns associated with leadership change, namely, a reduction in engagement and commitment and an intention to leave (Wagstaff et al., 2016). Freddie and I met weekly, and after several weeks, it became clear that his professional life had become extremely volatile as the club's future looked increasingly ambiguous and uncertain. The instability and continually changing circumstances at his club meant Freddie brought new issues to each session, and our work became somewhat erratic and fragmented. To illustrate, one week, Freddie expressed a worry that the replacement head coach would have a different style of play and that he would not be favored in the team; the next week, he described feeling frustrated with the strength and conditioning coaches over the amount of autonomy he had with his training.

I recognized that the challenges Freddie currently faced, and his subsequent needs, were different from those that we discussed in our initial session. Further, Freddie and I had now been working together for a year and, although we had engaged in several shared reflective sessions and amended our practice accordingly, the present timepoint presented as a particularly critical moment to take stock, reflect on how his goals and preferences had changed over this time, and reestablish our working goals. I asked Freddie if he wanted to return to the goals and preferences we had established at the outset of our service delivery. At this timepoint, Freddie's primary goal for sessions was to navigate the current period of uncertainty and be able to cope with the ever-changing circumstances at his club. I asked a question that regularly enabled a conversation about goals: "Do you have any ideas as to how sessions could help you to get to where you want to be?" I also drew from questions in the Cooper–Norcross Inventory of Preferences, which I felt relevant, for example, "Would you like to have structure in the sessions?" and "Would you like me to be more supportive or confrontational?" Freddie responded by stating that he would like sessions to be unstructured with the ability to "see where the conversation takes us" and wanted to be more supported. As an early-stage practitioner, I felt anxious with the anticipation of

abandoning structure, yet my grounding in my pluralistic philosophy meant that I more strongly believed that adopting Freddie's preference, in the present moment of uncertainty and ambiguity, was best for him. Consequently, I preceded to continue to deliver in line with my pluralistic philosophical beliefs and approach, and I used supervision as a space to air my anxieties and develop my service delivery skills in more unstructured sessions.

Freddie's new goal and the distinct contrast between the client's present preferences (i.e., unstructured and supportive sessions) compared with his preferences at the outset of our work (i.e., tasks to complete at home) meant a need to introduce a different approach to that at Timepoint 1 (i.e., from letter writing and other home tasks). I initially brought the case to supervision for my supervisor and I to discuss the appropriateness of different approaches (e.g., acceptance and commitment therapy, motivational interviewing, etc.). Upon deciding that a more humanistic–existential approach may be most effective, I introduced this to Freddie and discussed that sessions would act as a space for him to share his experiences and emotions and for me as the SPP to consistently display congruence, unconditional positive regard, and empathy (Rogers, 1957). In line with this new approach, I guided Freddie toward understanding the complexity that he faced; clarifying elements that he struggled with; identifying meaning, goals and values; and taking accountability for his decisions and actions. During this period of organizational change, I encouraged Freddie to bring reflections on his experiences of the change to our sessions, as well as other topics he would like to discuss, to meet his needs for a more fluid approach to our work. During Timepoint 1, Freddie's presenting problem was isolated and specific and warranted a more direct approach. By changing to a more fluid approach at Timepoint 2, Freddie and I were able to embrace the complexity of his current situation and flex our focus in sessions, as it developed over time to encompass all challenges that Freddie faced.

Timepoint 3: Referral for a Concussion Injury

The final critical timepoint in this case was during the last 2 months of service delivery. Prior to this timepoint, Freddie and I had continued with our humanistic–existential approach, and his preferences had remained largely unchanged. I had felt comfortable in delivering this approach, and my belief that it continued to be appropriate and effective was supported by the client as I sought regular feedback. At this timepoint, Freddie arrived at our session and announced that he had suffered a serious concussion injury, the third of this career. He was experiencing dizzy spells and headaches, which were often triggered by taking part in training, but could also occur intermittently without an obvious trigger. Immediately, the more physical nature of his injuries and well-documented severity of concussions in rugby (e.g., Gardner et al., 2014) led me to suspect that this new presenting issue may be beyond my capability as an early-stage practitioner. In addition to these physical symptoms of his injury, Freddie raised his frustration of missing out on matches and training activity, being perceived by his coaches and teammates as an injury prone player, and the threat to his career. In the initial sessions that followed his disclosure, Freddie expressed that he wanted to continue our approach to sessions but work toward a new goal of dealing with the frustration of not training and playing and feeling a sense of accomplishment outside of rugby. Nevertheless, during this time, I felt increasingly uncomfortable with the knowledge that he may need more specialist support. Two months postinjury, Freddie continued to experience the aforementioned physical symptoms of his concussion injury, and this became his, and my, primary concern.

