

1 Abstract

2 The rapid growth in forms of technology used within society presents the field of sport and
3 exercise psychology with numerous opportunities and considerations. Nevertheless, there
4 currently exists a scarcity of knowledge or research for Sport Psychology Professionals (SPPs) to
5 draw from when seeking to use technology and media in their service delivery. This article
6 presents a commentary on the perceived opportunities and considerations drawing primarily from
7 the online counseling literature and we offer recommendations for good practice for SPPs
8 utilizing technology and media in service delivery.

9 *Keywords:* Sport Psychology Professionals, Online service delivery, Computer-mediated
10 communication, Technology.

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15 **Opportunities and considerations of new media and technology in sport**
16 **psychology service delivery**

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ONLINE SERVICE DELIVERY

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28 The rapid growth and expansion in technological advancements (e.g., video
29 conferencing, mobile applications, social media) has recently received scholarly attention in the
30 field of sport and exercise psychology (Bird & Harris, 2019; Cotterill & Symes, 2014; Cottrell et.
31 al, 2019). This growing interest and upsurge in the use of technology in the provision of sport
32 psychology, has been further accentuated by the COVID-19 pandemic. As such, these
33 advancements in technology have benefitted the profession by offering Sport Psychology
34 Professionals (SPPs) new and innovative ways of working with clients. For example, SPPs have a
35 range of online platforms (e.g., Skype, Zoom, Facetime, Google Hangouts, Cisco WebEx,
36 Microsoft Teams) to utilize when working with individuals online. Further, some of these online
37 platforms also offer additional functions (e.g., breakout rooms, screenshare), which enable
38 practitioners to work more creatively with teams online.

39 Traditionally, SPPs have employed conventional face-to-face consultancy methods when
40 delivering the provision of sport psychology (Fletcher & Wagstaff, 2009). While these
41 approaches continue to have substantial merit, the current landscape in which SPPs operate in
42 continues to evolve (Sly et al., 2020). Therefore, SPPs are required to consider new ways of
43 working to ensure effective sport psychology service delivery. Given the atypical conditions of
44 the professional environment (e.g., time, location, long working hours), one way in which the
45 provision of sport psychology has evolved to meet these demands, is through the emergence of
46 working in geographically dispersed teams. Geographically dispersed teams are defined as
47 groups that are separated by time and/or distance and must undertake work that includes
48 technology, teamwork and communications (Sessa et al., 1999). This definition aligns with the
49 current landscape in which SPPs operate in, given that it is not uncommon for SPPs to work with
50 clients across different time zones and locations.

51 In addition to the influence of the professional environment in which SPPs operate in,
52 clients seeking to use the services of SPPs have also been influenced by technological
53 advancements. For example, clients may now own numerous electronic devices (personal
54 computers, tablets, cellular/mobile telephones), that allow them to interact with SPPs in a variety
55 of capacities (e.g., e-mail, phone call, video conferencing; cf. Blind Manuscript). In light of this,
56 SPPs are challenged to respond to these new forms of communication while being mindful of the
57 impact of these changes to their effectiveness and manage the expectations and needs of their
58 clients as part of a continued development and evolution of their practice (Cottrell et. al, 2019;
59 Quartiroli et al. 2019). Indeed, these technological advancements offer a number of opportunities
60 and considerations for SPPs operating in the field. The aim of this article is two-fold. First, we
61 aim to highlight the opportunities and considerations of using technology in online service
62 delivery regarding the working alliance, accessibility, anonymity and disinhibition, time delays,
63 absence of verbal and nonverbal cues, and technological issues. Second, we aim to provide good
64 practice recommendations for SPPs seeking to use technological-based consultancy approaches.

65 **Opportunities and Considerations**

66 While traditional face-to-face consultancy methods continue to be a popular method of
67 sport psychology service delivery, technology offers new ways for SPPs to work with clients.
68 Despite the growing interest into the role media and technology play in the provision of sports
69 psychology (Bird & Harris, 2019; Cottrell et al., 2019), there remains a paucity of research
70 available to inform SPPs practice. Nevertheless, there exists a body of online counseling
71 literature (Richards & Viganó, 2013; Harris & Birnbaum, 2015) that may provide a useful
72 resource for SPPs to draw from when attempting to develop effective online services.