At this timepoint, I again encouraged Freddie to specify what he wanted from sessions, how he would like sessions to help him, and what his preferences were in this current moment. Freddie expressed that his primary focus was reducing his physical symptoms and the associated anxiety around his dizzy spells and headaches. Moreover, he stated that, to get to the point at which he was medically able to return to rugby or at least feel like he was progressing toward full fitness, he needed structured exercises and tasks. Freddie had worked with a concussion specialist, recommended by his club doctor, throughout his two previous concussion injuries, and his current goals and perception of needs mirrored the psychological support he had previously received throughout his recovery. From a pluralistic perspective, I deliberated that it was important to consider not only approaches that I was comfortable with but all approaches including those beyond my capability to ensure the options for effective service delivery were not limited. At this juncture, supervision played a critical role as I drew on my supervisor's extensive knowledge and experience of different therapeutic approaches. Acknowledging Freddie's positive previous experience with the concussion specialist and my lack of experience with concussion injuries, I suggested that being referred through the club doctor to the concussion specialist may be the best way to meet his needs (Van Raalte & Andersen, 2014). Nevertheless, both Freddie and I were hesitant to completely cease our work given the longevity of our relationship and the pluralistic stance. More specifically, and in line with my pluralistic philosophy, I was mindful that, at a future point in time, Freddie's needs will once again change, and it may be appropriate for us to resume our work. Freddie and I agreed to keep informal contact through messages using the group chat with my supervisor that was made at the outset of our service delivery and occasional phone calls throughout his return to play. The communication via the group chat provided a clear and intentional space for contact between Freddie and I but also allowed my supervisor and I to monitor ethical considerations to information communication (e.g., the topic of conversation). Informal communication with a client, without formal sessions, was again a new experience for me, and as such, I felt uncertain as to specifically how it would work and if it would be effective. The subsequent 3 months were characterized by messages and phone calls whereby Freddie would provide an update on their return to play, as well as informal conversation about, for example, recent sporting events. Throughout these final months, despite the ceasing of formal sessions, my relationship with Freddie developed, thus provided the prospect and opportunity for future work.

Reflections and Recommendations

In the following section, we attempt to illustrate several reflections of my experience in this case that demonstrates the realities, challenges, and nuances associated with working from a pluralistic philosophy of practice. These reflections form the basis for three key recommendations for SPPs who seek to adopt a pluralistic philosophy within their applied work.

Celebrate Diversity Across Clients

Elite sport systems are often characterized as volatile, uncertain, complex, ambiguous, and precarious environments for individuals who operate within them (Fletcher & Wagstaff, 2009; Wagstaff et al., 2016), and as a result, these individuals are likely to

experience a multitude of stressors throughout their career. Even a cursory glance at the extant literature in sport shows the range of performance and well-being-related issues that clients encounter (e.g., Arnold & Fletcher, 2012). Consequently, if SPPs are to engage in long-term work with their clients, they can expect to be faced with substantial diversity of needs and client goals throughout the working relationship. Throughout long-term service delivery, SPPs are likely to be required to continually react to such changes in needs and goals by adapting their approach. In the present case, over our two and a half year working relationship, the client had to navigate challenges related to performance, well-being, organizational change, injury, and relationships outside of sport. Furthermore, within each broader challenge, the client expressed numerous concerns; for example, when his head coach departed the club, he expressed concerns over losing the strong relationship he had with his coach, anxiety about who the next coach will be and threat to his selection in the team, uncertainty surrounding the wider direction of the club, and difficulty working with other individuals at the club who were also faced with organizational change. Although it may be daunting to work across a range of goals and react to the volatile and precarious nature of an elite sports environment, we encourage SPPs to embrace this diversity, recontract with the client to continually assess their needs and adapt the approach accordingly. Indeed, the present case is an example in which embracing the client's diversity of issues was necessary to continually provide an effective service at each different time point. The adaptable nature of the work in this case provides support for the appropriateness for a pluralistic approach in sport to meet the demands of such a volatile environment.

Actively and Continually Return to the Client Preference Dialogue

At the outset of service delivery, clients may find it difficult to articulate what they want from sessions or the way in which they would like sessions to achieve their goals, especially if their knowledge of therapeutic approaches is limited. Moreover, as reflected in the present case, client views and preferences may also change over time (Cooper et al., 2016). As such, it is critical that SPPs perceive metacommunication as a *process* that develops over the course of service delivery, as opposed to a singular event during the initial intake. In the present case, had I persisted with the initial goals and approach set at "Timepoint 1," I would have failed to meet their more immediate reactive needs following the unexpected events of leadership turnover and serious injury. Instead, by setting the expectation with the client that either one of us were allowed to return to a metacommunicative dialogue at any time, as the client's needs changed, such conversations became a natural element of our sessions and allowed our work to develop. Indeed, a reliable indication of when metacommunication was applicable was at times of significant change for the client, which led to me question what was going on for the client and how we could progress our work. In such situation, especially for SPPs who are in training, the first response can be to take such matters to supervision (e.g., Wadsworth et al., 2020), which is entirely appropriate. Indeed, during individual and codelivery in the present case, I continually reflected with my supervisor to make sense of Freddie's presenting problems and to assess the appropriateness of different approaches. Nevertheless, SPPs (and their supervisors) may also find value of directly consulting their clients about their interpretations. Finally, what is perhaps missing in the present case is the inclusion of intermittent, scheduled, review sessions, which may provide an ideal opportunity to reflect back at goals and shared decisions (Cooper et al., 2016). Given the power dynamic between the client and practitioner (Rennie, 1994), SPPs cannot expect clients to always freely and willingly express their goals and preferences, especially if they perceive the SPP to be moving forward with these already established. Planned review sessions, specifically allocated for reflection, may enable further comfortability for the client to openly share their preferences and may be particularly appropriate when they conflict with that of the current service delivery.