73 Online counseling has been defined as “the delivery of therapeutic interventions in
74 cyberspace where the communication between a trained professional counsellor and client(s) is
75 facilitated using computer-mediated communication (CMC) technologies, provided as a stand-
76 alone service or as an adjunct to other therapeutic interventions” (Richards & Viganó, 2012, p.

77 699). This form of service provision is unfortunately often used interchangeably with e-therapy,
78 e-counseling or cybertherapy, which results in conceptual confusion on how it is defined. While a
79 range of CMC technologies are available, these can be broadly categorized as being either
80 asynchronous or synchronous. Asynchronous communication (e.g., emails) means that the
81 client's and practitioners communication do not occur simultaneously (Barak & Grohol, 2011)
82 whereas, synchronous communication (e.g., video conferencing) means that the sessions occur in
83 real time (Elleven & Allen, 2004). Additionally, these types of communication modalities can
84 either be conducted singularly or in conjunction with one another. To illustrate, a practitioner
85 may conduct a video-based consultation with a client (synchronous) and then follow-up after the
86 session with an email (asynchronous). As such, asynchronous and synchronous communication
87 both present opportunities and considerations for practitioners when using CMC technologies.

88 In drawing on the most prominent of these opportunities and considerations, we pay
89 specific attention to: working alliance; accessibility; anonymity and disinhibition; time delays;
90 absence of verbal and nonverbal cues; and, technological issues.

91 *Working Alliance*

92 The working alliance is a term used synonymously with the therapeutic relationship or
93 client-practitioner relationship, and refers to a negotiated, collaborative feature of the helping
94 relationship (Bordin, 1979). It is recognized by researchers (Orlinsky et al., 2004), that the
95 working alliance is an integral component in the successful outcome of any intervention. As such,
96 an absence of the working alliance or a failure to develop one, is likely to undermine the
97 effectiveness of an intervention (Gelso & Hayes, 1998). Although, a plethora of research exists
98 examining the role the working alliance plays in traditional face-to-face counseling (Orlinsky et
99 al., 2004), the extant literature on the working alliance in online service delivery remains scarce.
100 Consequently, this presents a significant challenge for practitioners in cultivating equally
101 meaning relationships with clients when employing CMC technologies and ultimately promoting
102 effective service delivery (Richards & Viganó, 2013).

103 In an early review of the literature regarding the working alliance in online counseling,
104 Mallen et al. (2005) reported equivocal findings when comparing the strength of the working
105 alliance in face-to-face counseling and online counseling. Since the review of literature, a
106 growing body of research (Leibert et al., 2006; Buffini & Gordon, 2015) has been conducted,
107 which has revealed more positive findings to support the notion that developing a working
108 alliance in online service delivery is feasible. For instance, Leibert et al. (2006) found the
109 working alliance to be a predictor of client satisfaction in e-therapy. Nevertheless, the strength of
110 the working alliance and client satisfaction were reported higher in face-to-face counseling than
111 clients who received e-therapy. Similarly, Buffini and Gordon (2015) reported a significant
112 positive relationship between the strength of the working alliance and client satisfaction when
113 using synchronous instant messaging services for crisis interventions. Further, when comparing
114 these findings to previous research conducted in offline settings, participants scored significantly
115 lower on both working alliance and client satisfaction ratings.

116 More recently, qualitative researchers (Barrazzone et al., 2012; Cipolletta et al., 2018)
117 have attempted to explore the relational features underpinning the working alliance in online
118 service delivery. Barrazzone and colleagues (2012) conducted a qualitative inquiry into whether
119 relational features in establishing, developing and maintaining a working alliance, could be
120 translated into a computerized CBT program. These findings can be interpreted to indicate that
121 relational features in establishing (e.g., empathy, warmth, unconditional acceptance), developing
122 (e.g., feedback, developing a secure base) and maintaining (e.g., flexibility, responsiveness) were
123 emulated in a computerized CBT program.

124 In sum, while the body of literature regarding the working alliance in online service
125 delivery is in its infancy, some important considerations can be drawn to inform SPPs practice.
126 Most notably, it is possible that the relational imperatives critical to establishing, developing and
127 maintaining a working alliance within face-to-face counseling can be achieved via online service
128 delivery settings yet, it is important for practitioners to be cognizant of the limitations of

129 developing an online working alliance. Put simply, it is still possible for SPPs to foster a working
130 alliance online with their client in order to facilitate behavior change.

131 *Accessibility*

132 One of the most frequently cited advantages of using technology in online service
133 delivery is the increased accessibility for both clients and practitioners. Given the unique context
134 in which SPPs operate in (e.g., clientele, atypical working settings), technology provides greater
135 access to working with clients online and can help reduce barriers that are often associated with
136 traditional face-to-face counseling services (e.g., geographical constraints, limited hours, mobility
137 challenges) (Barnett, 2005). As a result, technology provides clients in remote or underserved
138 areas greater flexibility and accessibility in engaging in the provision of psychological support
139 (Riemer-Reiss, 2000). In addition, clients seeking to engage in face-to-face counseling services
140 may feel stigmatized by the service delivery process and experience feelings of shame (Rochlen
141 et al., 2004). Online service delivery lends itself as a viable alternative that may be more
142 accessible to such individuals, as it has the potential to reduce the stigma attached with seeking
143 help (Rochlen et al., 2004) and can also enhance positive help seeking attitudes (Chang, 2005).

144 While the use of online service delivery opens up new opportunities through increased
145 accessibility, the use of technology may also pose accessibility challenges to both clients and
146 practitioners. Individuals who do not have access to technology or possess the requisite skills and
147 knowledge to effectively utilize such services, may perceive online service delivery as
148 inaccessible (Riemer-Reiss, 2000; Elleven & Allen, 2004). Indeed, limited technological literacy
149 is a challenge to online service delivery therefore, practitioners must take precautions not to
150 alienate and/or isolate the client's technological literacy ability (Elleven & Allen, 2004).

151 Interestingly, the increased accessibility afforded through using technology in online service
152 delivery may also pose ethical concerns regarding communication boundaries, as SPPs may be
153 perceived by client's as being accessible at all times. The potential risk of blurred communication
154 boundaries is an important consideration for SPPs when using technology in the online service

155 delivery process, which emphasizes the importance for SPPs to manage client's expectations on
156 availability by negotiating and establishing a set of clear boundaries at the outset of consultancy.

157 *Anonymity and Disinhibition*

158 It is often reported in the online counseling literature (Richards & Viganó, 2013; Harris &
159 Birnbaum, 2015) that clients enjoy the natural sense of anonymity provided by the online
160 environment. Traditionally, clients who sought online service delivery were able to engage with
161 such services without disclosing identifiable information (Harris & Birnbaum, 2015).

162 Nevertheless, the changes to professional guidelines and ethical standards has meant that the
163 process of how clients are recruited, identified and assessed have changed (Richards & Viganó,
164 2013). In particular, these changes to professional guidelines and ethical standards have arisen to
165 consider the risks associated when working with children and young people online. For example,
166 assessing whether the client is Gillick competent or to ensure a required level of confidentiality is
167 achieved by knowing who else is in the room or nearby during consultancy.

168 Although changes to the professional guidelines and ethical standards of online service
169 delivery have removed a full sense of anonymity for clients, it is still possible for clients to
170 experience, to some extent, a natural sense of anonymity. In particular, perceptions of anonymity
171 when engaging in online service delivery have been suggested to facilitate psychological safety,
172 disinhibition and increased self-disclosure (Suler, 2010). While traditional counseling services
173 often have social stigmas attached (e.g., gender, physical appearance) when seeking professional
174 support (Efstathiou, 2009), the perceived anonymity offered through online service delivery has
175 the potential to reduce such stigmas and the associated anxieties. In turn, this may result in
176 increased disinhibition and accelerate the rate at which clients disclose information due to the
177 lack of nonverbal cues available (Rochlen et al., 2004).

178 In sum, online service delivery may increase feelings of safety, diminish a client's sense
179 of vulnerability and play a facilitative role in disclosure, and assisting the working alliance (cf.
180 Harris & Birnbaum, 2015). Therefore, SPPs should carefully integrate technology in the service

181 delivery process to create environments that are psychologically safe and provide a sense of
182 perceived anonymity, which will increase disinhibition and result in more effective practice.