Share Your Knowledge

A misconception about metacommunication and shared decision-making can be that it is only what the client would like to get out of sessions that matters. On the contrary, metacommunication requires SPPs to be forthcoming when sharing their own knowledge and expertise and to challenge clients when necessary (Cooper et al., 2016). This is demonstrated in the present case, at the outset of our service delivery, as I shared with the client my observation that he found exploring difficult emotions challenging, and in my proposed letter-writing approach, explained that an intentional consideration was to encourage the exploration of such difficult emotions. The uncomfortableness of challenging client preferences cannot be downplayed; as the SPP, I felt anxious to not jeopardize our client–practitioner relationship and worked around this by phrasing such challenges as suggestions as part of the ongoing discussion.

As outlined within the health care sector (Makoul & Clayman, 2006), but also noteworthy for SPPs, it is during metacommunication that practitioners should discuss a variety of therapeutic approach options with the client. In the present case, for example, the client had already worked with a range of well-established SPPs who were rooted in different philosophies and had different approaches. As such, this client was perhaps better versed in different approaches compared with the knowledge that clients typically have at the outset of the working relationship. Although the client's experience of different approaches formed a fruitful starting point for discussion, I was mindful to expand the client's knowledge of different approaches beyond those that he had previously experienced. In doing so, I provided a full range of options to discuss, which eventually led to progressing with an approach that the client had not experienced (i.e., letter writing). It is important to consider, especially with individuals that have not previously worked with an SPP, that clients are unlikely to be familiar with the range of approaches being proposed. SPPs may, therefore, choose to take time to discuss a range of approaches and to ensure that the client has sufficient understanding to make an informed decision. To aid such discussions, two recommendations exist within the literature on shared decision-making. First, SPPs should hold "decisional equipoise" (Miller & Rose, 2015), that is, SPPs should present all options equally rather than assume what is best for the client. Second, SPPs should consider the available evidence when proposing options to clients (Cooper et al., 2016). For instance, in the present case, we shared with the client that letter writing may be an appropriate option as there is evidence to suggest that it is particularly effective for sensitive topics (Rasmussen & Tomm, 1992).

Question Client Preferences Where Appropriate

Another misconception of a pluralistic approach is that practitioners simply implement every client preference without question. Moreover, a counterargument to engaging in metacommunication may be that what a client *wants* is not necessarily what they *need*

(Cooper & McLeod, 2011). In actual fact, a pluralistic perspective suggests that, at each juncture of the metacommunication process, SPPs have the choice of different response options (Cooper & McLeod, 2011). To illustrate, in the present case, we *adopted* the client's preferences toward building a strong client–practitioner relationship, which we too perceived to be best for the client. Nevertheless, there were circumstances in which we felt it more appropriate to offer an *adapted* version of the client's preference. Indeed, although letter writing sufficed the client's preference to have tasks set at home, we noticed that the client felt uncomfortable with facing difficult emotions and believed that the client would benefit from support when exploring his letter. Therefore, the letter instead served to form the basis for conversation in sessions in which most of the work occurred. In circumstances in which we had a contrasting view to that of the client, we chose to offer an *alternative* approach. Indeed, throughout the organizational change process, the client's preference toward structured sessions felt unproductive, and we offered a more fluid approach. In the final months of our work, we also exercised our final response option, that is, to offer *another* source of help. This was exemplified when the client suffered a concussion injury, meaning their goals and preferences were outside my capability and better suited to a specialist in that area. To aid decision making at these critical junctures, SPPs must engage in their own reflective practice either individually, or as illustrated in the present case, within supervision.

Conclusions

A pluralistic philosophy describes the belief that different clients need different approaches at different points in time, and, in turn, there is no singular best approach. Further, a pluralistic approach describes the conscious and deliberate attempt to draw on methods from one or more different perspectives and is characterized by a negotiation and dialogue between the client and practitioner regarding the goals and approach to practice. The present case demonstrates that involving clients in decisions may be necessary to provide the most effective support as their needs change within the volatile environment of elite sport. Our final concluding message is one of "being pluralistic about pluralism." We demonstrate and promote the benefits of metacommunication and show that the extent to which different clients want to engage in shared decision-making may be equally as varied. In circumstances in which a client actively resists engaging in metacommunicative activity, we recommend SPPs assess their situation and, like with other preferences, *adopt*, *adapt*, offer an *alternative*, or suggest *another* source of help.

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