183 *Time Delays*

184 An important distinction made between CMC technologies is whether they can be
185 categorized as asynchronous or synchronous. Synchronous communication allows clients and
186 practitioners to communicate in real time (e.g., video conferencing), while asynchronous
187 communication does not occur in real time and has a natural time delay built into the service
188 delivery process (e.g., emails). Any communication time delay has the potential to lead to anxiety
189 being experienced by either the client or practitioner following a perceived or unexplained delay
190 in response (Richards & Viganó, 2013). Further, the ambiguity that can be experienced when a
191 response is delayed can cause a blank screen, whereby one projects their own expectations,
192 emotions and anxieties (Suler, 2004). While therapeutic interventions delivered through
193 asynchronous communication will differ considerably to those delivered through traditional
194 approaches, the time delay may mean that what can be achieved in one face-to-face session could
195 potentially take several days or weeks in asynchronous online service delivery (Barnett, 2005).

196 Nevertheless, the use of asynchronous communication may serve as an adaptive function
197 especially, given the atypical working environment that SPPs operate in. For example,
198 asynchronous communication may be important when consulting with clients competing in
199 different time zones or employed as an alternative to synchronous communication to promote
200 professional quality of life when experiencing ‘compassion fatigue’ (Quartiroli et al., 2019).
201 Asynchronous communication also has the potential to facilitate the development of a zone of
202 reflection, whereby clients and practitioners have the opportunity to take their time to engage in
203 deeper reflection before responding to messages (Richards & Viganó, 2013). As such, this level
204 of reflection might enable clients to process experiences, emotions, reduce impulsivity and
205 enhance self-awareness and self-expression (Hanley, 2009).

206 *Absence of Verbal and Nonverbal Cues*

207 It is well-recognized by consumers of sport psychology (e.g., athletes, coaches, parents,
208 gatekeepers) that interpersonal skills are desirable characteristics of SPPs (Thelwell et al., 2018;
209 Woolway & Harwood, 2019; Woolway & Harwood, 2020). In particular, verbal (e.g., tone,
210 speech) and nonverbal cues (e.g., body language) are of critical importance to practitioners in
211 gaining an understanding and insight into the client's thoughts, feelings and behaviors (Harris &
212 Birnbaum, 2015). Unlike traditional face-to-face counseling that typically offers able-bodied
213 observations of verbal and nonverbal cues, practitioners are less able to observe such cues in
214 online service delivery. This absence of verbal and nonverbal cues poses communication
215 challenges for both the client and practitioner which may mean that information could be
216 misinterpreted or misunderstood. Consequently, this may negatively affect the working alliance
217 and reduce the effectiveness of service delivery (Harris & Birnbaum, 2015; Bird & Harris, 2019).

218 While the absence of verbal and nonverbal cues is recognized as a limitation of online
219 service delivery, scholars (e.g., Suler, 2004; Hanley, 2009) argue that the absence of such cues
220 could benefit the service delivery process. To elaborate, clients have often reported that the
221 absence of nonverbal cues can help alleviate any concerns they hold, with regards to the
222 practitioner's reactions when disclosing personal information (Richards & Viganó, 2013). In turn,
223 individuals who are sensitive to the physical presence of others and social cues indicating
224 disapproval or judgement, would be ideally suited for online service delivery given the role it
225 plays in facilitating feelings of psychological safety and disinhibition (Leibert et al., 2006).
226 Moreover, due to the lack of verbal cues present in online service delivery, clients may
227 experience greater feelings of empowerment and autonomy over what they disclose to
228 practitioners, especially if it is sensitive information (Hanley, 2009).

229 In sum, given the perceived relative importance of SPPs having strong interpersonal skills
230 (Woolley & Harwood, 2020), it is even more pertinent that practitioners pay careful attention to
231 the interpersonal skills they employ when consulting online, in an attempt to mitigate the
232 potential challenges of an absence of verbal and/or non-verbal cues when working online.

233 Technological Issues

234 The use of technology in online service delivery has many associated benefits (e.g.,
235 accessibility, disinhibition, reflection) however, it is not without its limitations. In fact,
236 technology has been identified as being a barrier to effective service delivery (Haberstroh et al.,
237 2007). Practitioners who use technology in the provision of online service delivery may
238 experience internet connection issues or computer-related problems (Riemer-Reiss, 2000).
239 Subsequently, interference from technological issues may lead to both clients and practitioners
240 experiencing frustration, which could potentially thwart the working alliance (Haberstroh et al.,
241 2007; Haberstroh et al., 2008). If these technological issues persist or are unresolved this may
242 isolate a client for a prolonged period of time or in extreme cases, lead to the termination of an
243 intervention (Baker & Ray, 2011). Therefore, in the event of any technological issues,
244 practitioners must have the basic technological competences to troubleshoot any software or
245 hardware issues and provide alternative means of service delivery (Riemer-Reiss, 2000).

246 Concluding Remarks

247 Given the growing use of technology and new media, practitioners have shown an
248 increased interest in the role technology plays in service delivery. Despite this interest, there
249 exists a limited sport psychology-specific knowledge base for professionals to draw from that
250 informs their practice when seeking to use media and technology in the provision of sport
251 psychology. Therefore, this presents scholars with a number of future research opportunities to
252 expand the evidence-base in which practitioners can draw from when consulting online. In
253 particular, future research should aim to explore clients' and practitioners' perceptions of the
254 utility, ease of use, and effectiveness of technology in the online service delivery process.
255 Additionally, researchers should also seek to understand on how best to measure the effectiveness
256 of using technology and media in the provision of sport psychology.

257 In this commentary we have attempted to draw to the readers' attention to several key
258 opportunities and considerations relating to the use of technology in online psychological

259 support. Namely, working alliance, accessibility, anonymity and disinhibition, time delays,
260 absence of verbal and nonverbal cues and, technological issues. As such, these opportunities and
261 considerations for using technology in online service delivery could act as a solid foundation in
262 which SPPs can draw on to inform their practice.

263 In conjunction with these opportunities and considerations, it must also be recognized that
264 online service delivery presents a range of ethical and legal implications that SPPs need to be
265 aware of and navigate. For example, SPPs need to consider confidentiality, competency, online
266 security, licensing and Gillick competence to name a few (Bird & Harris, 2019; Cottrell et al.,
267 2018; Harris & Birnbaum, 2015). Another key consideration that we acknowledge having
268 influence on the utility of working online, are the varying levels in which SPPs operate at,
269 notably one-to-one, dyadic, team and systemic levels (Sly et al., 2020). Therefore, in the next
270 section we offer some good practice recommendations for online service delivery at the
271 individual (e.g., athletes, coaches) and dyadic (e.g., athlete-coach, athlete-parent) level, which we
272 recognize may be less impactful at a systemic level.

273 **Recommendations of good practice**

- 274 • We recommend that practitioners undertake formal training in online service delivery to
275 develop core competencies and knowledge that are necessary when using technology in
276 the provision of sport psychology.
- 277 • The client's technological literacy ability, knowledge and confidence in using CMC
278 technologies should be assessed before introducing into the service delivery process.
- 279 • When working with children or young people, practitioners must assess whether the client
280 is Gillick competent before any consultancy can take place.
- 281 • Practitioners must also gauge whether using technology in the provision of sport
282 psychology will either aid or hinder the establishment, development and maintenance of
283 the working alliance.

- 284 • Expectations regarding response times to messages (e.g., emails) should be clarified with
285 the client at the start of the consultancy process, in order to guard against any anxieties
286 that may arise from a delayed response.
- 287 • We recommend practitioners use noise cancelling headphones, to ensure confidentiality
288 and eliminate any potential distractions that may occur outside the consulting room.
- 289 • Practitioners should carefully consider the background displayed when consulting online
290 and where possible, use neutral backgrounds to avoid showing personal space which may
291 result in discomfort being experienced by the client and/or practitioner.
- 292 • In the event of a crisis situation, practitioners should have a list of emergency contact
293 details to hand, so they are able to coordinate emergency support in a timely manner.
- 294 • We also recommended that practitioners have a contingency plan for alternative service
295 delivery approaches that mitigate against the potential negative consequences that may
296 arise from any technological issues encountered.
- 297 • Webcams or in-built laptop cameras should be placed at eye level to avoid any perceived
298 power imbalances by the client (e.g., practitioner looking down on client).
- 299 • Video chat-based software's (e.g., Zoom) often include a screenshare feature that is useful
300 in making sessions interactive and offers a creative alternative to a whiteboard.
- 301 • Due to the potential absence or reduction of verbal and non-verbal cues available,
302 practitioners should pay close attention to the cues available, in an attempt to understand
303 the client's thoughts, feeling and emotions.
- 304 • Practitioners using technology are encouraged to adopt a flexible approach that allows
305 them to alternate between technological and traditionally consultancy approaches, in order
306 to meet the needs and expectations of the client.
- 307 • Given the labor intensive nature of online service delivery, we recommend practitioners
308 engage in self-care by taking regular breaks (Quartiroli et al., 2019).
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